

**AEMH statement on CME / CPD**  
**(adopted unanimously at the 52<sup>nd</sup> AEMH Plenary Meeting, Verona,**  
**September 10, 1999)**

- The patient rightfully expects the doctor to participate in CME/CPD and deliver updated medical care.
- Medical ethics therefore places a responsibility on each physician for his/her own professional development.
- The economic responsibility for CME/CPD must be an integrated part of health care costs regardless of financing, salary or fee for service, provided by employers, health insurance organisations or similar systems.
- CME/CPD costs are to be considered an investment in quality development.
- CME/CPD should be organised by professional medical associations or a national authority in cooperation with national medical associations to secure appropriate CME/CPD for all specialty-certified doctors regardless of speciality, type of organization and place of employment.
- The planning and execution of professional development for the individual physician should be documented by preparing and logging personal plans and activities in CME/CPD in accordance with the competences needed for adequate care of the patients served.
- The expertise and active interest of physician organizations concerning CME/CPD must be utilized and developed by a national professional coordinating body (foundation/corporation)
- Information about important CME/CPD activities should be coordinated and disseminated in a systematic way.
- AEMH agrees to establishing an European Accreditation Council for CME proposed in the UEMS document European Structure of CME (draft D 9828) but is opposing a mandatory credit point system as long as the issue of funding is unsolved.
- Authorities and employers should actively promote and facilitate doctors' professional development.