Emergency Medicine in Germany

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Within the total number of emergency services, the share of emergency services involving medical care has increased from 29% in 1985 to 40.6% in 1998/99. Altogether, care provided by emergency physicians was required in 20.7% of the total operations in medical care. Most reasons for providing emergency medical services were emergencies caused by general medical problems. Presently, the share of traumatological emergencies is only 13.4%. This reveals that preclinical emergency medical care in Germany is mainly due to acute diseases, and less to injuries. The involvement of the emergency physician – this qualification being regulated by the laws of the individual Länder (States) - is compulsorily foreseen in emergency medical services. In order to be allowed to work within emergency care services, emergency physicians need an additional qualification, of which the curriculum is determined by the Bundesärztekammer (Federal Medical Chamber), and which the doctor acquires in a continuing medical education programme: "Fachkunde Rettungsdienst" (emergency care). In the meantime, some "Länder" have instituted a continuing medical education programme in "Rettungsmedizin" (emergency medicine) which presupposes besides the interdisciplinary postgraduate course of 80 hours 2 years of practical clinical experience. The dual system of out-patient medical care foresees also medical on-call duty which is safeguarded during dayand nighttime by doctors under contract, with common means and possibilities in practice.

As the area of emergency medicine does not convey sufficient qualification during medical studies for assuming emergency medical tasks in practice, there is an increased need for postgraduate training in terms of continuing medical education programmes, which is satisfied by a variety of events which are offered by both, the Medical Chambers at State level (Länder), and in particular by working groups of emergency physicians, once again at State level (Länder). The range of continuing medical education programmes offered include congresses and courses in emergency care, as well as a number of events including seminars etc., which provide not only an introduction to specific subjects, but provide also higher qualifications to physicians actively involved in emergency medical care. Considering the fact the activity of the emergency physician requires primarily practical skills, the events offered increasingly focus on practical training.

Emergency medicine in Germany does not only mean clinical and practical emergency medical care, but also cooperation in emergency medical services as a senior emergency physician or as head of an emergency medical service. Whereas senior emergency physicians have clearly defined qualifications, the qualification as a head of an emergency medical service has not yet been synchronized between the individual States (Länder). In this respect, there exits only one qualification foreseen by the "Bundesärztekammer". Due to the increasing specialisation and centralisation of hospitals, as well as the reduction of the number of beds, patients are transferred from hospitals with a lower care level to those with a higher care level and to specialised clinics offering specific diagnostic and therapeutic techniques. This requires ground and airborne secondary transports involving the accompaniment of a doctor. In the case of intensive care patients, this transport requires the doctor to have a qualification in intensive care for which the "Deutsche Vereiningung für Notfall- und Intensivmedizin" (DIVI, German Association for emergency medicine and intensive care) has determined specific qualification standards. During the past years, the activity in the field of emergeny medicine has increasingly intensified, which, in turn, has led to an increased number of training programmes which are being offered in the whole country.