

Welcome to Wiesbaden



EFIM Objectives 2016 – 2018

- Increase the visibility of EFIM worldwide
- Increase the role of member societies in the work of EFIM
- Enhance the collaboration with the UEMS Section of Internal Medicine under the auspices of the European Board of Internal Medicine
- Harmonise postgraduate training and qualification in internal medicine in Europe
- Implement the new European Curriculum of Internal Medicine in the European countries
- Strengthen the collaboration with other internal medicine organisations, including the ACP
- Develop new projects and programmes

The EFIM Executive Committee



EFIM Working Groups

Professional Issues and Quality of Care

- 13 Member societies involved
- 1 Publication: "Hospital Ambulatory Medicine: A Leading Strategy for Internal Medicine in Europe"

Choosing Wisely

- 26 member societies involved

Gender Medicine

- 13 member societies involved

Point-of-Care Ultrasound

- 11 member societies involved

ADVICE

New Working Groups

- Clinical Guidelines



EFIM

European Federation of Internal Medicine



17th
European Congress
of Internal Medicine
Munich, Germany

30 August
to
1 September
2018



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European Journal of Internal Medicine

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The leading journal for the European internist. Devoted to promoting the science and practice of internal medicine in Europe



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In what format would you like to receive the EFIM newsletter?

- ☐ PDF (Adobe Portable Document Format)
- ☐ HTML
- ☐ Plain Text Email

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Welcome



European Union of Medical Specialists - SECTION OF INTERNAL MEDICINE

European Board of Internal Medicine

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EBIM Curriculum Project

The European Board of Internal Medicine (EBIM), formed jointly by the European Federation of Internal Medicine (EFIM) and the European Union of Medical Specialists (UEMS) Section of Internal Medicine, is in the process of developing a European Curriculum of Internal Medicine. The main purpose is to facilitate the harmonization of internal medicine training and qualification at the European level. The EBIM Curriculum Committee, which is responsible for constructing and drafting the curriculum, comprises 4 representatives from the EFIM Section of Internal Medicine and 2 from the Young Internists Assembly.

- The European Curriculum of Internal Medicine was formally approved by UEMS Council in October of 2016
- Implementation of the curriculum in the European countries
- The goal is to harmonize training and qualification in internal medicine in Europe



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EFIM Exchange Programme



2016 – 14 applications received: Italy, Romania, Latvia, Spain, Portugal and Turkey

2017 – 10 applications received: Italy, Latvia, Romania and Turkey

2018 – 18 applications received Italy, Romania, Latvia, Spain, Portugal, Turkey, Poland, Russia

EFIM Journals



Selection of new EJIM Editor-in-Chief



CALL FOR PAPERS

European Journal of Internal Medicine



Accepts Open
Access articles



The *European Journal of Internal Medicine* is the official journal of: The European Federation of Internal Medicine (EFIM), The Icelandic Society of Internal Medicine, The Irish Association of Internal Medicine (IAIM), The Norwegian Society for Internal Medicine and The Swedish Society of Internal Medicine.

And affiliated with: The Polish Society of Internal Medicine and The Turkish Society of Internal Medicine

The *European Journal of Internal Medicine* is devoted to promoting the science and practice of internal medicine in Europe. To this end the journal publishes original scientific articles, editorials, short communications, internal medicine flashcards, and other information relevant to internal medicine and related fields. The journal also publishes news and articles concerning the activities and policies of the Federation as well as those of national internal medicine societies.

As the leading journal for the European internist, covering all aspects of internal medicine, including such new developments as:

- Emergency Medicine
- Clinical Reasoning
- Clinical Genetics
- Clinical Research Methodology
- Good Clinical Practice



Please submit your paper to
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30 August
to
1 September
2018

The art of managing clinical complexity:
An integrative, patient-centered approach

17th European Congress of Internal Medicine

Wiesbaden, Germany

President of ECIM 2018:

Petra-Maria Schumm-Draeger,
Munich, Germany

EFIM President:

Runólfur Pálsson,
Reykjavik, Iceland

Registration & Abstract Submission:

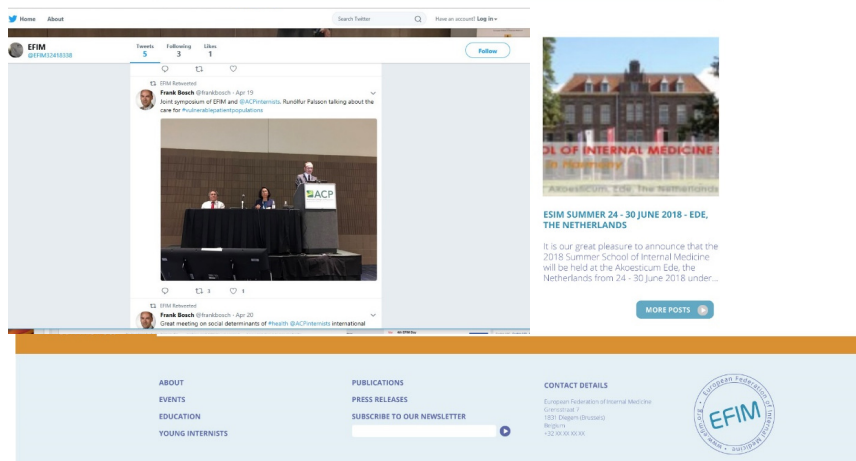
www.ecim2018.eu



EFIM Communication Strategy

New web designer in Belgium

- Re-design of EFIM website
- Social Media: Facebook, Twitter



EFIM Young Internists



Connect with the Young Internists on Facebook and Twitter...



Collaboration with the ACP

Professionalism is the basis of medicine's contract with society

Fundamental Principles:

- Principle of primacy of patient welfare
- Principle of patient autonomy
- Principle of social justice



Medical Professionalism in the new millennium: a physicians' charter

Project of the ABIM Foundation, ACP-ASIM Foundation

To our readers: I write briefly to introduce the Medical Professionalism Project and its principal product, the Medical Professionalism Charter. The charter appears in print time in this issue of *Annals* and simultaneously in *The Lancet*. I hope that we will look back upon its publication as an event in medicine. Everyone who is involved with medicine should read the charter and ponder its meaning. The charter is the product of a project of the Medical Professionalism Project.

CHARTER ON MEDICAL PROFESSIONALISM

Charter on medical professionalism

Medical professionalism in the new millennium: a physicians' charter

Medical Professionalism Project*

Physicians today are experiencing frustration as changes in the health-care delivery systems in virtually all industrialized countries threaten the very nature and values of medical professionalism. Meetings among the European Federation of Internal Medicine, the

society. In these circumstances, reaffirming the fundamental and universal principles and values of medical professionalism, which remain ideals to be pursued by all physicians, becomes all the more important.

The medical profession everywhere is embedded in diverse cultures and national traditions, but its members share the role of healer, which has roots extending back to Hippocrates. Indeed, the medical profession must contend with complicated political, legal, and market forces. Moreover, there are wide variations in medical practice and practice through which any general principles may be expressed in both complex and subtle ways. Despite these differences, common themes emerge and form the basis of this charter in the form of fundamental principles and as a set of definitive professional responsibilities.

Fundamental principles

Principle of primacy of patients' welfare
This principle is based on a dedication to serving the best interests of the patient. Altruism contributes to the trust that is central to the physician-patient relationship. Market forces, societal pressures, and administrative agencies must not compromise this principle.

Principle of patients' autonomy
Physicians must have respect for patients' autonomy. Physicians must be honest with their patients and empower them to make informed decisions about their treatment. Patients' decisions about their care must be paramount, as long as those decisions are in keeping with ethical practice and do not lead to demands for inappropriate care.

Principle of social justice
The medical profession must promote justice in the health-care system, including the fair distribution of health-care resources. Physicians should work actively to eliminate discrimination in health care, whether based on race, gender, socioeconomic status, ethnicity, religion, or any other social category.

A set of professional responsibilities

Commitment to professional competence
Physicians must be committed to lifelong learning and be responsible for maintaining the medical knowledge and clinical and team skills necessary for the provision of quality care. More broadly, the profession as a whole must strive to see that all of its members are competent and must ensure that appropriate mechanisms are available for physicians to accomplish this goal.

Commitment to honesty with patients
Physicians must ensure that patients are completely and honestly informed before the patient has consented to

Ann Intern Med. 2002;136:243-246.

*This charter was written by the members of the Medical Professionalism Project: Linda Blank (Project Staff), ABIM Foundation, Philadelphia; Kimball, MD, American Board of Internal Medicine, Philadelphia; Peter Copeland, MD, Southern Cardiothoracic Association, LaGrange, Georgia; McDonald, MD, American College of Physicians-American Society of Internal Medicine, Uppsala, Sweden; Chalmers, MD, F. Hoffmann-Laurie, Zurich, Switzerland; O'Brien, MD, the Netherlands; David Soria, MD, Hôpital Saint-Louis, Paris, France; Richard Cross, MD, and Sylvia Cross, MD, McGill University, Montreal.

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At present, the medical profession is confronted by an explosion of technology, changing market forces, problems in health-care delivery, bioterrorism, and globalization. As a result, physicians find it increasingly difficult to meet their responsibilities to patients and

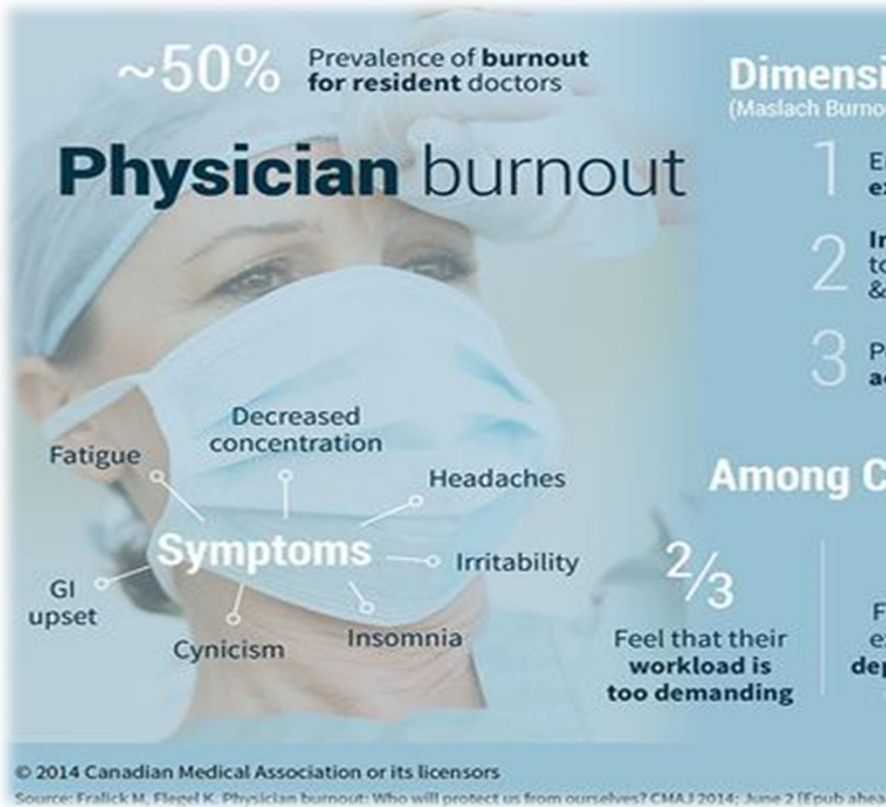
Lancet 2002; 359: 520-22

See Commentary page 458

*Members listed at end of paper.

Published simultaneously in *Ann Intern Med* 2002; 136: 243-46.

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Dimensions (Maslach Burnout Inventory)

1 Emotional exhaustion

2 Depersonalization

3 Reduced personal accomplishment

Burnout can lead to



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Doctors

Panic, chronic anxiety and burnout: doctors at breaking point

As the system piles on the pressure, who is looking after the medics?
● Scroll down for an extract from psychologist Caroline Elton's book about her work with NHS doctors


Decca Aitkenhead
Sat 10 Mar 2018 10:00 GMT
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▲ 'The psychological wellbeing of the medical workforce is being completely ignored,' says occupational psychologist Caroline Elton. Photograph: Getty Images

All of us become patients, sooner or later, and there is no shortage of literature about our experience of the medical profession. Our health problems have produced numerous bestsellers, many of them written by the doctors who treat us. But until now I had read little - and must confess, thought even less - about who is taking care of them.





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The Role of the CMA in Physician Health and Wellness

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The CMA strategy is to champion physician health and well-being through leadership and advocacy; and through a lens of shared responsibility, **with particular emphasis on system-level initiatives**. Although the focus on individuals has been a major focus within the community, the focus on the wellness of the physician workforce is a shared responsibility. A collaborative approach, from the top-down, at the system level (e.g., the community), as well as the bottom-up, individual level (e.g., the physician), is essential to achieving health and wellness).

Activities and Initiatives



International Conference on Physician Health® 2018 (ICPH)
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Major initiatives currently underway:

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