



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

*Association internationale sans but lucratif
EU Transparency Register 219038730914-92*

International non-profit organisation

RUE DE L'INDUSTRIE, 24
BE- 1040 BRUSSELS
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UEMS 2026/03

MEETING OF THE UEMS ADVISORY BOARD

DRAFT MINUTES

Friday 24th of April 2026
15:00 – 17:30*

Meeting held live at:

Carthage Thalasso Resort

Tunis Governorate,
Gammarth, PB 270
Tunisia

Tel. : +216 71 910 002

**All times are local – GMT+1 Tunisia*

PRESIDENT: PROF. VASSILIOS PAPALOIS
TREASURER: DR OTHMAR HAAS

SECRETARY GENERAL: DR JOAO GRENHO
UEMS OFFICER FOR EUROPEAN AND INT. AFFAIRS: DR MARC HERMANS



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UEMS Advisory Board meeting, 24th April 2026

Roll-call of Sections

15:00

Prof. Thomas Griesbacher
Chair of Grouping III

Prof. Griesbacher opened the meeting.

The Secretary General, dr João Grenho, conducted the roll call of the Sections. A total of 31 Sections were present. The voting majority was set at 16.

Prof. Griesbacher reminded participants that the discussions at the Advisory Board meeting were reserved for UEMS Sections and Bodies and did not involve the National Medical Associations (NMAs).

1. Approval of the agenda **

Prof. Thomas Griesbacher
Secretary of Grouping III

The Agenda was unanimously approved without changes.

2. Approval of the minutes of the October 2025 AB **

Prof. Thomas Griesbacher
Secretary of Grouping III

The Minutes were unanimously approved without changes.

3. Reports from the UEMS Groupings

3.1. *UEMS Grouping I*

Prof. Josanne Vassallo
Secretary of the Grouping

Prof. Vassallo presented the Grouping I report, noting good representation overall.

Discussions focused on UEMS constitutional matters, recognition of qualifications, postgraduate training and education, ETRs and examinations, as well as the roles of CESMA and EACCME. The Grouping expressed a strong interest in further developing work on professionalism and interprofessional practice.

Improved communication between the three groupings was also discussed, with a suggestion to dedicate time for exchanges at the next Council meeting.



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A project on professionalism and professionalism education, including a reflection on the next ten years, will be proposed for the next Council meeting. Prof. Vassallo encouraged participants to contribute to this initiative.

3.2. UEMS Grouping II

*Prof. Sebastian Roka
Chair of the Grouping*

Prof. Roka presented and said that they held an informal Grouping meeting on 13 April. Regarding the ETRs, the discussion on Hand Surgery was postponed until after the Grouping II meeting, when the results will be presented. All other ETRs were approved. The Grouping also agreed with the creation of a Section of Haematology. A proposal was made to the ETR Committee to develop a clear nomenclature distinguishing between: *ETR Specialty*, *Competence*, and *Competency*. Prof. Papalois thanked Prof. Roka and clarified the purpose of presenting the ETRs twice during the Council. While the proposal was to have the presentation only once, VP explained the distinction and suggested avoiding duplicate presentations, while allowing the full audience to participate in the discussion and vote on both occasions.

3.3. UEMS Grouping III

*Prof. Thomas Griesbacher
Chair of the Grouping*

Prof. Griesbacher presented: 12 out of 16 Sections were represented, in addition to which the MJC for Disaster Medicine, as well as the TF for Legal and Forensic Medicine. The main discussion focused on the ETRs. The ETR on Hand Surgery may require further discussion. Some uncertainty remains regarding the use of the terms specialty, competency, and sub-specialty. The Grouping recommends clarifying this terminology in the Terms of Reference for the ETRs. The Grouping supports the creation of a Section of Haematology; however, it was noted that Annex V refers to *General Haematology*.

4. Specialist issues

4.1. European Training Requirements



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4.1.1. Overview of Submitted ETRs and Introduction of the New ETR RC Team

Prof. Nada Čikeš

Chair of the UEMS ETR RC

Prof. Čikeš reported that a total of 12 ETRs had been submitted, out of which 10 completed the timeline for now. She recalled the key dates to be observed throughout the review process, noting that the deadline for submission had been 23 December, followed by the subsequent deadlines set out in the ETR timeline, which now extends over four months, compared with the previous three-month process.

Prof. Čikeš presented the ETR Review Committee team and expressed her thanks to Amelia for the office assistance provided. She subsequently introduced the new members of the ETR RC: Prof. Maryna Dolzhenko (UEMS Cardiology, Healthcare University of Ukraine), Prof. Roman Romero-Ortuno (EBGM), Rado Zic (EBOPRAS) and Prof. Lina Zabulienė (MJC AMH), with potentially two more participants to be confirmed.

The main challenges identified included:

- alignment of ETRs for specialties with Annex V of Directive 2005/36/EC;
- the presentation and introduction of ETRs for competences within UEMS;
- alignment with the agreed ETR template structure;
- overlap between competences/competencies in certain ETRs;
- implementation of Competency-Based Medical Education (CBME), including the introduction of CanMEDS, and the selection, development and assessment of EPAs;
- implementation of the ETRs etc.

Prof. Papalois praised Prof. Nada Čikeš and ETR RC vice-chair, Mr Arthur Felice, highlighting the considerable amount of work involved in the development and review of the ETRs, which spans all over the year. ETRs represent one of UEMS's most important products and a key contribution to the European medical specialist landscape.

4.1.2. PDM for Disaster Medicine for Anaesthesiologists**

Prof. Oleg Sabelnikovs

President of EBA

Prof. Sabelnikovs presented the PDM in Disaster Medicine for Anaesthesiologists and briefly outlined its concept. He explained that, while ETRs are primarily intended for residents, PDMs are designed for qualified specialists.

Three PDMs have already been adopted: Pain Medicine, Geriatric Anaesthesiology, and Obstetric Anaesthesiology. It was noted that the general core competencies should be achievable through most national training programmes. The PDM was developed by a broad Task Force comprising experts from across Europe.



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Section 2 addresses the Domains of Learning, including disaster definition and management, while Section 3 sets out 10 Entrustable Professional Activities (EPAs).

The full presentation is available at :

[PDM Disaster Medicine for Anaesthesiologists.pptx - Google Slides](#)

The PDM in Disaster Medicine for Anaesthesiologists was unanimously supported.

4.1.3. ETR for Competency Abdominal Wall Surgery**

Prof. Ferdinand Köckerling

Chair UEMS Surgical Division for Abdominal Wall Surgery

Prof. Köckerling presented the **ETR for Competency in Abdominal Wall Surgery**, outlining the increasing need for dedicated competency in this field due to the growing number and variety of surgical procedures. The full presentation is available at:

[Examination presentation.pptx - Google Slides](#)

Prof. Köckerling explained that candidates are required to have completed at least six years of training in surgery. Training should involve more than one principal trainer and take place across more than one hospital/institution. The ETR includes a comprehensive syllabus and a competency framework, with surgical skills classified into Categories A–D, as well as eligibility requirements for the examination.

A discussion followed on whether the document should be considered an ETR or a PDM and on the potential risk of excessive fragmentation. Prof. Köckerling explained that abdominal wall surgery requires additional specialised training beyond general surgical training. Prof. Papalois clarified that this represents a specific area of surgical practice and that the ETR provides the educational backbone for an already established examination.

Members also discussed the required number of procedures and the evidence supporting the proposed thresholds. Prof. Köckerling explained that these were based on available literature, experience of successful candidates and recommendations from the relevant scientific society.

The ETR for Competency in Abdominal Wall Surgery was supported by the AB with 24 votes in favour and 5 abstentions.

4.1.4. ETR for the Specialty of Endocrinology **

Prof. Josanne Vassallo

President of the UEMS Section of Endocrinology

Prof. Vassallo presented the ETR for the Specialty of Endocrinology, outlining the training pathway for endocrinology trainees and the main objectives of the ETR.



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She highlighted the importance of constructive alignment and harmonisation of specialist training across Europe. The ESE Curriculum has historically provided the framework for endocrinology training. Following the adoption of the ESE Curriculum and Training Recommendations in 2023, the document has since been further refined.

The ETR defines the core areas of training in endocrinology and provides for a minimum training duration of 3–5 years, depending on the national training structure.

Further details are available in the full presentation :

[UEMS SBE ETR Tunis 21.04.2026.pptx - Google Slides](#)

The ETR for the Specialty of Endocrinology was unanimously supported.

4.1.5. ETR for Competence in Hand Surgery**

*Prof. Brigitte van der Heijden
UEMS MJC Hand Surgery*

Prof. van der Heijden started her presentation by explaining why a special training framework in hand surgery matters, given the complexity of the anatomical and clinical domain.

The framework was initiated by the European Board of Hand Surgery (EBHS), developed under the auspices of UEMS and prepared in collaboration with FESSH. Its development involved a comparative review of existing training systems and a multidisciplinary drafting process.

This ETR aims to establish a harmonised European minimum standard for training and competence, define a clearly identifiable professional profile for surgeons dedicated to hand surgery, and provide transparent expectations for trainees. It was emphasised that the framework is intended to be applicable across Europe's diverse healthcare systems and defines the scope of competence as integrated expertise within the upper-limb domain.

Dr Olariu (PRAS) congratulated the presenter and outlined the concerns raised by PRAS and O&T Sections, which resulted in several final amendments to the document. Following these amendments, both PRAS and O&T Sections expressed their full support for the proposed ETR.

Full presentation of the ETR is available at:

[Hand Surgery UEMS Framework Presentation.pptx - Google Slides](#)

The ETR for Competence in Hand Surgery was unanimously supported.

4.1.6. ETR for the Specialty of Obstetrics and Gynaecology**

*Prof. Fionnuala McAuliffe
EBCOG*



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Prof. McAuliffe presented the updated ETR for the Specialty of Obstetrics and Gynaecology, highlighting the main changes between the 2018 and 2026 versions.

She noted that the duration of specialist training across Europe currently ranges from 4 to 8 years and emphasised the increasing mobility of obstetricians and gynaecologists, reinforcing the need for greater harmonisation of training standards.

The revised ETR was developed using a Delphi methodology and adopts a competency-based approach, complemented by elective training modules.

Full presentation is available at: [EBCOG McAuliffe O+G training UEMS aApril 2026.pptx - Google Slides](#)

Dr Balzan asked whether paediatric and adolescent gynaecology was included within the ETR and how its scope had been defined. Prof. McAuliffe confirmed that this area is covered and provided clarification on its inclusion within the curriculum.

The ETR for the Specialty of Obstetrics and Gynaecology was supported by the AB with 28 votes in favour and 1 absention.

4.1.7. ETR for the Competence in Paediatric Allergology**

Prof. Ana Margarida Neves

Liaison Officer UEMS Paediatrics Section/EAP

Prof. Neves presented the ETR for the Competence in Paediatric Allergology and thanked her mentor, Dr Lopes dos Santos, and the ETR Review Committee for their support throughout the development process.

She outlined the main elements of the ETR, including the learning outcomes, theoretical knowledge, practical and clinical skills and competencies, training structure, assessment methods, trainer requirements, and requirements for training centres. She highlighted the introduction of Entrustable Professional Activities (EPAs) as one of the key improvements of the revised ETR.

During the discussion, Dr Bonnici (MT) raised a point concerning the management of critical conditions, including asthma. Prof. Neves clarified that these conditions form a core component of paediatric allergology.

Prof. Fauquert (Allergology) asked whether the ETR incorporated recent aspects relating to immunology, allergies and immunotherapy in young children. Prof. Neves confirmed that these areas are covered within the ETR.

Full presentation is available at: [Ana Neves 15 min 2nd Short Paed Allerg Train Progr 2026 short.ppt - Google Slides](#)

The ETR for the Competence in Paediatric Allergology was supported by the AB with 25 votes in favour and 4 abstentions.



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4.1.8. ETR for the Competence in Paediatric Emergency Medicine**

Dr Peter Altorjai

UEMS Paediatrics Section/EAP

Dr Altorjai presented the ETR for the Competence in Paediatric Emergency Medicine and outlined the project timeline. The process began in 2018, with initial endorsement from the EAP and the UEMS Section of Emergency Medicine, subject to certain reservations. The revised ETR subsequently received the full support of both Sections.

Dr Petrino (Emergency Medicine) congratulated the authors on the achievements reflected in the ETR for Paediatric Emergency Medicine.

Dr Magennis reminded that where a specialty is not listed in Annex V, the document should be designated as an ETR for Competence.

Full presentation is available at: [UEMS Council meeting Paediatric Emergency.pptx - Google Slides](#)

The ETR for the Competence in Paediatric Emergency Medicine was unanimously supported.

Professor Papalois addressed the questions raised by different reviewers during the ETRs presentations.

For the UEMS, it is essential to establish clear and **consistent terminology regarding the definitions of a child and an adolescent**. While a child is generally considered to be a person under the age of 18 years, adolescence is often regarded as the developmental period spanning approximately 15 to 18 years of age. However, different specialties and professional perspectives may apply varying definitions.

To ensure consistency across the organisation, regardless of specialty or professional background, the UEMS Paediatrics Section, along with EAP, is kindly invited to review the relevant legislation and existing frameworks and to propose clear, harmonised definitions. In particular, we would appreciate your recommendations on how the terms “child” and “adolescent” should be defined and used within UEMS documents and activities.

4.1.9. ETR for the Competence in Paediatric Gastroenterology, Hepatology and Nutrition**

Prof. Ilse Broekaert

UEMS Paediatrics Section/EAP

Prof. Broekaert presented the ETR for the Competence in Paediatric Gastroenterology, Hepatology and Nutrition (PGHN) on behalf of ESPGHAN and its Council. She explained that the ETR aims to improve the care of children with PGHN conditions and to promote greater harmonisation of training programmes across Europe, particularly given that dedicated paediatric gastroenterology training is not available in all European countries. The framework also seeks to support the development of competent care centres across Europe.



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A two-year training period, or equivalent, is proposed. The programme follows the ETR framework and CanMEDS principles, with clearly defined levels of competence.

Prof. Broekaert presented the 15 Entrustable Professional Activities (EPAs), covering key areas of professional practice, including emergency situations, multidisciplinary team working, transition to adult care, use of AI, genetic testing and obesity.

Full presentation is available at: [UEMS ETRs Tunis 2026.pptx - Google Slides](#)

The ETR for PGHN was unanimously supported.

4.1.10. ETR for the Competence in Paediatric Rheumatology**

*Prof. Marija Jelusic
UEMS Paediatrics Section/EAP*

This item has been deferred to the Autumn Council meeting due to the absence of the authors.

4.1.11. ETR for the Specialty of Urology**

*Prof. Archil Archil Chkhotua
UEMS Urology Section/EBU*

Prof. Chkhotua presented the revised ETR for the Specialty of Urology, updating the version adopted in April 2023.

He outlined the key features of the document, including the proposed training duration and the combined surgical and medical scope of urology. The revision aims to further harmonise specialist training standards across Europe. The ETR defines six essential Entrustable Professional Activities (EPAs) and incorporates the principle of lifelong learning (LLL). Prof. Chkhotua also presented the examination framework.

The ETR for the Specialty of Urology was supported with 28 votes in favour and 1 abstention.

Full presentation is available at: [ETR for the Specialty of Urology.pptx - Google Slides](#)

6. AOB

Deadline for submission for an ETR for October is 15th of June.

*Items in italic with ** require a vote or a decision*

Social Programme:  **Museum Visit &**  **Cocktail Dinner**

 *Bardo National Museum, Le Bardo, 2000 Tunis, Tunisia*

19:30 – Guided visit of the Bardo Museum followed by a Cocktail Dinner