

## UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

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# **UEMS DIVISION OF ANGIOLOGY/VASCULAR MEDICINE**

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# Chapter 6- REQUIREMENTS FOR ANGIOLOGY/VASCULAR **MEDICINE**

#### **DEFINITION OF ANGIOLOGY/VASCULAR MEDICINE**

Angiology/Vascular Medicine deals with Vascular Diseases (arterial, venous, lymphatic and microcirculatory diseases) and focuses on prevention, diagnosis, therapy and rehabilitation as well as research and education, to benefit patients and the general population. Angiology/Vascular Medicine are synonyms in different countries.

### 6.1.Article1- GENERAL RULES ON MONITORING, ACCREDITATION AND QUALITY **MANAGEMENT OF POSTGRADUATE TRAINING** -

1.1 Central monitoring authority for Angiology/Vascular Medicine. At EU level the monitoring authority for Angiology/Vascular Medicine is the European Board of the UEMS Division of Angiology/Vascular Medicine (EBAVM) which was established on 7th June 2008 by the Angiology/Vascular Medicine representatives of National Vascular Societies of Europe and VAS (Vascular-Independent Research and Education-European Organisation). The Division will report to the UEMS Council via the Section of Internal Medicine.

The EBAVM consists of one member (with the possibility of a second deputy member) of each of the UEMS Full Member countries (with voting rights) and by two members of VAS. The EBAVM can also include representatives (and deputies) of Scientific Societies from extra-EU countries (as observers). The EBAVM members and deputies must be officially appointed by the Scientific Society it represents and should hold the curriculum of a specialist in Angiology/Vascular Medicine.

The aims of the EBAVM are to contribute to guarantee qualified specialist medical assistance to European Citizens on Vascular Diseases and their prevention, according to European Standards, in each Country. Particular attention is paid to education and training:

- Recommend educational European standards for training in Angiology/Vascular Medicine at all levels and supporting existing European projects.
- Provide a clear description of requirements for training institutions and for those who are in charge of training in Angiology/Vascular Medicine, in collaboration with the national authority, the national boards and national scientific/medical societies.
- 1.2. Recognition of Teachers and Training Institutions. At a national level the training in Angiology/Vascular Medicine is regulated by National Authorities/National Boards, which set standards in accordance with national rules and EU legislation in accordance to the requirements of the EBAVM.

The standard for recognition of training institutions (Teaching Centers), teachers and trainers are <u>defined</u> by national authorities, in accordance with national rules and EU legislation, as well as the requirements of the EBAVM. The latter has made recommendations for the best requirements to be met at European level in EU projects to harmonize quality levels. The Head/Chief of the training centres should be a specialist recognized by the EBAVM.

In countries where qualified Angiology/Vascular Medicine centers do not exist, applicants can make motivated requests to carry out their period of training in the accredited Teaching Centers from other European countries.

1.3. Quality assurance. National authorities should ensure that appropriate quality management procedures encompassing all aspects of postgraduate training are in place, taking into account the present recommendations.

Standards for visitation, or peer review of institutions on a European level will be defined in the prospects of a harmonic development and an adequate definition of a European standard:

- Evaluation of the centre by the students, at the end of their training (form to be prepared centrally by EBAVM)
- Possible participation of EBAVM members or delegates, even without warning, to local national exams (which has always to be indicated to EBAVM)
- Periodic requests for synthetic reports (on the forms defined by the EBAVM) from the national teaching centers (TC) and possible visits to evaluate the Teaching Centre
- 1.4. Recognition of quality assurance. The EBAVM will issue certificates of European recognition for training institutions or programmes
- 1.5. Manpower planning. Manpower planning is under the jurisdiction of each member state according to their needs for ANGIOLOGY/VASCULAR MEDICINE specialists. The EBAVM will produce proposals with a European outlook.

#### 6.2. Article 2: GENERAL ASPECTS OF TRAINING

2.1 Generally speaking, the EBAVM is favourable with the diffusion of the Commun Trunk (Internal Medicine or Surgery), followed by Specialty.

The EBAVM is also favourable in sustaining any effort to harmonise Specialties in Europe.

The EBAVM also promotes the concepts that all Specialties must meet the same criteria on a National level: therefore, Angiology/Vascular Medicine will follow the same path required for any other Specialty in the different Countries

- 2.2. Entry to the training programme depends on national regulations, but should be transparent to applicants.
- 2.3 UEMS /EBAVM European Core Curriculum should be considered for the basic content of the national training programme.

The Core Curriculum plans 5 certified years of training and the direct participation in collaborative European research projects. Optimal training would be:

- At least 2 years Common Medical Trunk training
- 3 years training in an accredited Angiology/Vascular Medicine Unit/Dept

The Core Curriculum foresees the training on all the aspects of competence in Angiology/Vascular Medicine and defines the minimum requirements for the main skills (preventative measures, clinical investigation and judgment, risk factor evaluation. ultrasound investigation, study of microcirculation, conservative treatment of vascular diseases including diseases of arteries, veins, lymphatics and microcirculation, thermic ablation of varicose veins and sclerotherapy, local treatment of ischaemic tissue defects and ulcers of venous origin, thrombolytic therapy, acute and life-threatening conditions in vascular medicine, rehabilitation and laboratory). Competences will be updated to coincide with research and technological developments. Cooperation and evaluation of therapeutic endovascular procedures e.g. local thrombolysis, intravascular procedures like: PTA, stenting, atherectomy, thrombembolectomy, evaluation findings obtained by angiography, of phlebography, lymphography, indications for vascular surgery, preoperative, postoperative care etc.

- 2.4 The EBAVM in cooperation with VAS works to facilitate the interchange of trainees between UEMS member countries. Training in Angiology/Vascular Medicine in more than one institution and/or in more than one country is encouraged. A national system of rotation is recommended.
- 2.5 For those who have the required requisites it is possible to apply for the European exam to obtain the European Diploma given by UEMS/EBAVM which has a value of excellence and if agreed by state authorities could replace or be added to the national diploma.

According to CESME's lines the EBAVM will institute a European Diploma in Angiology/Vascular Medicine .

Four qualified curricula allow the admission (taking into account the dishomogeneous distribution of the Specialty Schools in the different European Countries):

- 1. Specialty in Angiology/Vascular Medicine in one European Country or equivalent in non-European Countries.
- 2. Any related Specialty and at least 3 years of certified training in an accredited Angiology/Vascular Medicine Unit/Dept.
- 3. Any related Specialty and the *European Fellowship in Angiology/Vascular Medicine*.
- 4. Any related Specialty and the European Master in Angiology/Vascular Medicine.
- 2.6 Any specialist on Angiology/Vascular Medicine coming from a non-EU country may have equivalence if he/she is approved in one of the member countries and can apply for the European Diploma. In the case there is no specific equivalence in the titles, EBAVM should decide so as to guarantee that the defined criteria are respected.

#### 6.3. Article 3: REQUIREMENTS FOR TRAINING INSTITUTIONS -

- 3.1 Training must take place in a coordinated institution or group of institutions, which together offer the trainee practice in the full range of the speciality. Consultations should include training in/day- patient, and outpatient care. Related specialities must be available to provide trainees with the opportunity to develop their skills in a team approach to patient care.
- 3.2 Four main conditions are required for a valuable practical training in Angiology/Vascular Medicine:
  - Expertise of the head and training staff: the supervisor of the trainees should be a recognized full time vascular physician with educational competences.
  - Clinical activity: The training center should be a center with clinical activity in the main fields of A/Vascular Medicine (peripheral arterial disease, venous thromboembolic disease, chronic venous disorders, vascular malformations and lymphatic diseases, clinical microcirculation) in sufficient amount for the acquisition of a practical expertise by the trainees.
  - Resources: The techniques and skills necessary for the diagnostic and therapeutic management of vascular patients should be available in the Angiology/Vascular Medicine teaching center itself or in the other institutions of the group.
  - Pedagogical organization: The organization of the teaching center should take into account its pedagogical missions, and include formalized evaluation of the trainees, multidisciplinary clinical meetings, journal clubs and bibliography facilities, introduction to the methodology of clinical research.
- 3.3 An accreditation of the training centers based on these four principles should be made by the National authority in Angiology/Vascular Medicine, and regularly revised. The National accreditation committees should report annually on their activities to the UEMS board of Angiology/Vascular Medicine. Wherever a national accreditation committee does not exist, direct accreditation at European level (VAS European Teaching Centres)could be recognized. Training Institution assessment by the EBAVM are foreseen also for the accredited Institutions accredited on a National Level.

#### 6.4. Article 4: REQUIREMENTS FOR TEACHERS WITHIN THE SPECIALTY

- 4.1. Chief of training . The Head/Chief of Training must be recognized by the appropriate national educational and training authority and should fulfil the requirements of the EBAVM as well. He must be a specialist or have been in charge of an Angiology/Vascular Medicine (in a nationally recognised) Department/Unit, which respects the EBAVM criteria, for at least 5 years. He should have experience in management skills and a record of training and teaching. The associate medical training staff should be actively practising Angiology/Vascular Medicine and devoted to training. In case of the national level of requirement is not well harmonized to the EC level, EBAVM has to suggest additional training options (including European level) to fit for the EC requirement.
- 4.2. Teachers .Teachers educational roles and activities should be clearly defined in job descriptions. In assessing their suitability, consideration should be given to their ethical attitudes to medicine as well as educational skills and expertise.

4.3. Teaching capacity. The ratio of trainers to trainees must be sufficient to allow training. EBAVM will propose reasonable teacher/trainee ratio for the training.

Facilities in terms of space, libraries and other aids to teaching and training adequate to meet the needs of the programme must be available. Possibilities to attend educational courses and scientific meetings.

EBAVM needs feedback from trainees as well.

#### **6.5. Article 5: REQUIREMENTS FOR TRAINEERS**

- 5.1 To build up their experience trainees should be involved in the management of a sufficient number of in/ day care patients and outpatients. They must perform a minimum number of instrumental diagnostic procedures/skills according to national regulations in accordance with EBAVM Core Curriculum.
- 5.2 During the special training period for angiology the activity must be documented by the trainee and certified by the head of the training center at the end of the special training period. The requirement of the skills has to be documented by the number of patients examinated daily, certified by the tutor. A personal record in a log-book is mandatory.
- 5.3 The trainee must have sufficient linguistic ability to be able to communicate with patients and foreign colleagues. He/she should be able to work in the social and cultural context of the country in which he/she is based.
- 5.4 Literature research, computer and internet skills are basic requirements for studying the international literature.
- 5.5 He/she must be able to communicate and work in an interdisciplinary setting.
- 5.6 Experience with patients as well as with related health groups and patient organisations is encouraged. The trainee should have sufficient linguistic ability to communicate with patients.
- 5.7 Knowledge of scientific methodology, critical interpretation of study results and Cochrane review comprehension are training goals.
- 5.8 During his/her training the future specialist in angiology has to give evidence that he/she has been at at least 1 congress dealing with special angiological matters.
- At least one publication in a Peer Review Journal during the training period has to be achieved or he/she must have taken part in, at least, one collaborative European independent Research (even if still on-going).
- 5.9 The acquisition of organisational skills and knowledge of local medico-legal issues, is encouraged.
- 5.10 Participating in professional debate on ethics in medicine and in science and patients' educational programmes are encouraged.
- 5.11 The training is finished after a final test [Multiple Choice]concerning theoretical matters and an oral discussion based on angiological clinical cases.

## 6.6 -ARTICLE 6: CME/CPD

- 6.1 CME or CPD as a form of life-long learning is encouraged in all member countries.
- 6.2 The generally available guidelines for CME (UEMS, EFNS) should be followed.
- 6.3 CME is not restricted to meeting or congress attendance. Other teaching aspects such as reading, internet-based studies, and teaching should be encouraged.
- 6.4 A minimum of hours per time unit (period) devoted to CME/CPD should be suggested by the national society/authorities.
- 6.5 The UEMS/EBAVM support and contribute to qualified European initiatives devoted to life-long learning.