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<th>Document</th>
<th>AEMH 12-051</th>
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<tbody>
<tr>
<td>Title:</td>
<td>National Report Romania</td>
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<td>Author:</td>
<td>Medical College of Romania, Prof Vlad Tica</td>
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<td>Purpose:</td>
<td>Information</td>
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<td>Distribution:</td>
<td>AEMH Member Delegations</td>
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<tr>
<td>Date:</td>
<td>15 May 2012</td>
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1. In Romania, there are 20,648 medical specialists functioning in 396 hospitals and in 51 medical, surgical and non-clinical specialties besides the dental and pharmaceutical specialities. There are:
- 6,100 physicians – aged between 30-40 years
- 5,339 physicians – aged between 40-50 years
- 4,358 physicians - aged between 50-60 years
- 2,335 physicians - over 60 years

There is a very small number of physicians in some specialties: Anesthesiology & Intensive care, Radiotherapy, Cardiovascular surgery, Thoracic surgery, Clinical Allergology & Immunology, Hematology.

Bucharest only is completely covered with all the 51 specialties.

Number of medical specialists on 1,000 inhabitants – 1.85. Major discrepancy between urban and rural environment, in favor of urban.

**Conclusion:** inefficient human resources management. Human resources growing old.

2. 11,200 Romanian medical specialists are working in OECD countries. 2800 of them left the country only in 2011, due to the following reasons:

- The budget assigned for Health - 3.2% of GDP
- Doctors’ incomes, very low anyway, were lowered with 25%, as a measure against recession. At present:
  - a) Resident physicians - 200 E/month
  - b) Medical specialist - 495 E/month
- The overwork. The working time is double than the time mentioned as limit in the European Directive.
- Closing down of 67 hospitals in 2011
- Doctors’ assimilation as public servants: in spite of the migration of the personnel, the jobs in the Health system are blocked, in the same rate as in the State Administration: 1 employed for 7 gone.
- Professional dissatisfaction and lack of perspective in professional development.
  Apart of the 51 specialties, there is a system of 90 certified complementary studies, related to some of the specialties and a system of continuing medical education, this last one being in charge of the Romanian College of Physicians.
- The duration of 34 specialties was diminished with one year, still in the limits of the Dir, nr. 2005/36/CE, due to economic reasons.
- There is not a system of support for the professional continuous development, doctors being forced to sustain CME from their own small incomes.
- The disrespect shown to the doctors by the Authorities deliberately induced into the population as a measure of diversion.

3. A new Health Bill is now in public debate, under internal and external pressure (IMF), after a missed trial of passing it by Governmental assuming of liability, which determined, in January 2012, serious street riots.

4. The Romanian College of Physicians has as a major preoccupation the elaboration and implementation of guidelines for each specialty.

5. Another major preoccupation is the quality of the educational programs.

6. The RCP is in contact, as a member, or observer with other European Medical Organizations: UEMS, CPME, GMC, IAMRA, etc.

7. The RCP is part of the national mechanism of recognition of medical qualifications, in partnership with the Ministry of Health in respect of the Directive nr.2005/36/CE.