



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS  
STANDING COMMITTEE OF EUROPEAN DOCTORS



**CPME/AD/Brd/170307/144/EN**

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At its Board meeting in Warsaw on 17 March 2007, the CPME endorsed the following resolution: **European Core Curriculum: The Students' Perspective** (referring to CPME 2006/144 Final EN)

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# **European Core Curriculum *The Students' Perspective***

5<sup>th</sup> International Follow-Up Conference on the  
Bologna Process in Medical Education

6 – 10<sup>th</sup> July, 2006  
Bristol (UK)

*As adopted by:*

*The General Assembly of the European Medical Students' Association (October 2006)  
and*

*The General Assembly of the International Federation of Medical Students' Associations  
(August 2006)*

European Medical Students' Association (EMSA)  
International Federation of Medical Students' Associations  
(IFMSA)

*With thanks to*



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## Executive Summary

From 6-10<sup>th</sup> July 2006, the 5<sup>th</sup> Bologna process follow-up conference organised by the European Medical Students' Association (EMSA) and the International Federation of Medical Students' Associations (IFMSA) took place in Bristol (UK).

More than 40 student representatives from 15 countries agreed on an outcome-based European core curriculum from the students' perspective. The "European Core Curriculum – *the Students' Perspective*" expresses the medical students' opinion on which abilities, knowledge, and attitudes graduates of medical schools in Europe should have gained and be assessed in accordingly.

Over the last few years, in innovative medical education, focus has shifted from acquisition of knowledge towards the achievement of concrete learning outcomes. Society and stakeholders are now more interested in the final product of the educational programme rather than the processes used to reach them. Therefore, the core curriculum does not prescribe neither teaching nor assessment methods to be used but only the final product of the educational process.

The core curriculum is structured in nine domains with 76 learning outcomes which are listed in alphabetical order:

- Clinical Skills
- Communication
- Critical Thinking
- Health in Society
- Life Long Learning
- Professionalism – Attitudes, Responsibilities and Self Development
- Teaching
- Teamwork
- Theoretical knowledge.

The curriculum will serve medical students and all other stakeholders in medical education as a common framework which can easily be adjusted for specific national or local needs. It serves as a common basis aiming to maintain and even improve the quality of education, healthcare and mobility, therefore furthering the establishment of a European Higher Education Area.

## Preamble

Since 2003, the European Medical Students' Association (EMSA) and the International Federation of Medical Students' Association (IFMSA) have collaborated in developing the European Higher Education Area in the field of medicine resulting in widely recognised position papers<sup>1,2</sup>. The 5<sup>th</sup> Bologna follow-up conference in Bristol (UK) hosted more than 40 medical student representatives from 15 European countries discussing a "**European Core Curriculum for Medicine – *the Students' Perspective***".

Participants of the above mentioned conference agreed on the development of an outcome-based core curriculum designed to fit society's need for optimal patient care and safety<sup>3, 4, 5</sup>. The medical profession differs from other professions in that it is the outcome of education rather than the educational process that has a significant bearing on public health. The focus in medical education has for too long been based on the educational process instead of the product of education<sup>6, 7, 8, 9, 10, 11, 12</sup>. Consequentially, as medical students of Europe, we embrace the challenge of working with Medical Schools to take more responsibility for the final product of education instead of focusing on providing knowledge in excess of the core abilities gained by each graduate.

The field of medicine is rapidly expanding; advancing research and technology have extended our core knowledge necessitating a dynamic and modern curriculum to serve new demands. This focused education will empower graduates to serve their population with the most accurate and relevant knowledge and abilities. All stakeholders in medical education should increase communication to develop these curricula and associated appropriate methods of assessment<sup>13,14</sup>, optimising the outcome of medical education and the consequential standard of the medical profession.

We aimed neither to reinvent the wheel nor neglect the existence of established and elaborated core curricula<sup>9, 15, 16, 17, 18, 19, 20</sup>. Whilst these documents have paved the way in outcome-based initiatives and we have incorporated some of their key ideas, we wanted to express the opinion of European medical students. As a diverse group currently experiencing a broad base of undergraduate medical education with equally varied educational techniques, we are in an optimal position to propose a curriculum suited to modern healthcare needs. We suggest the use of this curriculum as a framework which could easily be adopted and adjusted for national and local needs.

In developing a core curriculum, harmony and subsequent mobility will be increased throughout the European Higher Education Area. While the core values remain constant throughout Europe, we embrace the individuality and diversity of the countries, regions and individual institutions. This is reflected in the nature of an outcome-based curriculum, not prescribing the educational approach which leads to the end-point, but the overall outcome.

Whilst we believe that the current course of medical studies should lead to a common European medical degree, with specialisation occurring at a post-graduate level, the opportunity to tune individual interests and abilities at the undergraduate level is an important one. Thus, we welcome the opportunity for faculties and their students to foster a unique profile through educational opportunities and programmes. This will facilitate a culture of diversity and increased evolution of the field.

This document is a demonstration of the hard-work and dedication of European medical students to facilitate change and contribute to improved patient care and safety in our future work as medical professionals. We acknowledge our responsibilities and are prepared for the challenges associated with being at the forefront of reform. However, we are only one stakeholder in the field of medical education and therefore present our opinion as a basis for further work and co-operation. This will create a motivational environment for learning leading to further excellence in healthcare<sup>4</sup>.

On behalf of the participants,

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Note:

The domains of the “European Core Curriculum – *the Students’ Perspective*” are listed in alphabetical order.

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## Clinical Skills

*Graduates should have acquired and mastered clinical skills and practical procedures in order to confidently perform them in the professional environment. We appreciate the need for a specific list determining the skills and procedures. Whilst this is beyond the scope of this document, we acknowledge those outlined in previous documents* <sup>9, 15, 16, 17, 18, 19</sup>.

### *Basic Diagnostic Tools*

- Graduates should be able to take a detailed and relevant history.
- Graduates should be able to perform both general and targeted physical examination.
- Graduates should be able to utilise diagnostic procedures, imaging techniques and laboratory (paraclinical) tests where appropriate and interpret results adequately.

### *Clinical Reasoning*

- Graduates should be able to demonstrate sufficient clinical reasoning to enable them to use the basic diagnostic tools to arrive at a diagnosis and management plan in light of all the acquired information.

### *Treatment and Care*

- Graduates should be able to formulate and carry out an appropriate management plan.
- The medical graduate should be able to recognize and manage emergency conditions.
- The graduate should be able to administer advanced life support as defined by international guidelines<sup>21</sup>.
- Graduates should be able to apply appropriate palliative care.

### *Clinical Record Keeping*

- The medical graduate should be competent in maintaining clinically and legally valid patient records which are easily readable.

### *Patient-Centred Approach*

- The medical graduate should be able to consider the patient as a whole taking into consideration his social and psychological background.
- Graduates should be able to take into account the patient’s understanding and experience of their condition and treatment.
- Graduates should be able to adapt treatment to the particular patient, evaluating both effectiveness and evidence.

## Communication

*Graduates should have the communication skills that facilitate the practise of acquired competencies. This is vital to excellence in patient care.*

- Graduates should be able to communicate effectively and efficiently with all relevant parties in the medical environment. This includes:
  - Appropriate communication in every situation using different communication tactics
  - Awareness of their own and others' non-verbal communication.
  - Effective communication with patients, regardless of their backgrounds and/or disabilities.
  - The ability to effectively explain medical issues to a patient
  - Effective communication with other healthcare workers
  - The ability to communicate with all organisations that serve the public.
- Graduates should show respect, openness and honesty with patients and aim to communicate with empathy and intuition.
- Graduates should put all their efforts in creating an atmosphere of confidentiality.
- A graduate should find a way to communicate, even when there are barriers to the communication.
- A graduate should be able to use interpreters and be aware of the difficulties concerning this type of communication.
- A graduate should be able to communicate through all common modalities, including verbal, non-verbal, oral and written communication.
- A graduate should be able to give and receive feedback.

## Critical Thinking

*Critical thinking is the systematic evaluation of information preceding any professional decision and action. We emphasise that this skill is integral to all aspects of the doctor's role.*

- Graduates should be able to question medical procedures and treatment protocols before their application.
- Graduates should be able to find the evidence base for clinical decisions.
- A graduate should stay up-to-date with recent scientific developments and implement evidence based medicine in daily practice. This includes:
  - The ability to evaluate relevant scientific texts and learning resources.
  - An awareness of the limitations of current medical knowledge.
- A graduate should be able to apply quality assurance methods in professional practice.
- A graduate should be able to effectively and critically use resources in professional practice.

## Health in Society

*As future doctors in a rapidly changing environment we are obliged to adjust our attitudes to the expectations of society. We consider knowledge of the basic principles of public health issues as essential for our work as future physicians at a local, national and international level. Therefore, we stress the importance of including environmental, cultural and international health related issues in our medical curriculum.*

### *Environmental Issues*

- Graduates should know the impact of social, political and economic factors on the health of individuals and the community.
- Graduates should know the key risk factors, strategies for prevention and screening programmes for the most common conditions.
- Graduates should be able to identify vulnerable populations and respond appropriately.
- Graduates should be able to promote health in individual patients and in society. This includes:
  - Active education of patients.
  - The ability to identify health hazards in the environment and use the existing protocols to notify the responsible authorities accordingly.
  - The ability to formulate their opinion on these issues and participate actively in shaping health policies.

### *Ethnicity and Cultural Issues*

- Graduates are able to work with patients from different cultures, religions, social and ethnic backgrounds. This includes:
  - Approaching all patients with equality, regardless of their background.
  - Effective communication with patients, regardless of their background.
- Graduates can identify specific ethnic and social groups susceptible to certain conditions.
- Graduates understand the impact of cultural, religious and social aspects on health, health behaviour and the treatment process.

### *International Health Issues*

- Graduates should be familiar with the structure of European and International health politics and all its stakeholders.
- Graduates should be aware of the existence of epidemics and infectious diseases worldwide and know their prevention, treatment and relevant reporting procedures.
- Graduates should be conscious of the limitations of access to healthcare in certain areas of the world and their causes.

## Life Long Learning

*Life long learning is the refreshment and application of knowledge that a physician should perform with continuity for the rest of their career. A physician should be someone who is constantly up-to-date with their medical knowledge, ensuring that the patient care is evidence based and applied according to the current standards.*

- Graduates should be able to identify their own learning needs.
- Graduates should learn strategies to continuously update their relevant medical knowledge and its practice.
- Graduates should assess knowledge and sources of information in terms of their relevance and reliability.
- Graduates should be aware of the benefits of life long learning and realise the consequences of not taking part in learning processes.

## Professionalism – Attitudes, responsibilities and self development

*Professionalism is an ongoing process, which starts during student-life but continues developing as the student moves into the role of a physician. Undergraduate education leads to a profession and students need to gain the abilities appropriate to a physician's role and identity. Students should play an active part in the development of their role as physicians and they should be provided with a framework to facilitate this development.*

*Besides acquiring professional attributes, students should develop an ethical foundation in order to ensure optimal patient care in their future work. In addition, graduates should be aware of society's expectations and should possess sufficient management skills to be able to function within the healthcare sphere.*

### *Professional Attitudes*

- Graduates should possess the ability to build a positive professional relationship with the patient. This includes:
  - Showing respect for the patient's autonomy as well as their ability to make informed decisions about their own health and life.
  - Respecting confidentiality as defined by the relevant legal and ethical guidelines.
- Graduates should be willing to constantly refresh and update their knowledge and skills throughout their professional career.
- Graduates should be willing to teach colleagues the knowledge and skills they themselves have mastered.
- Graduates should be prepared to use their knowledge to educate and guide patients and the society in general.
- Graduates should be active in their contribution to the advancement of medicine.

### *Management, Responsibility and Decision Making*

- Graduates should be able to apply basic knowledge concerning leadership and management to professional situations.
- Graduates should employ strategies to cope with crises, conflict, uncertainty, errors and time limits.
- Graduates should have knowledge of the healthcare system in terms of effective patient care and cost effectiveness. They should be able to pay specific attention to rational prescription and use of resources.
- Graduates should have the ability to uphold the STEEEP (Safe, Timely, Efficient, Effective, Equitable, and Patient-centered) principle of patient care <sup>4,5</sup>.
- Graduates should act responsibly bearing in mind the consequences of their actions, and be able to learn from mistakes.
- Graduates must be able to handle the responsibility needed to work as physicians.
- Graduates should be aware of and able to fulfil their legal responsibilities and obligations as doctors and be able to fulfil those.
- Graduates should know the limits of their knowledge, skills, experience, time, physical capabilities and health. To ensure patient safety, graduates must be able to seek appropriate help and assistance when they are beyond their own capacity.

- Graduates should have the ability to make decisions, both independently and as a part of a team.
- Graduates should be able to make professional decisions knowing that these may have great impact on peoples' lives. Therefore, difficult decisions should, where relevant, be taken in conjunction with colleagues, the multidisciplinary team, patients and/or their relatives.

#### *Self Awareness*

- Graduates must be able to continually evaluate and reflect on their work and role as a practitioner. They should be able to show development in response to both external feedback and self-assessment.
- Graduates need to be confident in their thoughts and actions within their level of competence whilst being aware of their own limits.
- Graduates should be aware of the pressures of a demanding profession and they should be prepared to deal with a stressful environment. Graduates should be familiar with resources available for stress management.

#### *Ethical Principles*

- Graduates should apply relevant ethical codes to everyday clinical work and be able to express a well-considered opinion on ethical issues.
- Graduates should be able to ensure appropriate interactions with the healthcare industry.

## Teaching

*We believe teaching to be an essential component of professional and educational interaction on every level in the medical field and that it plays a key role in maintaining excellence within the healthcare system.*

- Graduates should be able to teach colleagues, students, other healthcare providers, patients and their relatives, communities and society at large. This includes:
  - Knowledge of teaching methods.
  - Having the skills to choose the most suitable method and content for the situation and the group or person being taught.
  - The ability to teach the latest up-to-date information in the subject they are teaching.
- Graduates should have knowledge of assessment methods and have the skills to choose the most suitable method for the situation, group or person being assessed.

## Teamwork

*Graduates should aim to ensure optimal patient care by being able to work effectively as part of a team whenever necessary. He should therefore be able to demonstrate the skills and attitudes necessary to fulfil the relevant role.*

- Graduates should be able to identify situations where teamwork is necessary and the appropriate composition of the team.
- Graduates should be able to work in a multidisciplinary team.
- Graduates should be able to distinguish the various roles they may be required to play and identify which ones are pertinent to the situation at hand.
- Graduates should demonstrate the attitudes and abilities necessary to work effectively in a team, aiming for excellence in patient centred care. These should include:
  - Leadership where appropriate
  - The ability to share information
  - Showing respect for, and understanding of, other professionals
  - The ability to effectively occupy different roles within a team as required by the situation
- Graduates should be aware of additional diagnostic and therapeutic options available within other healthcare professions.
- Graduates should be familiar with the relevant procedures of collaboration and communication with other bodies within the specific healthcare and legislative framework.

## Theoretical Knowledge

*Graduates must have acquired a scientific foundation for the practice of medicine and be able to translate the knowledge gained into medical practice and professional competence.*

*They must be aware of the rapid changes and advances in knowledge and recognise the importance of lifelong learning. Newly qualified doctors must make a commitment to exchange of knowledge with peers, be able to recognise the limits of their knowledge, and be able to access appropriate sources of information and evaluate them.*

### *Basic Sciences, Clinical Disciplines and Research*

- Graduates should have core knowledge relevant to common clinical settings, in basic sciences and clinical disciplines.
- Graduates should understand diseases and biological variation based on knowledge of both the healthy and unhealthy body. They need to apply the principles of basic sciences, including research to clinical practice.
- Graduates should have knowledge of research theory.

### *Humanities, Social and Behavioural Sciences*

- Graduates should have knowledge of medical ethics.
- Graduates should understand the influence of social and behavioural sciences on the practice of medicine.

### *Community and the Environment*

- Graduates should understand social, environmental and occupational influences on health in the community.
- Graduates should have knowledge about cultural and religious variation within the population, and understand how people from different cultures or religions present and cope with common illnesses, treatment, death and dying.

### *Healthcare System*

- Graduates should know the structure and functions of the healthcare system, the role of the doctor and other professions in the healthcare system.
- Graduates should know their legal obligations regarding patients' treatment and records.
- Graduates should have sufficient knowledge about the information technology of the healthcare system in which they are working.
- Graduates should know how prevention programmes can improve the health of the community and keep their knowledge up-to-date.

### *European Dimensions*

- Graduates should know about other healthcare systems since medical practice cannot be seen only within one country's perspective.
- Graduates should preferably have acquired knowledge (both written and oral) in one or more European foreign language and should have knowledge about European cultures.

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The following medical students' representatives have participated in the conference and contributed to the core curriculum:

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