



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS
STANDING COMMITTEE OF EUROPEAN DOCTORS



CPME/AD/Brd/170307/145/EN

At its Board meeting in Warsaw on 17 March 2007, the CPME endorsed the following resolution: **Albufeira Resolution on Medical Students' Rights in Europe** (referring to CPME 2006/145 Final EN)

Albufeira Resolution on

Medical Students' Rights in Europe

European Medical Students' Council 2006, Albufeira Portugal

*As adopted by the General Assembly of the
European Medical Students' Association on 4th October 2006.*

Realising that medicine is one of the most demanding student careers with an average workload of over 40 hours per week, which often hampers the performance of other activities as e.g. sports, work in students' organisations or part time jobs,

Bearing in mind the heterogeneity in the admission process to medical schools across Europe,

Affirming the initiatives taken by the Council of Europe and the European Commission on the recognition and validation of non-formal and informal learning, as e.g. performed on students boards and organisations, with regards to the development of key competences,

Reaffirming the unique role of medical students as future colleagues within the medical profession,

Acknowledging the importance of professional recognition throughout the European Community

Guided by the spirit of equal opportunities in health care,

Aware of the diversity of European health care systems,

Bearing in mind that medical education remains a national responsibility,

The EMS Council as its 3rd meeting in Albufeira, January 2006

1. Stresses that each medical student has the first and foremost right of education and training at all stages of undergraduate medical education;
2. Emphasises the need for a fair, transparent and comparable admission process in all European countries, ensuring equal access to medical education for all EU/EEA students;
3. Recommends a continuous assessment of learning goals throughout each academic year by regular test according to the latest knowledge in testing competence, complying to available European guidelines on quality assurance and quality improvement, as part of a quality cycle (Plan – Do – Check – Act, by W.E. Deming);
4. Demands the medical faculties to fully inform the medical students about their future career opportunities within the profession and the international health care setting;
5. Demands that medical faculties and teaching hospitals ensure equal opportunities on all stages of medical education;
6. Suggests relevant authorities to introduce a compulsory prevention scheme including hepatitis B vaccination and comprehensive information on health and safety at work in hospitals financed free of charge for the medical students;
7. Asks the scientific community to evaluate the relevance of performing serological testing of the students scanning for MRSA, hepatitis B, hepatitis C, tuberculosis, rubella and HIV with respect to patient safety;
8. Strongly condemns all forms of discrimination in medical education particularly on the ground of age, disability, ethnicity, gender, religion, sexual orientation, blood borne virus status, number of dependents and socio-economic origin,



9. Demands all teaching institutions to ensure that blame and humiliation have no place in medical education;
10. Urges health care professionals to treat medical students in a respectful manner as future colleagues;
11. Recommends the involvement of all health care professions in formal education to ensure the development of relevant skills in communication and consultation among all members of the health care team (nurses, pharmacists, physiotherapists, nutritionists, etc);
12. Demands that all activities performed in the hospital be supervised and decided upon by a qualified physician with the necessary experience in the respective specialty;
13. Strongly supports the formation of student mentor schemes which will provide welfare support to students during their studies;
14. Asks for a thorough evaluation of mentor and student-mentor schemes in undergraduate medical education, to identify further guidance opportunities with regards to student rights;
15. Call upon the inclusion of all medical students in a comprehensive insurance programme covering short- and long-term consequences of medical students practise;
16. Reminds all health care professionals that medical students are not yet physicians and must not be abused as unpaid labour, but be educated and trained to fully develop their competencies under the guidance of professionals;
17. Demands that all medical students be fully informed on their rights and duties regarding all procedures and emergencies prior to clinical practise;
18. Requests the right of refusal to perform any medical procedure in the case that a medical student feels inappropriately trained and supervised with regards to patient safety;
19. Decides to remain actively seized of the matter.

Albufeira, Portugal, January 2006.

