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Quality work and registration

Doctors in Denmark use too much time in purposeless registration. The Danish Medical Association works for a plan that will ensure that quality work is professionally meaningful and is seen as an integrated part of daily life. Politicians and administrators are responsive to this and there are several initiatives in progress to simplify and clear up the registration procedures.

Cooperation with the industry

A new legislation on more openness on the cooperation between doctors and the industry is being read in the Danish Parliament. Clearer regulation and more openness are now introduced concerning doctors’ cooperation with the industry or when they give advice to authorities about medicine or medical equipment. The new regulation implies more openness about doctors’ fees from the industry, and the medico industry is also included in the regulation. Previously, only the pharmaceutical industry was included in the regulation.

Psychiatry

A number of specific recommendations for future psychiatric treatment have been presented by a committee appointed by the Government. There have been problems with waiting lists for psychiatric treatment and too much coercion is used.

The DMA has pointed out the importance that the overall capacity in psychiatry is improved. Furthermore, there is considerable regional variation in treatment offered psychiatric patients. A national model for the psychiatric treatment in each region should be introduced.

New on-call system in the Capital Region of Denmark

The Capital Region has introduced a new unified and referred on-call system with one phone number to call and with nurses in front. The DMA has warned against the system, because general practitioners have not been chosen as the primary visitator. In the other four regions of Denmark, the on-call system is the same as before with a general practitioner in front.

To ensure correct salary and work conditions for the doctors working in the Capital Region’s new on-call system, the Danish Association of Specialist Doctors and Junior Doctors’ Association have made agreements with the Region about this.

Emergency Units at the hospitals

Following among others advice from the DMA, it was in 2007 decided by the national health authorities, that joint emergency units should be established at the big hospitals, where specialists should be in front to ensure a quick and more efficient reception and treatment of patients.

The establishment of the joint emergency units is arranged differently in the 5 regions, with the consequence that quality and service varies considerably among the 21 emergency units at the hospitals in Denmark. Furthermore, several units have difficulties in recruiting an adequate number of specialists to cover the on-call duties. The DMA has urged the Government to ensure a unified model for emergency units in Denmark.
**Time limit for doctors in postgraduate training**

Some years ago, the Government introduced a so-called 4-years-rule, which means that a doctor can use a maximum of 4 years from starting his internship till he starts his specialist postgraduate training – main training position. The DMA has been engaged in trying to revise the rule, because numbers show that up to 20 percent of a year group might have fallen for this rule. Recently, an exemption of the rules has been made, which raise the time limit to 5 years, and the doctors who have exceeded the time limit may apply for vacant training positions.

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