



“EBIM’s Projects and the Revision of the EU Curriculum in Internal Medicine: Priorities and Perspectives”

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How huge is this challenge?

- To help build an unified concept of Internal Medicine...
- To identify common grounds that would support an european level coordination...
- To agree on a roadmap that would bring the national societies closer...
- To overcome the political differences between countries in order to promote the speciality and the specialists across the continent...
- To define an “European concept and practice of Internal Medicine” that may become a standard for the rest of the world...
- “Internal Medicine for Europe, 2040”

Europe: a paradise of intentions and a hell of reality!

Paradise is the place where...

humour is british,
chefs are french,
engineers are german,
lovers are portuguese,
and everything is run by swiss!

Europe: a paradise of intentions and a hell of reality!

Hell is the place where...

humour is german,
chefs are british,
engineers are french,
lovers are swiss,
and everything is run by portuguese!!!!

- Introducing EBIM
- One board: two concepts, two time-limits, several desirable speeds
- Internal Medicine: defining a concept, building a group
- What to do first? Priorities and precedences
- Final comments

Introducing EBIM



EBIM is committed to advancing postgraduate education in internal medicine in Europe through guidance on the standardisation of training and practice of internal medicine within Europe, for the benefit of patient care.

EBIMS – Board members for 2025-2028



- Prof. José Delgado Alves, President
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EUROPEAN CURRICULUM of INTERNAL MEDICINE

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- To establish a body that will validate the qualification of internists at the European level in the form of a European Certificate in Internal Medicine.
- To establish an End-of-Training (formative assessment) exam that along with the European Certificate in Internal Medicine will lead to a European Diploma of Internal Medicine.
- To develop methods of formal and professional accreditation of training centres in internal medicine as defined by the curriculum.
- To develop a faculty development program to further education in internal medicine.
- To foster continuing medical education and professional development (CME/CPD).

One board: two concepts,
two time-limits, several
desirable speeds

- The importance of implementing European strategies from a practical/pragmatic point of view.
 - European exam: what are we examining? For what?
 - European Internal Medicine passport (inside Europe is redundant; outside Europe?)
- The need for a comprehensive agreement on what should be done at a national level in order to homogenise the understanding and practices related to Internal Medicine
 - National vs European training programs;
 - What influence do national societies have in the training and final accreditation of specialists?

Ex.: Portuguese postgraduate training: foundation year

- Foundation year

4 Months	Internal Medicine
2 Months	Surgery
2 Months	Pediatrics
2 Months	Women's health
2 Months	Primary Care Medicine

An Internal Medicine training plan...

Year	Jan	Fev	Mar	Abril	Mai	Jun	Jul	Ago	Set	Out	Nov	Dez	
1º	Introduction to clinical practice			Internal Medicine						Translational research			
2º	Intermediate Care (IMW)						Internal Medicine						
3º	Intensive Care			Internal Medicine									
4º	Optional (transversal)						Optional (other specialities)						
5º	Home care						Internal Medicine						

... how many departments in which countries would consider it?

One board: two time scales, several desirable speeds

- How far can we go over this 3 year mandate...

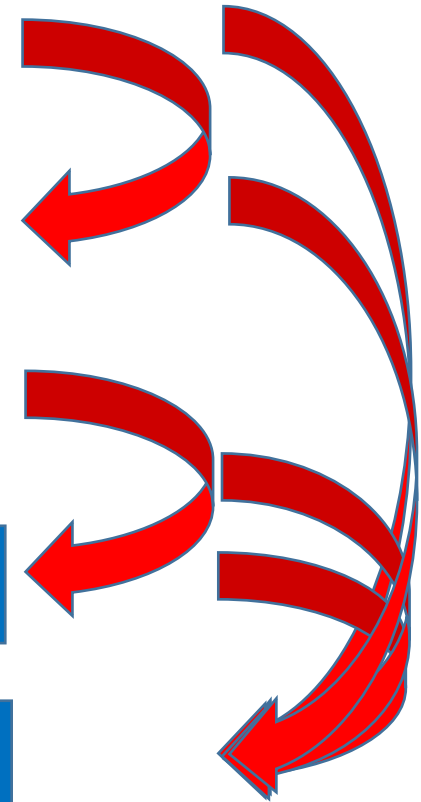
EU Curriculum Revision in Internal Medicine

Launch of the European Exam in Internal Medicine (EEIM)

Quality Assurance and Harmonization of Training

Accreditation and Certification Initiatives of training centres

European Internal Medicine Passport



Internal Medicine: defining a concept, building a group

Internal Medicine in Europe...

...same name,
different concepts,
different practices,
different institutional realities...

In fact, do we even look the same?

Not necessarily a problem,
but cannot be ignored!



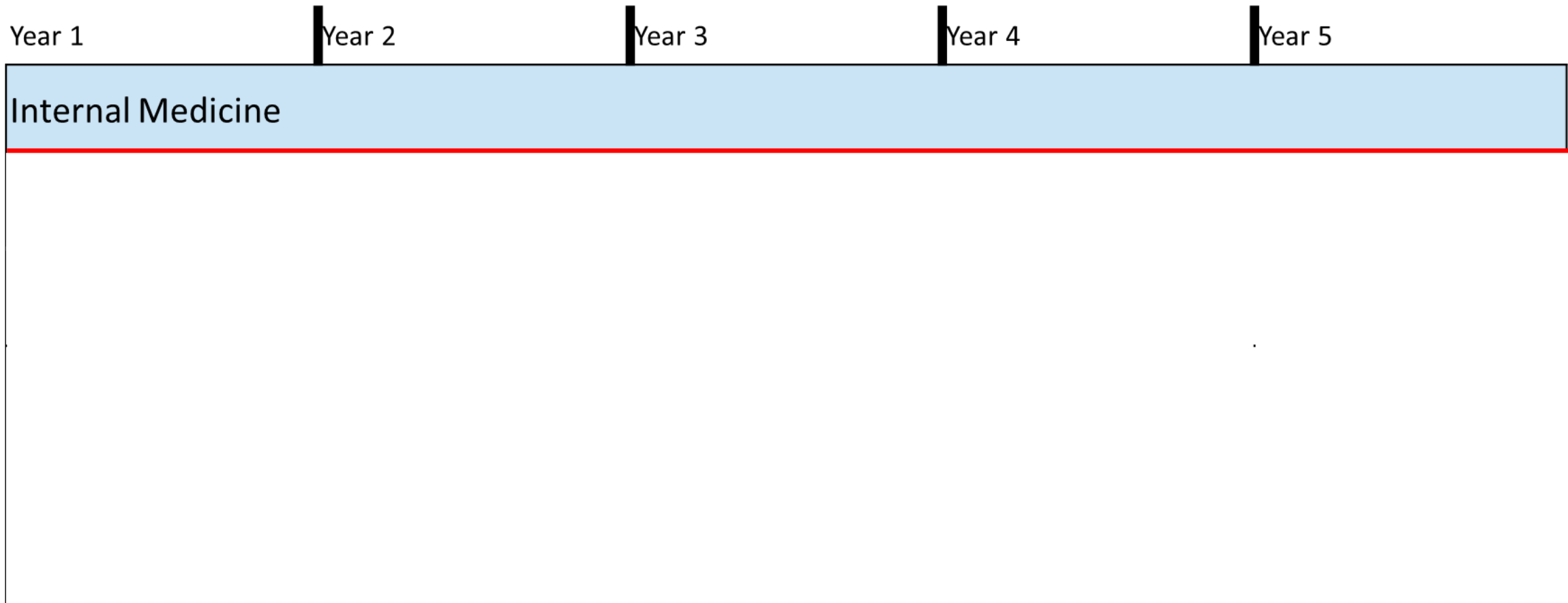
- What sets Internal Medicine apart?
 - Is Internal Medicine a concept or a practice?
 - The “know it all specialist paradox”
 - Sub-specialities, new specialities or curriculum-based referral centres
 - How can we be (more) useful? Where do we really make a difference?

- Internal Medicine at its core

- Where do we really make a difference?
 - Differential diagnosis
 - Complex patients/therapies
- Are special units more effective when run by internal medicine doctors?
 - Stroke, Cardiac insufficiency? (the difference between cv and activity/task!)
 - If so, why? How much does it have to do with training within the speciality?
 - Is Internal Medicine a “teaching speciality?”

Building an unified concept of Internal Medicine

- The foundational role of Internal Medicine in the training of other specialities



- Internal Medicine at its core
 - What about emergency rooms and intermediate care units?
 - The importance of the “Proximity Intermediate care units”
 - And what about community care?

Building an unified concept of Internal Medicine

- Internal Medicine in the community - how is it different from hospital care?

Social support	Political action
	Medical Literacy (inc patient organisations)

Building an unified concept of Internal Medicine

- The role of Internal Medicine in public health policies, literacy and promotion
- The role of Internal Medicine in the hospital management/organization

What to do first?

Priorities and precedences

- **Over the first year:**

- EU Curriculum Revision in Internal Medicine
- Launch of the European Exam in Internal Medicine (EEIM)

- **Over the second year:**

- Start the accreditation and certification of training centres in Internal Medicine
- Quality Assurance and Harmonization of Training

- **Over the third year:**

- European Internal Medicine Passport (internal)
- Propose criteria to accept Internal Medicine specialists from outside Europe

What would we like from EFIM? (wishful thinking)

- **Over the first year:**

- To determine the regulatory differences and level of influence of each national society

- **Over the second year:**

- Bilateral recognition of an effective European coordination by EFIM

- **Over the third year:**

- CV and consequent exam to be of the responsibility of each national society
- Work towards a more homogeneous cv at the country level
- Help define policies for accepting specialists (and interns) from outside Europe

- The definition of an unified curriculum in Europe will be a major break through in the recognition and validation of the importance of Internal Medicine. The implementation of an unified strategy will always imply the creation of a standard evaluation across borders.
- A possible route is the identification of centres that may become a reference in the training of our speciality. These centres will have the responsibility to provide support to other units and promote the development of Internal Medicine at a clinical, research and institutional level in each country.

However:

- None of these objectives can be reached without the involvement of the different national societies. In fact, the national societies must be active players in this process!

EBIM is not about the internists we are,
but about the internists we want to be in
the future!

Choose wisely...

Medical student

Thank you!!

SPMI: Luis Costa for challenging!

EFIM: George Dalekos and Ricardo Huelgas for trusting!

Aneta Trajkovska for making life so much easier!

EBIM board: for believing!

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