The Process for the European Board Exam in Emergency Medicine

Roberta Petrino MD

Chair of the Task Force for the European Board Exam in Emergency Medicine
POLICY STATEMENT ON EMERGENCY MEDICINE IN EUROPE

WHAT IS EMERGENCY MEDICINE?
Emergency Medicine is a specialty based on the knowledge and skills required for the prevention, diagnosis and management of urgent and emergency aspects of illness and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioural disorders. It is a specialty in which time is critical. The practice of Emergency Medicine encompasses the pre-hospital and in-hospital triage, resuscitation, initial assessment and management of undifferentiated urgent and emergency cases until discharge or transfer to the care of another physician or health care professional. It also includes involvement in the development of pre-hospital and in-hospital emergency medical systems.

WHAT IS THE EUROPEAN SOCIETY FOR EMERGENCY MEDICINE (EuSEM)?
The European Society for Emergency Medicine (EuSEM) incorporates a Federation which currently includes 24 European national societies of Emergency Medicine and represents more than 14,000 medical members in Europe.

WHAT IS THE MULTIDISCIPLINARY JOINT COMMITTEE (MJC) ON EMERGENCY MEDICINE?
The MJC on Emergency Medicine (MJC - EM) is a Committee of the Union Europeenne des Medecins Specialistes (UEMS). It includes representatives from the UEMS Sections of Anaesthesiology, Geriatrics, Internal Medicine, Orthopaedics, Paediatrics and Surgery, the MJC on Intensive Care Medicine, the PWG of Junior Doctors, the Secretary-General of UEMS and the European Society for Emergency Medicine.

WHAT IS THE CURRENT STATUS OF EMERGENCY MEDICINE IN EUROPE?
Emergency Medicine is currently recognised as an independent specialty in fifteen member states of the European Union (although only nine are listed in the EU Directive 2005/36/EC) and in five EU countries it exists as a supraspecialty. The European Society for Emergency Medicine considers that the provision of high quality emergency care requires physicians with specialised training in Emergency Medicine because this is the most effective way (in both clinical and financial terms) to provide high quality care during the critical initial stages of emergency treatment. It is thus recommended that other European countries should work towards the establishment of Emergency Medicine as a primary medical specialty.
WHAT ARE THE PRINCIPLES OF EuSEM and MJC - EM POLICY?
The European Society for Emergency Medicine and the Multidisciplinary Joint Committee on EM seek to ensure:

- The highest quality of emergency care for all patients
- The delivery of such care by specialists trained in Emergency Medicine
- A comparable standard of clinical care in Emergency Departments across Europe

In order to achieve these objectives EuSEM and the MJC - EM have the following aims:

- European competency-based core curriculum to include:
  - Patient Care
  - Medical Knowledge
  - Communication, collaboration and interpersonal skills
  - Professionalism, ethical and legal issues
  - Organisational planning and service management skills
  - Academic assessment
  - Education
  - Assessment
  - Clinical skills
  - Research
  - Inclusion

Signed by all the Presidents of the 22 National Societies during the Federation meeting in Sorrento, september 2007.

WHAT TRAINING SHOULD BE REQUIRED TO PRACTISE EMERGENCY MEDICINE IN EUROPE?
The EU Doctors’ Directive requires that training in Emergency Medicine should be for a minimum of five years. A multi-national Task Force of EuSEM has been working with the Multidisciplinary Joint Committee on Emergency Medicine (MJC - EM) of the Union Européenne des Médecins Spécialistes (UEMS) and recently finalised a comprehensive Core Curriculum for Emergency Medicine in Europe. This curriculum includes the principles involved in the establishment and organisation of training programmes of comparable standard in recognised departments across Europe and was formally endorsed by the Council of UEMS at a plenary meeting in Brussels on 25 April 2009.

SUMMARY OF EuSEM & MJC - EM POLICY
The main objective of EuSEM and the MJC - EM is that the specialty of Emergency Medicine should continue to develop to the standards endorsed by the Council of UEMS to ensure the highest quality of emergency care for patients. This care should be delivered by physicians trained in Emergency Medicine.

May 2009 (revised from September 2007)
Multidisciplinary Joint Committee in Emergency Medicine

- First meeting in Brussels 2005
- Representatives from Sections of Anaesthesia, Internal Medicine, Geriatric Medicine, Paediatric Medicine, General Surgery, Orthopaedics & Traumatology, from Junior Doctors & from EuSEM
- Working towards harmonisation of Teaching, Training and Practice of Emergency Medicine
- Reviewing Curriculum and Competencies
European Curriculum for Emergency Medicine

A document of the EuSEM Task Force on Curriculum approved by the Council of the European Society for Emergency Medicine and by the UEMS Multidisciplinary Joint Committee on Emergency Medicine

Final Draft (May 2008)

Curriculum Committee Chair
Roberta Petrino, Italy

EuSEM President
Gunnar Ohlen, Sweden

UEMS MJC in EM Chairman, EuSEM Immediate Past President
David Williams, UK
The Curriculum Roadmap

- **March 2010** – Creation of the European Board of Emergency Medicine
- **June 2010** – Decision by the EuSEM Council, following a request of the MJC and Board in EM, to create a Task Force for the European Board Examination in EM like many other specialties in Europe
Task Force for EBEEM

1. Roberta Petrino (Chair, Italy)
2. Helen Askitopoulou (Vice-Chair, Greece)
3. David Williams (Chairman UEMS MJC-EM, UK)
4. Abdel Bellou (EuSEM President, France)
5. Raed Arafat (Romania)
6. Ruth Brown (UK)
7. Cornelia Hertel (Sweden)
8. Janusz Sokolowski (Poland)
9. Fernando Schiraldi (Italy)
10. Stefan Trenkler (Slovakia)
EBEEM
European Board Examination for Emergency Medicine

1st Task Force Meeting
5th – 7th November 2010
Ramada Ticinum Hotel, Oleggio, Italy
Starting at 2pm on Friday 5 November
Eligibility criteria

- To be a specialist in Emergency Medicine after a minimum 5 year training programme
- To be attending the 5th year of training in the specialty of Emergency Medicine
- To be a physician who has been working full time in an Emergency Department for at least 5 years, with a certified training.
Eligibility criteria

Potential candidates who do not meet the above criteria may make individual application to the examining board to determine their eligibility to take the examination.

It is the responsibility of the European Board of EM to approve the eligibility of all candidates.
The format and content of the exam must be able to warranty:

- Nothing must be included in the exam items that has not been listed in the *Curriculum*
- The possibility by the examiners to reliably check that all the important areas of the curriculum have been covered
- To establish and warranty the content validity of the exam
The examination must be able to assess not only knowledge, but also all the competencies included in the Curriculum.
I Part: MCQs

- 1 answer correct
- 140 MCQs in 3 hours
- 20% basic science
- 80% clinical
- Passing mark depending on the overall outcome but at least 65%
II Part: Clinical scenarios and Oriented Questions

- 12 stations on different clinical topics
- Includes assessment of management skills, interpersonal and communication skills
- Includes scenarios on ethical and legal issues
Progress

- Meeting in December 2011
- Preparation of MCQs and further evaluation and validation
- Set up of the electronic platform with Orzone
- Next meetings in June and July

- Tentative deadline for the edition N. 0 in winter/spring 2013
<table>
<thead>
<tr>
<th>Country</th>
<th>National Correspondent</th>
<th>Included in EU Directive</th>
<th>Nationally Recognised Primary Specialty</th>
<th>Nationally Recognised Supraspecialty</th>
<th>Year of Specialty recognition</th>
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**TOTALS**                              | 9                        | 14                       | 6                                        |
Open questions

- The USEMS Section in Emergency Medicine: will change something for this Task Force?

- What will be the role of the EuSEM?