

MOH & MOE

Guideline for the implementation of Ethiopian Residency Matching Program

Strategic Steering Group

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This guideline is subject to revision at least every year and can be amended as deemed necessary by the SSG

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Acronyms

ERMP: Ethiopian Residency Matching Program

EBRMP: Exam Board for Residency Matching Program

ETA Education and Training Authority

EMA Ethiopian Medical Association

MOH: Ministry of Health

MOU: Memorandum of Understanding

MOE: Ministry of Education

RHB: Regional Health Bureau

SSG: Strategic Steering Group

I. Background

The Government of Ethiopia recognizes that healthcare is one of the crucial components of basic social services with direct linkage to growth and development of the country as well as to the welfare of the society. Accordingly, the Ministry of Health is committed to reduce morbidity, mortality, and disability and to improve the health status of the Ethiopian people through accessing basic health services. (FMOH, 2011)

Attainment of the sustainable development goal depends partly on ensuring universal access to health through enhancing the quality and quantity of the health workforce who can provide ranges of health care services including advanced and specialized care. Hence, the Ministry of Health has rightly identified strengthening advanced training of health workers as one of the strategic priorities of the national human resources for health.

Among these strategies are to:

- Expand residency training programs through increasing the number and enrollment capacity of training institutions
- Increase the number and capacity of faculty at the training institutions through availing fellowship opportunities

The rise in public needs for advanced and better-quality care, the epidemiological transition, rapid urbanization, rising health literacy, and broader social and economic changes occurring in the country necessitate increased quality and number of medical specialists. However, the existing health care service is not meeting those needs and changes. The country is not producing highly trained health professionals in adequate quantity though there has been an increase in medical specialty training programs opening in the past few years. Enrollment and output has been persistently low failing to match the supply of specialist doctors to population needs.

The training capacity during the pre-ERMP era was not fully utilized, with only a handful of universities running residency programs and graduating a small number of specialists.

There was a tendency on part of some physicians to be trained only in a certain institution even though there are other institutions with comparable training capacity.

To address these challenges, in 2017 Ministry of Health has launched a national residency matching program which caters coordination, recruitment, testing, and matching of applicants for residency training programs centrally. Since then more than 5000 GPs have been matched and deployed to different institutions nationwide in 22 specialties.

II. Definitions

- **Candidate:** An eligible applicant to the residency matching program.
- **Declaration:** a statement that announces the candidate's responsibility for the information provided during application and the consequences thereafter.
- **Eligible applicant:** A licensed medical doctor with work experience (as a general practitioner) of 1 year and above. However, be reminded that after matching all matched applicants except the foreign ones MUST produce evidence to the registrar office proving that they are free from any government obligation as a General Practitioner.
- **Foreign applicant:** an applicant from foreign countries to pursue residency program in Ethiopia.
- **Foreign graduate:** is a medical doctor who studied in a recognized medical school abroad.
- **Matching:** Applicant's choice of specialty and institutions are matched with candidates' performance in centrally administered written entrance exam.
- **Resident:** A candidate, who is matched through ERMP, registered and started training and clinical service.
- **Self-sponsor:** A candidate who planned to support him/herself (except tuition fee) during the period of residency training.

- **Sponsor:** Ministry of Health or federal institutions (Federal police, Ministry of defense, etc...) or private or charity organizations or foreign applicants with or without scholarship that supports the resident financially during the period of training and deploys them to work by the end of the training.
- **Standardization of institutions:** supporting, encouraging, and enforcing institutions to meet the minimum requirement to start and or run residency programs in terms of infrastructure, human resource, residency well-being, vaccines, learning environment, housing, offices, duty room, laundry, patient load and mix as set by the national standard for postgraduate medical training developed by respective professional associations. Standardization tool shall be endorsed by committee nominated by SSG.
- **Training institutions:** these are either university-based or hospital-based medical schools, recognized to run clinical medicine graduate programs in specific discipline after being evaluated as per the agreed upon standard and fulfilled the minimum requirement (accredited). These schools/institutions can be public or private owned.
- **SSG:** It's a national committee which oversees the overall ERMP activity in Ethiopia. It consists of representatives from each medical school running a residency program (mainly school deans or CEDs), delegates from selected RHBs, EMA, MOE and MOH. Ministry of Education chairs the meetings while MOH facilitates them.

III. Objectives of ERMP

The program is intended to create a well-functioning and efficient system of residency matching under the leadership of the Ministry of Health to have well trained specialists in adequate number and quality so as to meet the health needs of the people.

The program is also intended to assure all schools with residency programs to have enrolled to their full capacity, applicants get accepted to their preferred program and institution, schools with residency programs to meet the minimum requirement and aspire for quality and most sought-after program and strive to be and remain competitive to attract the best applicants.

IV. Roles and Responsibility of stakeholders

A. Training Institutions' responsibilities

- Assign a delegate who can serve as SSG member;
- Participate in consultative meetings organized by the SSG;
- Participate in item developments workshops;
- Conduct field specific physical assessments of candidates deployed to the institution.
If a candidate is found unfit, they can reject admission;
- Admit and register only those successful and fit candidates who are **matched** through the Ethiopian Residency Matching Program;
- Notify to MOH the list of residents by program who are actually registered and have started the residency training;
- Request and secure budget every year from the Ministry of Finance for the salaries and benefits of residents;
- Hire newly deployed residents at the rank of a beginner lecturer on contract basis for the period of the training;
- Manage those hired residents as per their contract and rules and regulations of the institute;
- Conduct the learning-teaching as per the rules and regulations of the institute;
- Set clear criteria to recruit specialist doctors for academic position who have completed residency at their school or another school;
- Submit a request to Ministry of Health to deploy the selected specialist doctors to their institution;

B. MOE

- Chair the strategic steering group;
- Be responsible for all communication and follow-up of the universities;
- Call regular and extraordinary meetings;
- Draft meeting agendas and announce the meeting date and venue;

- Communicate with other stakeholders as needed on technical issues;
- Maintain all data and records together;

C. MOH

- Communicate meetings;
- Facilitate financing of SSG meetings;
- Set action plan for the SSG meetings with detailed budget;
- Communicate meeting agendas two weeks prior to the meeting;
- Prepare and distribute minutes to board members;
- Presents the SSG recommendations to higher bodies in written form;
- Collect and disseminate relevant documents that are approved by the Chairperson;
- Keep copy of documents and records of the SSG and the examination board;
- Facilitate funding to cover residents' salary from Ministry of Finance to the respective medical schools;
- Develop a detailed implementation plan for national residency matching;
- Centrally manage the recruitment, examination and placement of residents;
- Follow, direct and execute the periodic guideline revision and implementation;
- Organize a consultative workshop with broader group of stakeholders;
- establish ad hoc committees as needed;
- Conduct quality control and assessment of the residency matching program;
- Support quality assurance offices of universities on development of standardization tools;
- Monitor, evaluate and improve ERMP;
- Propose new members of SSG;
- Chair meetings in the absence of the Chairperson;
- Organize awareness creation and advocacy activities;

D. SSG

- Oversees the overall ERMP activity;
- Meets every three months and if necessary anytime in between urgently;
- Produces guideline for the national residency matching program and make periodic revisions;
- Supports the implementation and development of ERMP;
- Approves the minutes of the last meeting with input from members;
- Approves new members of the SSG;
- Defines membership, mandates and accountability of the ERMP;

E. SSG Members' responsibilities

- Participate in SSG meetings;
- Provide technical inputs and resources in SSG meetings;
- Complete individual assignments on time;
- Follow standard meeting procedures and activities;
- Propose an agenda for a meeting;
- Each member has one vote;

V. Recruitment

Who can apply?

- A medical Doctor (MD) or holder of equivalent degree (for British system schools) graduated from any institution recognized by MOE or from any accredited medical school abroad and recognized by the respective regulatory body;
- and who:
 - has served as a general practitioner for at least 1 year before the application time;

- can produce official clearance for his previous professional service (up on the request after matching);
- is able to process his/her official copy for his/her undergraduate education (up on the request after matching);
- did not match and started residency training in the previous ERMP years;
- can produce evidence of equivalence from ETA (for foreign graduates);
- Since the medium of instruction is English, foreign applicants must be fluent in writing and spoken English, and also are required to learn the major language in the area they are to be assigned.
- Any certified and licensed medical doctor fulfilling the above criteria can apply for residency whether she/he has sponsorship or is self-sponsored.
- However, the following quota allocation will apply during matching:
 - A minimum of 90% is dedicated to candidates sponsored by the government (MOH and higher learning institutions).
 - A maximum of 3% is dedicated to candidates sponsored by private and charity institutions, and for those who apply for self-sponsorship.
 - A maximum of 2% is dedicated to candidates sponsored by the Ministry of Defence, federal police and federal prisons.
 - A maximum of 5% is dedicated to candidates from foreign countries (requested by the Ministry of Foreign Affairs).
- If the quota for applicants sponsored by private/charity organizations and federal sponsors and for foreign applicants and self-sponsored applicants is not utilized, the allocated quota will be used by government sponsored.
- Medical doctors who have been already matched and registered for education in the previous years are not eligible.
- Those candidates who were denied matching last year for similar reasons might apply this year if they can produce evidence from the school where they have been registered proving that they have permanently left the school.

How can they apply?

- The first step is to apply to sit for the written entrance exam. This is done through the online registration system on the dedicated website.

During application the following **MUST be uploaded** with the Application form:

- scanned copy of **undergraduate medical degree** original or tempo;
 - scanned copy of valid (active) **medical licensure** certificate or letter of employment;
 - scanned copy of the **application fee receipt**;
 - scanned copy of an official letter that indicates **service year (as a general practitioner)** in full months, in which end date refers to the 1st date of the application; Those candidates who have served at a managerial position can attach their letter of evidence.
 - scanned copy of **sponsorship letter** (for those who are sponsored by higher learning institutions (universities) or private or charity institutions or federal sponsors (federal police, prison, Defence, etc...));
 - evidence of paying back their **cost-sharing** for their undergraduate education (for those who wish to be sponsored by MOH); An applicant should be able to process the official transcript when requested;
- Declaration: Applicants are advised to conduct thorough medical checkup (See annex-II for the physical examination details) before completing the application to avoid latter discomfort. However, applicants must know that respective departments will do a medical check-up as it is stated in the curriculum to attest it.
 - The declaration also declares that the information provided by the applicant is genuine and the applicant takes all the responsibility and accountability for issues coming as a consequence.
 - Foreign applicants applying online and not benefiting from the scholarship should upload a scanned copy of a letter from the Ethiopian Ministry of foreign affairs or Ethiopian Ministry of Education.

- After processing the application, exam dates and list of eligible candidates with allocated exam centers will be announced.

What do they apply for?

- A candidate can apply for **one specialty field** and up to **a maximum of three places of study** for that chosen specific specialty in ranking order. Candidates are advised to choose those institutions which they prefer to and are sure to study in if they are matched.
- Candidates who are sponsored by higher learning institutions (universities) or private or charity organizations or by federal sponsors (like defense, police ...etc) should select the specialty as to his/her sponsor's preference.

When do they apply (register)?

- Application - within a period specified in the instruction for application (registration).
- Screening - during the registration period and two weeks after the last day of registration.
- Incomplete registrations will automatically be deleted in 72 hours from the startup of registration.
- Examination - after screening (to be decided accordingly)

How frequently can they apply?

- Candidates can apply every year, but in a year, an applicant is able to register only once. Those who register multiple times using different accounts will be disqualified from the competition.
- Those who have already been matched in the previous years, but notified the ERMP secretariat immediately after matching that they have not registered and have not started education as residents are eligible to apply for this year's ERMP.

- But, if a matched candidate refuses to join the program he/she is matched for in two consecutive years, he/she will not be eligible to compete in the next round.
- Those who have already been matched in the previous years, registered and had started education as residents, but didn't notify timely are not eligible to register in this year's ERMP. If found, they will be disqualified from the competition.
- Those who were matched and registered, and have started education before ERMP 2021 and denied matching in 2021 must produce evidence as they permanently stopped education from the medical school in which they started education for reconsideration.

Application fee

- Ethiopian citizens – **500 Birr**
- Foreign applicants – **50 USD**
- Waiver for candidates coming through Ministry of Foreign Affairs
- Payment mechanism:
 - 1.1 through an account at Commercial Bank of Ethiopia (**account number 1000000984877**) owned by MOH;

Screening of Applicants

- Applicants who properly submitted their application are considered to be eligible for the written exam. Applications in draft status will be disqualified.
- Candidates with duplicate applications and those who had matched in previous years and started residency will not be allowed to sit for examination.
- Candidates who uploaded inappropriate documents will not be allowed to sit for the exam. He/she will also be denied from competing in the next academic year.

Who can take the residency entrance examination?

- An applicant who passed through the screening process and whose eligibility has been verified and listed to sit for the exam.

About the entrance exam

- The entrance exam is only multiple-choice questions (MCQ) which are mostly case-based with little or no recall questions.
- The objective of the MCQ exam is to assess the applicant's knowledge and practice in general medicine.
- All applicants (including foreign applicants) must take the exam.
- The MCQ covers all medical disciplines including ethics and professionalism based on the blueprint.
- It will be administered to all candidates at the same time on computers.
- The MCQ (200 questions) accounts for 100% of the total score
 - This exam is organized in to two parts (100 questions each)
 - Part-I will be given in the morning and part II in the afternoon.
- 1.5 minutes is allotted for each question.

Affirmative action

- **Female** candidates will get **an additional 5% of their total mark** as indicated in most universities' senate legislations.
- With an objective of encouraging GPs serving their community as a clinician and also taking a huge responsibility and additional workload as a leader of their institution, an additional affirmative point will be considered for such candidates. Thus, applicants who can attach a letter of evidence that they have served for at least one year **at a managerial position** as a **health center medical director**, or a **hospital medical director**, or a **hospital CEO**, or a **medical school dean** (while serving as a general practitioner) will get **an additional 5% of their total mark** if their letter of evidence is accepted by the ERMP secretariat.
- We do honor physicians who serve their community. Hence, we encourage medical doctors with service years and give them priority for residency training; thus, candidates with service year of **2 years and above will be given an additional 5 mark to their final score.**

- No affirmative action is entertained for any other conditions.

Result Notification

Results out of 100% will be posted on the ERMP website within two weeks after the exam.

VI. Revision of choice of Sponsorship, Field and Place of Study

Candidates can revise their sponsorship, field choice and place of study after being notified of their results.

In doing so:

- De-identified results will be shared to all examined candidates.
- Within one week, each applicant will be able to revise and edit his/her choice of sponsor, field and place of study. If they do not do so in a week time, the initial one (made during application) holds true.
- **Thereafter, at any time, application for sponsorship change will not be entertained.**

VII. Matching and Assignment

- Matching is not simply placement of applicants for a program and place of study; it is rather valuing the merit of good performers so that quality is maintained.
- Applicants' preference for specialty is considered first to do the matching followed by institution choice. Those candidates with high scores are given their preference first and then the rest get their choices based on their score. Those with the highest scores are likely to get their preferred specialty and school.
- In case of tie (if two candidates with same result are competing for one spot):
 - Female candidates will be given priority.
 - If they are of same sex, the one with longer service year will be given priority.
 - If they are of same sex and have same year of experience, then ranking order of place of study will be considered.

- If they are of same sex and have same year of experience, and in cases where the order of place of study choice is the same, lottery method (software's preference) will be applied.
- It must be noted that only those meritorious applicants will be matched as the available residency spots are much less than the number of applicants.
- Choose a program and place of study on which you are sure and where you will be happy. Consider geographic location, competitiveness of the program, and your true interest in a specialty. If you aren't honest with yourself in your selection, then you'll end up in a residency program which will fail to meet your professional needs.
- Unmatched candidates will wait for the coming academic year to apply and sit for exam. From 2015 Eth. C academic year onwards, **there will not be any reserve list for any program from unmatched candidates.**

Post matching procedures and special scenarios

- Matching results of all matched candidates for all institutions and fields will be posted on the ERMP website.
- E-mail will be sent to every matched candidate stating his/her status.
- Official letters with names of matched candidates to be sponsored by MOH will be sent to MOH legal directorate for further facilitation of agreement procedures by the legal directorate.
- Upon receiving from the MOH legal directorate the list of MOH sponsored candidates who completed agreement signing, official letters with a final list of all (MOH & non MOH sponsored) candidates will be sent to all respective medical schools for registration/admission.
- Any transfer request from one program to another is totally unacceptable, and such issues **will not be entertained here at MOH** at any time. But if a resident has **completed R-I and has a pass mark to R-II, his/her issue of transfer** can be addressed by the respective institutions, notifying the MOH ERMP Team.
- Candidates will not be matched to a program or university they did not choose. Those candidates who do not get matched to the specialty they applied for will wait for another year to register as a new applicant.

Appeals

- **Appeal on the exam result** is made through the email address of the residency program of the ministry (to be notified later on) within one week after result notification.
- **Appeal on matching** is made through the email address of the residency program of the ministry (to be notified later on) within one week after matching.
- Response for the appeal will be given within one week after the last date of the appeal. In-person appeal at MOH is highly **discouraged**.
- Candidates must be reserved from any harassment or offense on the ministry staff in whichever way during appeal or any other time. If this happens, the SSG will disqualify them, deny matching, deny ERMP examination for the next application/s upon SSG decision and even ask them legally.
- For any other information regarding the registration, exam administration, matching and deployment, you can dial to **the hot line # 952** of the Ministry of Health from Monday to Friday in working hours.

VIII. Sponsorship:

The following options are possible to be considered as sponsor:

A. Central sponsorship by MOH:

- Any Ethiopian medical residency candidate who can provide evidence of paying-back of his/her cost-sharing is eligible to seek MOH sponsorship as long as he/she commits to serve in the public system after graduation.
- A candidate who seeks for central sponsorship will sign a legal sponsorship agreement with MOH legal directorate after matching using the approved agreement form. An arrangement will be made by MOH legal directorate to handle the agreement signing in selected areas.
- MOH might deny sponsorship for those candidates who were matched, sponsored by MOH and started residency training but dropped out.

- Candidates will not be allowed to register and start education in the institution they matched unless they completed the agreement-signing with MOH legal directorate.
 - Candidates will be disconnected from their former employer (RHB, Hospital or Training Institution) and get employed in the training institutions they are matched and deployed to for the period of their residency training.
 - If one discontinues his/her residency training at a certain point, there is no guarantee to attain a general practitioner position in the public system.
- B. **Higher Learning Institutions as Sponsor:** are those candidates who are employees of a higher learning institution (university) and sponsored by that institution. They are required to upload a scanned copy of a valid sponsorship letter in the space provided and select or write the name of the sponsoring organization.
- C. **Federal institutions as sponsor:** These are candidates who are to be sponsored by federal institutions (like federal prison, police, ministry of defense etc). They are required to upload a scanned copy of a valid sponsorship letter in the space provided and write the name of the sponsoring organization.
- D. **Private or Charity organizations as sponsor:** These are candidates who are to be sponsored by any private or charity organization, thus they are supposed to sign a sponsorship agreement with their sponsoring institution/organization. Candidates are required to upload a scanned copy of a valid sponsorship letter in the space provided and write the name of the sponsoring organization.
- E. **Self-sponsor:** Any applicant who wishes to support him/herself for the period of residency training (except tuition fee).
- F. **Foreign applicants:** these are candidates who got a partial scholarship (tuition fee waiver only) by the Ethiopian Government. Those who benefit from the scholarships but apply on an individual basis must upload their evidence (a letter from the Ethiopian ministry of Foreign Affairs) during online application.

Sponsorship change:

If MOH gets convinced, a self-sponsor can change his/her status to government sponsor status any time as long as he/she agrees to sign an agreement for the whole duration of the training.

IX. Admission and Registration

From the 2015 Ethiopian academic year on, all colleges/schools agreed to admit residents during the months of **December-January.**

Admission and Registration: Successful candidates are expected to report to the department/school they are matched for within the department/school's registration deadline. Those candidates who did not register within the deadline will not be entertained.

Post Registration scenarios: After registration and starting residency training and have a grade record (pass mark), rules and regulations of the respective college/school apply for all. However, change of field of study is strictly prohibited since it seriously affects the merit-based matching and the sponsor's human resource development plan.

Official Transcript: While registering at the registrar office, matched candidates are responsible to process an official copy of their undergraduate transcript from the school/university where they studied medicine to the school/university to where they are matched and deployed for residency training. **Neither MOH nor MOE will be responsible for this.**

Clearance: Matched candidates who are to be sponsored by MOH should come with an updated and recent official clearance letter from their organization (dated and stamped) while coming for registration to the registrar/human resource office of the respective institutions to where they are matched and deployed for residency training.

X. Salary and Incentives of Public Sponsored Residents

- **General considerations**
 - MOH and MOE created an understanding on the salary payment modality for MOH sponsored residents.
 - The Ministry of Health and Ministry of Finance created an understanding on allocation of funding for salaries of residents sponsored by MOH.
- **Source of Funding:** The Federal government will allocate a budget to cover the salary, incentives, duty payments and research funding of MOH sponsored residents during the training. It must be noted that this does not include candidates sponsored by higher learning institutions, private institutions, charity organizations, federal institutions (like defense, police etc), self-sponsored ones and foreign countries sponsored residents.
- **Way of effecting payment:** Residency Training institutes will request a budget as per the expenses they had for residents' payment.
- **Amount of Salary:** Matched MOH sponsored candidates will earn a uniform salary which amounts the salary of a beginner lecturer. In doing so, they will sign a contract agreement with the training institution for the period of the training.
- **Incentives:** these include allowances that are given to residents during the period of the training for housing, transportation and stationary allowances on a monthly basis.
- **Duty Payment:** Each resident will receive duty payment as per the Civil Service Commission duty payment guideline published on "Sene" 29, 2001 Eth. Calendar.
- **Research Budget:** Each public sponsored resident will receive a budget from the school to conduct a research as per the training institution's legislation.
- **Leaves:** A resident will have a 4 weeks annual leave each year. A pregnant resident can legally take the permitted 4 months leave, but she must know that she might not go with her cohorts.

- **Withdrawal/ Dropout:** if a resident takes withdrawal or drops out he/she will be governed by the institution's rules and regulations and by the contract agreement he/she has signed with the institution.

XI. Deployment and service year

- Each MOH-sponsored candidate is expected to be deployed as per the developed deployment guideline and serve in a public institution to where he/she is going to be deployed by MOH.
- Accordingly, MOH will collect information on demand and facility readiness from regions, city administrations and training institutions and deploy specialists.
- The duration of service will be as per the official sponsorship agreement.

Annex I: Declaration by applicants

We advise applicants to undergo meticulous medical (general, ophthalmologic) examination before completing this declaration.

1. I am solely responsible for my choices of specialty and institutions and for the matching outcome based on these choices.
2. I understand that both the residency program and myself as an applicant are bound by the result of the Matching. I also understand that my actual entry into the training program is contingent upon satisfactory completion of the medical fitness prerequisites set by the program.
 - e.g. for surgical fields including Ophthalmology, Otolaryngology HNS and other surgical fields requiring specific fitness tests, prior medical fitness test (physical disability assessment, ophthalmic examination including visual acuity, color vision test, stereopsis, alignment tests and slit-lamp examination) is the responsibility of the candidate. See the “Physical and Visual Standards for Residency Candidates” in annex II.
 - **In case the department for which I am matched denies me a spot for registration because of any health-related issues, I do agree to consider myself as unmatched.**
3. I understand that the ERMP cannot guarantee my continuation of training in the residency program rather this is contingent upon my performance as a resident based on the curricular requirements of that specific program.
4. I declare that I have no medical conditions that can hinder my performance in any of the residency programs I have listed for matching.
5. I declare that I have no obligations that prevent me from accepting the matched institution or program.
6. I authorize the use of any information I provided in any study approved by the ERMP provided that the information is kept anonymous and unique identifiers are not revealed.
7. I confirm that the information I provided in this application is genuine and take all the responsibility and accountability for issues coming as a consequence.

Annex II: Physical Examination details for surgical fields

Background: Occupational Visual standard is a terminology referring to the requirement of a particular level of vision to be able to perform surgical procedures effectively and safely.

Visual abnormalities are common in the general population. Literature shows that 8% of males are colour blind (1) and 3% of the public is stereoblind (2). These abnormalities are treatable in adults.

As visual abnormalities could affect candidates' performances and may harm patients, individuals with these abnormalities are not advised to pursue a career in surgical performance.

With the aim of protecting the public and the surgical practitioners, this physical and visual standard is developed to help candidates to conduct checkup prior to applying to join a specific surgical program.

The physical fitness test detail requirements are shown below.

1. **General Dexterity:** there shouldn't be major physical disability affecting gross and fine motor activities.
2. **Visual Standards for surgical fields in Ethiopia**
 - Distance vision, with or without correction,
 - 6/9 or better monocularly, and 6/6 or better binocularly.
 - Near vision of N5 at 30-50cms.
 - Refractive error must not exceed
 - +5.00 to -6.00 dioptres along the most ametropic meridian,
 - with no more than 2.00 dioptres of astigmatism and
 - no more than 2.00 dioptres of anisometropia.
 - If the visual requirement is met only with the use of correction, the spectacles or contact lenses must provide optimal visual function.
 - Normal binocular vision. Heterophorias not exceeding
 - 10Δ esophoria,
 - 8Δ exophoria,
 - 2Δ hyperphoria at distance or 8Δ esophoria, 12Δ exophoria, 1Δ hyperphoria at near.
 - Normal convergence.
 - For Ophthalmology and Neuro surgery residency /fellow applicants
 - stereo acuity should be ≥ 40 Sec arc.
 - for surgery and Gyn-Obs ≥ 200 sec arc.
 - Normal color perception (defined as no mistakes on Ishihara plates).

Annex III: Points included in the MOH Sponsorship agreement

የስፔሻላይዜሽን የትምህርት ዕድል ያገኙ ሐኪሞች ከሥልጠና በኋላ የሚጠበቅ መብትና ግዴታ በተመለከተ የሚደረግ የውል ስምምነት ውስጥ የተካተቱ ነጥቦች፡

- አንድ ጀምሪ የአካዳሚክ ጠቅላላ ሃኪም (lecturer) የሚከፈለውን ደመወዝ 11305 (አስራ አንድ ሺ ሦስት መቶ አምስት) ብር እና ሌሎች ጥቅማጥቅሞች (የቤት ኪራይ፣ የትራንስፖርትና የጽሕፈት መሣሪያ) በአዲስ አበባ ከተማ ውስጥ ባሉ የስልጠና ተጠቃሚ ለተመደበ ብር 2750 (ሁለት ሺ ሰባት መቶ ሃምሳ)፤ ከአዲስ አበባ ከተማ ውጭ ባሉ የስልጠና ተጠቃሚ ለተመደበ ብር 2350 (ሁለት ሺ ሦስት መቶ ሃምሳ) በድምሩ እንደ ቅደም ተከተሉ 14055 (አስራ አራት ሺ ሃምሳ አምስት) ብር ወይም 13,655 (አስራ ሦስት ሺ ስድስት መቶ ሃምሳ አምስት) ብር በየወሩ እየተከፈለኝ ትምህርቴን ለመቀጠል ተስማምቻለሁ።
- ትምህርቴን መጨረሱን የሚገልጽ ማስረጃ ከትምህርት ክፍሉ እንደተሰጠኝ የዩኒቨርሲቲ የምረቃ ፕሮግራም ጊዜ ሳልጠብቅ ስፖንሰር ወደ አደረገኝ የኢትዮጵያ ጤና ሚኒስቴር በመቅረብ ሪፖርት ላደርግና በመደበኛ ቦታ በትምህርት ላይ የቆየሁበትን ጊዜ ያህል አገልግሎት ልሰጥ ተስማምቻለሁ።
- ከመንግስት ጤና ድርጅቶች በአንዱ ተመድቤ የአገልግሎት ግዴታዬን ሳልወጣ የሙያ ፈቃድም ሆነ የስፔሻሊቲ ሰርትፊኬትን መውሰድ እንደማልችል ዐውቄ ተስማምቻለሁ።
- ምክንያቱ ምንም ይሁን ምን ግዴታዬን በአገልግሎት ክልተውጣሁ ስፖንሰር ላደረገኝ የጤና ሚኒስቴር በትምህርት ቆይታዬ ጊዜ የተከፈለኝ ወርሃዊ ደመወዝ ፣ ወርሃዊ የቤት ኪራይ ፣ ወርሃዊ የፎቶኮፒ እና የምርምር ጥቅማጥቅም ፣ 9% (ዘጠኝ በመቶ) የባንክ ወለድ ተሰልቶ ልክፍል ተስማምቻለሁ። በዚህም ስሌት መሰረት ስፖንሰር ላደረገኝ የጤና ሚኒስቴር (ሙያው በሚፈልገው የትምህርት ጊዜ መሰረት ከሚከተሉት አንዱ ይከበብ)፣ ልክፍል ተስማምቻለሁ።

ተ.ቁ	የትምህርት ቆይታ ጊዜ	የክፍያ መጠን በብር	
		በአዲስ አበባ ከተማ ውስጥ ባሉ የስልጠና ተጠቃሚ ለሚሟሩ	ከአዲስ አበባ ከተማ ውጭ ባሉ የስልጠና ተጠቃሚ ለሚሟሩ
1	36 ወር	551,518.2	535,822.2
2	42 ወር	643437.9	625125.9
3	48 ወር	735,357.6	714,429.6
4	60 ወር	919,197.0	893,037.0

NB. The actual agreement form and its application will be available at the MOH legal directorate during the agreement signing period.