





YOUNG INTERNIST

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Our mission:

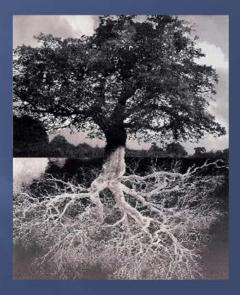
- Believe that anything is possible
- "Revitalise" Internal Medicine
- Promote Internal Medicine at home to students, interns, and residents
- Help to develop Young Internist groups within National Societies of Internal Medicine
- Develop the role of the YI within EFIM





Young Internists and Internal Medicine

- The most valuable resource for future healthcare
- Revitalization of Internal Medicine should start from its roots







We believe that:

- Focus should be placed on...
 - High quality education
 - Standardised clinical competencies
 - Communication abilities
 - Research opportunities
 - International networking

Unity is strength





Create a network of young Internists across Europe to...

- Promote professionalism
- Participate in administrative processes
- Co-operate on exploring uniformity of residency training programs across Europe
- Develop European exchange programs
- Promote high-quality, Europe-wide research







EFIM Young Internists Subcommittee



Roger Duckitt England Chairperson



Lorenzo Dagna Italy



Lenka Bosanska Czech Republic Secretary



Carla Araujo Portugal



Moshe Vardi Israel Webmaster



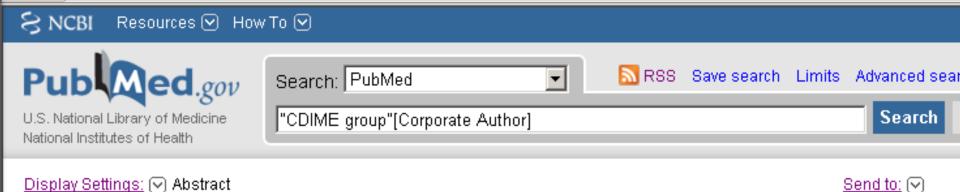
Mine Durusu Turkey Ex-Chair





How have we been doing so far?

- YI Database 800 members from 35 Countries
- Istanbul 4th Young Internists Day
- Research CDIME 2009 / EDIM Surveys
- YI sub-committee officially endorsed
- 2 positions on the EFIM Executive
- 6 member YI sub-committee
- Website
- Athens 5th YI Day
-FUTURE!



Eur J Intern Med. 2010 Oct;21(5):449-52.

Common diagnoses in internal medicine in Europe 2009: a pan-European, multi-centre survey.

Roger D, Runolfur P, Lenka B, Lorenzo D, Mine DT, Moshe V; CDIME group.

►Collaborators (42)

Acute Medicine Unit, Worthing Hospital, Worthing, United Kingdom.

Abstract

OBJECTIVE: Information on the medical problems and diseases encountered by practicing Internists in the hospital environment is lacking. The aim of this study is to assess the prevalence of various diagnostic categories that present to internists in the hospital setting in Europe.

DESIGN: A pan-European study used the Young Internists Research Network of the European Federation of Internal Medicine.

RESULTS: Data on 1501 patients from 31 physicians in 18 European countries were included in the study. The patients carried an average of 2.75 (+/-2.22) chronic medical diagnoses, ranging from 0 to 18. The most common presenting complaint was shortness of breath, followed by chest pain and abdominal pain. A cardiac condition was most common, followed by infectious disease. The complexity of patients averaged 2.5 (+/-1.14).

CONCLUSIONS: The results of this study will be useful for the development of a modern internal medicine curriculum, both at the graduate and postgraduate level, which reflects the competencies required for the delivery of comprehensive patient care in internal medicine wards.





Glimpse of the Future...

- Develop an Assembly of Young Internists
- I National YI delegate at every AC meeting
- Democratic nomination and election of SC
- Link with established National YI organisations
- Disseminate information to National Societies
- Help to set up/support YI's where none exists





And so...Amsterdam 2009 EFIM Administrative Council agrees the formation of the Assembly of Young Internists Byelaw changes agreed and ratified Planning for first Assembly meeting...





Assembly Membership

Czech Rep.

- Jan Vaclavik
- Lenka Bosanska

- Belgium
 Germany
 Iceland
 Italy
- Latvia
 Lithuania
 Finland
 France

- Sabine Allard
- Alexis Müller-Marbach
- Hallgerdur Kristjansdottir
- Massimiliano Anzaldi
- Lorenzo Dagna
 - leva Ruza
 - Viktorija Matuleviciene
- Noora Ritamäki
 - Xavier Roux







Morocco

- Israel
- Norway
- Netherlands
- Portugal
- Poland
- Romania
- Slovakia
- Spain
- Sweden
- Turkey

UK

- Jamal Fatihi
- Moshe Vardi
- Monica Bivol
 - Monique Slee
- Carla Araujo
- Ilona Szypula
- Ana-Maria Vintila
- Martin Caprnda
- Blanca Pinilla Llorente
- Frederic Hedberg
- Ozan Yazici
- Mine Durusu
- Tim Bonnici
- Roger Duckitt







Assembly of Young Internists								
Czech Republic	UK	Germany	Iceland	Latvia				
Italy	Morocco	Norway	Lithuania	Slovakia				
Turkey	Israel	Finland	France	Belgium				
Poland	Netherlands	Portugal	Sweden	Serbia				
Spain	Romania	Slovenia	Algeria	Austria				
Denmark	Greece	Hungary	Luxembourg	Tunisia				
Russia	Switzerland	Malta	Estonia					





The Assembly of Young Internists and the Young Internists subcommittee: Structure and process for election of members.

The Assembly of Young Internists is made up of national representatives nominated by each of the EFIM member societies. Meetings of the Assembly are held in conjunction with a meeting of the EFIM Administrative Council. The main function of the Assembly of Young Internists is to support the activities of EFIM and the Administrative Council and to act as a link to Young Internist groups within the member countries.

The term 'Young Internist' refers to doctors in training in Internal Medicine and to doctors in the early years of their senior posts. Ideally those taking positions as sub-committee members and national representatives will be involved for a minimum of two years to ensure continuity within the organisation.





Structure of the Assembly of Young Internists

1.The Assembly of Young Internists is composed of one representative from each EFIM member society.

2.Each EFIM member society decides how to select their Young Internist representative, yet should preferably select a representative involved in Young Internist activities within the member country.
3.The Assembly meets in conjunction with the Administrative Council.
4.The activities of the Assembly are be co-ordinated by the Young Internists sub-committee reporting to the EFIM Executive Committee.
5.The Young Internist representative from each member society attends EFIM Administrative Council as a non-voting observer.









Oslo, March 2010







Young Internists Subcommittee

+

Registered members ESIM Participants

Young Internists Assembly More possibilities

New contacts
 National YI Groups









Why working together?

To share experience

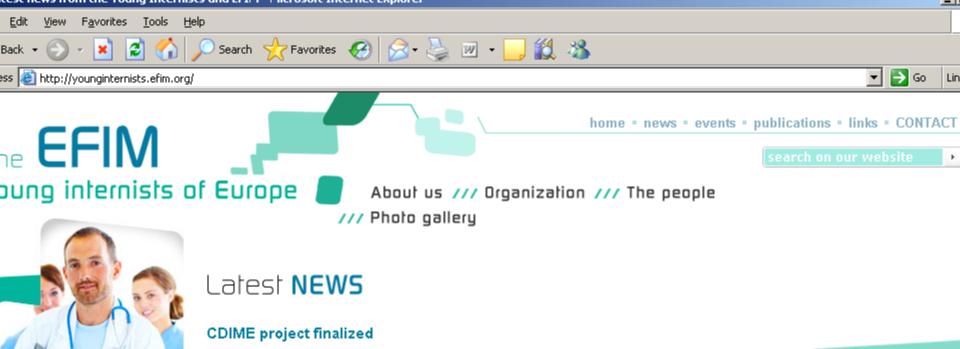
ESIM 2012 Winter School Saas-Fee

- To compare our knowledge
- To improve the working conditions
- To improve the quality of patients' care
- To meet, to talk, to learn from others
- To travel, to party...









 The Common Diagnoses in Internal Medicine in Europe 2009: A Pan-European, Multi-Centre Survey, is now finalized. Report has been finalized and published. For further details <u>click here</u>.

First Assembly of Young Internists of EFIM held in Oslo, March 2010

The Norwegian Society of Internal Medicine hosted the first meeting of the Assembly of Young Internists in Asker, Norway in March 2010. This important meeting marks the beginning of an exciting and challenging time in the story of the Young Internists of the European Federation of Internal Medicine. With the support of the EFIM Executive and Administrative Council, the Assembly was established in the EFIM Bye-laws in Amsterdam on 31st October 2009... (for full report, press <u>here</u>).

European School of Internal Medicine takes a step forward- the first winter school to be launched in the coming winter

The European School of Internal Medicine, held every summer since 1998, will be hosted this year at Brighton, UK. Consecutively, a new innovation by EFIM will be held this winter- with a new and exciting Winter School in Switzerland. For more details, please visit the <u>EFIM website</u>.

European School of Internal Medicine summer 2010

ESIM 2010: July 4-9th: This year's Summer School was held in Brighton, UK, and once again proved EFIM commitment to the education of European physicians. Residents from around the continent gathered for a week of knowledge exchange and intense after-hours program. Full

Upcoming events

EFIM is delighted to announce its first high-level scientific day, to be taking place in Luzern on the 24th of September 2010. This event will feature 2 panel discussions and 3 update talks from eminent European specialists.

Attendance is free, but space is limited.

<u>more details</u>

<u>egister here</u> and et full access to our website!

lready a member?

our emailaddress

nter	your	member ID	

Internet



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YI and the Working Groups

- Professional Issues
 - Competencies in IM
 - Quality of Care
 - Rare diseases
 - Exchange Programme





Professional Issues WG

- Main topics: how to cope with the future of internal medicine, important components of internal medicine: patient care, medical knowledge, communication skills, professionalism, integrated health care systems, integrated patients care. *Future activities:* rewriting the published documents in a popular way, ethical issues.
- The document published by the WG should be translated and published in the national journals.





Competencies WG + EBIM UEMS

Competencies WG + EBIM UEMS

- The data were collected from EFIM member countries: on competencies, training program structure and organization of medical services.
- Sources: residents and ESIM participants, national representatives using a web-based questionnaire sent to the national societies.
- Mark Cranston, Mine Durusu Tanriover, Moshe Vardi and Monique Slee Valentijn have been involved in the data collection and evaluation.





Quality of care WG

- Quality of care WG
- EQIP European Quality Indicator Project, stressed the importance of the quality of care assessment on the European level, summarized the main objectives, aims, methods and also the difficulties of the project.





Rare Diseases WG planned

• Rare Diseases WG planned

- One of the most peculiar topics of IM .
- Multi-systemic and complex.
- There is a specific need of a common strategy for those diseases in Europe.
- **Specific aims of the EFIM:** gather data on rare disease, coordinate European multicentric clinical trials.

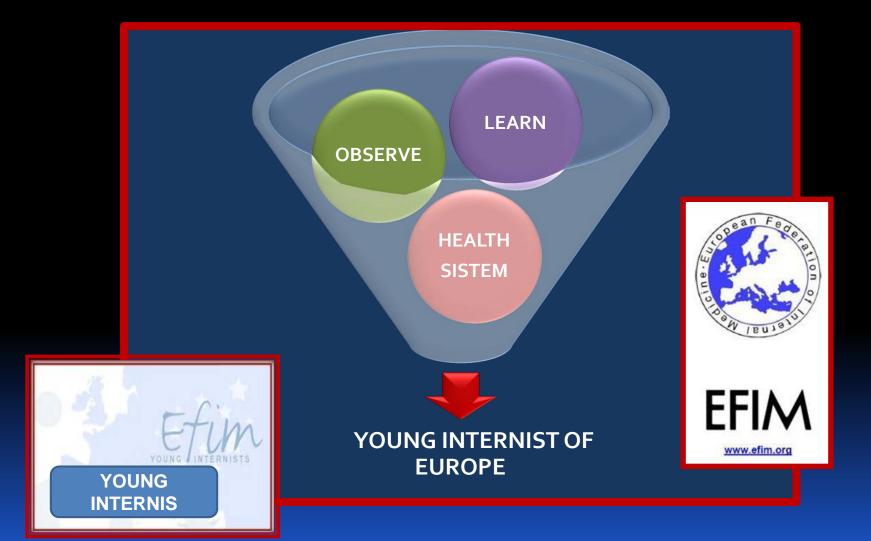




Exchange Programme WG

- Exchange Programme
- Short term visits of residents in another country, main requirements for the participants and participating hospitals.
- <u>Discussion</u>:
- first step to start the project one month
- second step to explore long-term exchanges;
- third step to ask national societies for an official support for exchanges as a part of training.

EXCHANGE PROGRAM







A – General Aspects:

- Observe and learn another culture, system of organization and type of relationship with other health professionals and patients.

- Report the main differences between the two countries.

- The internship lasts for a month.
- This is an observational stage.

- Will be issued a certificate of approval credited by the EFIM after sending the final report of both tutor and resident.



EXCHANGE PROGRAM

B - Requirements to be met by the Hospital

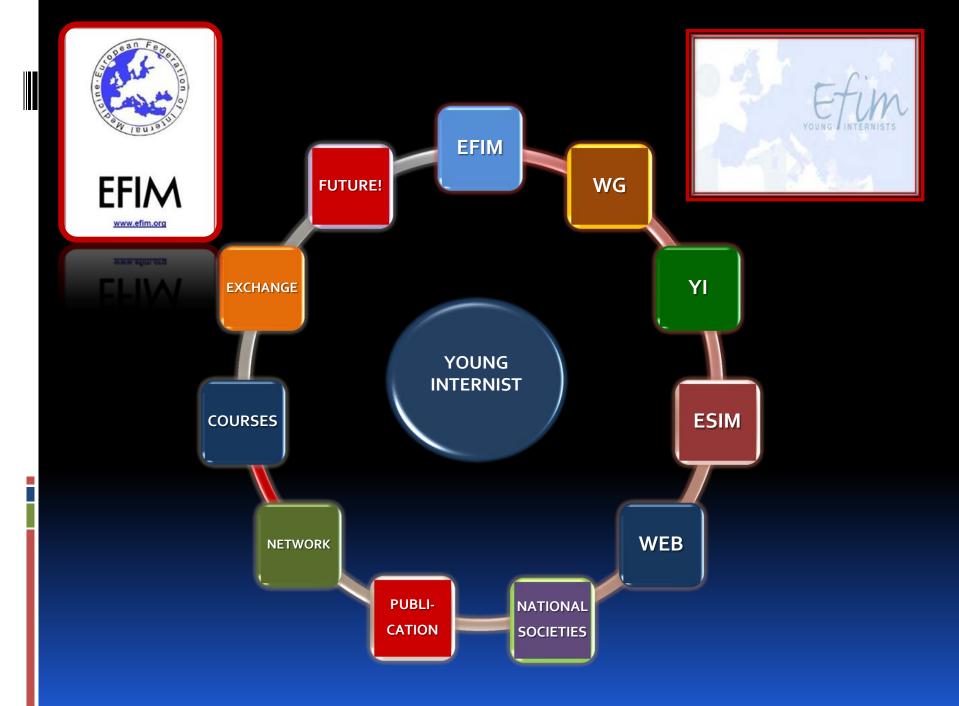
- Hospital with appropriate training in Internal Medicine.
- Released by the official local organization and bureaucratic compliance with the measures of each participating country.
- The tutor should speak English with the resident guest (this rule does not apply if the residents speaks the language of the country that receives).
- The clinical visits to patients should be constantly translated by the tutor.
- Clinical cases should be submitted in English.
- Provide help and support in finding accommodation.
- The final evaluation should be signed by the tutor and should be sent directly to the EFIM.



EXCHANGE PROGRAM

C - Requirements to be met by the resident:

- Must speak fluent English.
- Must have completed at least the first two years of medical residency in IM.
- Must have health insurance current and valid during the period of stay in the receiving country.
- Must have the support of the National Society of Internal Medicine of their country.
- Should write a final report.
- Should establish prior contact with the tutor in order to obtain information about the equipment for the training period.
- The resident must have the same workload of the residents of the specialty of Internal Medicine in the receiving country.





WORKSHOP

ESIM 2012 Winter School Saas-Fee

WORKSHOP

• TRAINING

- How are applicants chosen?
- Who is responsible for postgraduate training?
- Is there a national curriculum?

• PROCEDURES IN INTERNAL MEDICINE

- List of procedures expected to be done in training for Internal Medicine and how common or not they would be.
- Examples include: Drawing blood; Pleural and abdominal fluid aspiration; Lumbar puncture.

• WORKING HOURS

- European Working Time Directive (which prescribes a maximum weekly average of 48 hours and a minimum rest period of 11 hours in every 24-hour period).
- Some Young Internists reported working shifts of 32-hour duration at least 12 times a month.
- HOW DO YOU WORK IN YOUR COUNTRY?

• FINDING BALANCE IN YOUR MEDICAL LIFE

- Work over lifestyle?
- Managing stress
- What do you do in your free time?





CONCLUSIONS