

Principles of Procedure to carry out knowledge examination in accordance with Section 3 Para. 3 Sentence 3 of the Federal Medical Code (BÄO) in the Federal State of Berlin

I. Principles

The Berlin State Office for Health and Social Affairs (LAGeSo) is the competent authority in the Federal State of Berlin for decisions on the granting of a licence to practise medicine under Section 3 of the Federal Medical Code (BÄO) and the granting or extension of a professional licence (permission to practise the medical profession temporarily) under Section 10 of the BÄO.

In the case of applicants who hold proof of formal qualifications as a doctor issued in a third country, the granting of a licence to practise medicine is conditional upon the equivalence of the level of training. The equivalence of the training level is checked in the Federal State of Berlin by the LAGeSo. If the equivalence of the level of training is not accepted or can only be ascertained with an unreasonable amount of time or effort, proof of the necessary knowledge and skills must be provided by taking an examination, which relates to the content of the state final examination (knowledge examination).

The LAGeSo may also make the granting or renewal of a professional licence dependent on proof of the required knowledge and skills by means of a knowledge examination. These principles of procedure apply accordingly to this examination.

II. Examination board

The knowledge examination is taken in the form of a state examination before a state examination board appointed by the LAGeSo. The examination board has the task of evaluating the presentation of a patient's case history and the performance in the subjects and cross-sectional areas mentioned under point III 3. The examination board consists of the chairperson and two other members. Deputy members are to be appointed for the chairperson and the other members. Professors or other teaching staff of the subjects which are examined shall be appointed as chairperson, further members and deputies. Medical specialists who do not belong to the teaching staff of a university may also be appointed as members of the examination board.

The chairperson of the examination board is in charge of the examination and also acts as an examiner. The chairperson must ensure that the candidates are questioned in an appropriate manner and is responsible for ensuring that procedures are properly adhered to. Section 15, para. 3, 5, sentence 1 and para. 6 of the Licensing Regulations for Doctors (ÄApprO 2002) apply accordingly.

The examiners are bound by the regulations on exclusion or concerns about the partiality of persons contained in Sections 20 and 21 of the Administrative Procedure Act (VwVfG).

III. Knowledge examination

1. Examination date

The exams are usually held in the months April to June and October to December. The chairperson of the examination board determines the place and time of the examination and informs the other board members and the LAGeSo. The invitation is sent to the candidate at least five days before the date of the examination.

In the invitation, the LAGeSo informs the candidate about the examination procedure including the examination requirements according to point III as well as the consequences of a missed examination (Sections 18 and 19 ÄApprO 2002).

2. Examination procedure

The knowledge examination is an oral-practical examination with presentation of a patient's case history, which takes place in German as an individual examination or as a group examination with a maximum of four candidates on one day. Firstly, the practical part of the examination with presentation of a patient's case history takes place, followed by the oral part. The examination lasts at least 60 and at most 90 minutes for each applicant.

The members of the examination board must be present for the entire duration of the examination (Section 15 para. 3 sentence 1 ÄApprO 2002). They are obliged to maintain confidentiality. The chairperson can allow that the examination is temporarily conducted only by him or her and a further member of the examination board, while the candidate has to work directly on the patient and the patient refuses permission for this to take place in front of the entire examination board, or it seems clearly to be in the patient's interest that this only takes place in front of the chairperson and one further examiner. In such a case the other candidates will not take part in the examination either.

The examination is not public. The LAGeSo may send observers to the oral-practical session.

3. Examination requirements

The content of the examination is based on the content of the state final examination in accordance with the Licensing Regulations for Doctors (ÄApprO 2002).

The oral-practical examination initially relates to patient-related questions concerning **internal medicine** and **surgery**. The questions should also take the following aspects into account: **emergency medicine, clinical pharmacology/pharmacotherapy, imaging procedures, radiation protection, legal issues of medical practice**.

In addition, the LAGeSo may identify as examination-relevant a subject or a cross-sectional area in which significant differences have been identified and which is not covered by the examination topics listed above. The examination then additionally covers this subject or cross-sectional area.

Before the examination date, the examination board must assign one or more patients related to the above-mentioned subjects and cross-sectional areas as well as relevant diseases to the candidate for anamnesis and examination under the supervision of a member of the examination board. The candidate has to prepare a report about the patient which contains the anamnesis, diagnosis, prognosis, treatment plan and an epicrisis of the case. The report must be countersigned by a member of the examination board immediately after completion and presented at the examination date. It is part of the examination and shall be included in the evaluation. The questions in the examination must first be related to the presentation of a patient's case history.

Then, the candidate is to be given further practical interdisciplinary tasks with a focus on the most important clinical pictures and pathologies for the medical profession.

In the examination, the candidate must demonstrate on a case-by-case basis that he/she has the knowledge and skills, including the ability to conduct medical conversations which are necessary to carry out the profession of a doctor.

4. Evaluation

The Examination Board makes an overall evaluation of the presentation of a patient's case history on the basis of the report prepared by the candidate and the performance in the subjects and cross-sectional areas mentioned under point III. The examination is passed if the performance still meets the requirements despite its deficiencies.

The Examination Board makes its decision by majority vote. In the event of a tie, the chairperson has the casting vote. The chairperson informs the candidate of the result of the oral-practical examination and gives the reasons for the result at the request of the candidate.

5. Documentation of the examination

The examination board has to draw up a record of the examination of each candidate which has to be signed by all members of the examination board according to the standard form to be found in Annex 19 of the ÄApprO 2002. This record is to contain information about the subject matter of the examination, whether or not it was passed and the reasons for the passing/failure together with details of any serious irregularities. It is to be sent to the LAGeSo after the examination.

6. Withdrawal, default and cancellation

If the candidate withdraws from the examination after admission, he/she must inform LAGeSo immediately of the reasons for the withdrawal. If the LAGeSo approves the withdrawal, the examination is deemed not to have been taken. Approval will only be given if there is good cause. In the case of illness, the LAGeSo may also require a medical certificate to be presented by a LAGeSo designated doctor. If permission for withdrawal is not granted, or if the candidate fails to inform the LAGeSo immediately of the reasons for the withdrawal, the examination is deemed not to have been passed.

If the candidate misses an examination date or interrupts the examination, he/she has also failed the examination. If there is an important reason for the behaviour of the candidate, the examination is considered not to have been taken. The decision as to whether an important reason exists is made by the LAGeSo.

7. Retaking the examination

The knowledge examination can be repeated twice. Failed knowledge examinations in other federal states will be credited towards the number of repeat opportunities. A further repetition is not permitted. If the candidate has finally failed the knowledge examination, the licence to practise cannot be granted. The application for the licence to practise medicine will be rejected.

Imprint:

Landesamt für Gesundheit und Soziales,
Department IV A is responsible for the content
Turmstr. 21, 10559 Berlin

E-Mail: bqfg@lageso.berlin.de

Responsible concerning publishing legislation Silvia Kostner – Z Press – As of: 01.03.2020