
TITLE III

FREEDOM OF ESTABLISHMENT

CHAPTER III

Recognition on the basis of coordination of minimum training conditions

Section 1

General Provisions

Article 21

Principle of automatic recognition

1. Each Member State shall recognise evidence of formal qualifications as doctor giving access to the professional activities of doctor with basic training and specialised doctor, as nurse responsible for general care, as dental practitioner, as specialised dental practitioner, as veterinary surgeon, as pharmacist and as architect, listed in Annex V, points 5.1.1, 5.1.2, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.6.2 and 5.7.1 respectively, which satisfy the minimum training conditions referred to in Articles 24, 25, 31, 34, 35, 38, 44 and 46 respectively, and shall, for the purposes of access to and pursuit of the professional activities, give such evidence the same effect on its territory as the evidence of formal qualifications which it itself issues.

Such evidence of formal qualifications must be issued by the competent bodies in the Member States and accompanied, where appropriate, by the certificates listed in Annex V, points 5.1.1, 5.1.2, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.6.2 and 5.7.1 respectively.

The provisions of the first and second subparagraphs do not affect the acquired rights referred to in Articles 23, 27, 33, 37, 39 and 49.

2. Each Member State shall recognise, for the purpose of pursuing general medical practice in the framework of its national social security system, evidence of formal qualifications listed in Annex V, point 5.1.4 and issued to nationals of the Member States by the other Member States in accordance with the minimum training conditions laid down in Article 28.

The provisions of the previous subparagraph do not affect the acquired rights referred to in Article 30.

3. Each Member State shall recognise evidence of formal qualifications as a midwife, awarded to nationals of Member States by the other Member States, listed in Annex V, point 5.5.2, which complies with the minimum training conditions referred to in Article 40 and satisfies the criteria set out in Article 41, and shall, for the purposes of access to and pursuit of the professional activities, give such evidence the same effect on its territory as the evidence of formal qualifications which it itself issues. This provision does not affect the acquired rights referred to in Articles 23 and 43.
In respect of the operation of pharmacies that are not subject to territorial restrictions, a Member State may, by way of derogation, decide not to give effect to evidence of formal qualifications referred to in point 5.6.2 of Annex V, for the setting up of new pharmacies open to the public. For the purposes of this paragraph, pharmacies which have been open for less than three years shall also be considered as new pharmacies.

That derogation may not be applied in respect of pharmacists whose formal qualifications have already been recognised by the competent authorities of the host Member State for other purposes and who have been effectively and lawfully engaged in the professional activities of a pharmacist for at least three consecutive years in that Member State.

Evidence of formal qualifications as an architect referred to in Annex V, point 5.7.1, which is subject to automatic recognition pursuant to paragraph 1, proves completion of a course of training which began not earlier than during the academic reference year referred to in that Annex.

Each Member State shall make access to, and pursuit of, the professional activities of doctors, nurses responsible for general care, dental practitioners, veterinary surgeons, midwives and pharmacists subject to possession of evidence of formal qualifications referred to in points 5.1.1, 5.1.2, 5.1.4, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2 and 5.6.2 of Annex V respectively, attesting that the professional concerned, over the duration of his training, has acquired, as appropriate, the knowledge, skills and competences referred to in Articles 24(3), 31(6), 31(7), 34(3), 38(3), 40(3) and 44(3).

In order to take account of generally acknowledged scientific and technical progress, the Commission shall be empowered to adopt delegated acts in accordance with Article 57c to update the knowledge and skills referred to in Articles 24(3), 31(6), 34(3), 38(3), 40(3), 44(3) and 46(4) to reflect the evolution of Union law directly affecting the professionals concerned.

Such updates shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such updates shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) of the Treaty on the Functioning of the European Union (TFEU).

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**Textual Amendments**


Article 21a

Notification procedure

1. Each Member State shall notify the Commission of the laws, regulations and administrative provisions which it adopts with regard to the issuing of evidence of formal qualifications in the professions covered by this Chapter.

In the case of evidence of formal qualifications referred to in Section 8, notification in accordance with the first subparagraph shall also be addressed to the other Member States.

2. The notification referred to in paragraph 1 shall include information about the duration and content of the training programmes.

3. The notification referred to in paragraph 1 shall be transmitted via IMI.

4. In order to take due account of legislative and administrative developments in the Member States, and on condition that the laws, regulations and administrative provisions notified pursuant to paragraph 1 of this Article are in conformity with the conditions set out in this Chapter, the Commission shall be empowered to adopt delegated acts in accordance with Article 57c in order to amend points 5.1.1 to 5.1.4, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2, 5.6.2 and 5.7.1 of Annex V, concerning the updating of the titles adopted by the Member States for evidence of formal qualifications and, where appropriate, the body which issues the evidence of formal qualifications, the certificate which accompanies it and the corresponding professional title.

5. Where the legislative, regulatory and administrative provisions notified pursuant to paragraph 1 are not in conformity with the conditions set out in this Chapter, the Commission shall adopt an implementing act in order to reject the requested amendment of points 5.1.1 to 5.1.4, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2, 5.6.2 or 5.7.1 of Annex V.

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Textual Amendments


Article 22

Common provisions on training

With regard to the training referred to in Articles 24, 25, 28, 31, 34, 35, 38, 40, 44 and 46:

(a) Member States may authorise part-time training under conditions laid down by the competent authorities; those authorities shall ensure that the overall duration, level and quality of such training is not lower than that of continuous full-time training;

(b) Member States shall, in accordance with the procedures specific to each Member State, ensure, by encouraging continuous professional development, that professionals whose professional qualification is covered by Chapter III of this Title are able to
update their knowledge, skills and competences in order to maintain a safe and
effective practice and keep abreast of professional developments.]

[F3Member States shall communicate to the Commission the measures taken pursuant
to point (b) of the first paragraph by 18 January 2016.]

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**Textual Amendments**

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**Article 23**

**Acquired rights**

1. Without prejudice to the acquired rights specific to the professions concerned, in cases
where the evidence of formal qualifications as doctor giving access to the professional activities
of doctor with basic training and specialised doctor, as nurse responsible for general care, as
dental practitioner, as specialised dental practitioner, as veterinary surgeon, as midwife and as
pharmacist held by Member States nationals does not satisfy all the training requirements
referred to in Articles 24, 25, 31, 34, 35, 38, 40 and 44, each Member State shall recognise
as sufficient proof evidence of formal qualifications issued by those Member States insofar
as such evidence attests successful completion of training which began before the reference
dates laid down in Annex V, points 5.1.1, 5.1.2, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2 and 5.6.2 and is
accompanied by a certificate stating that the holders have been effectively and lawfully engaged
in the activities in question for at least three consecutive years during the five years preceding
the award of the certificate.

2. The same provisions shall apply to evidence of formal qualifications as doctor giving
access to the professional activities of doctor with basic training and specialised doctor, as
nurse responsible for general care, as dental practitioner, as specialised dental practitioner, as
veterinary surgeon, as midwife and as pharmacist, obtained in the territory of the former German
Democratic Republic, which does not satisfy all the minimum training requirements laid down
in Articles 24, 25, 31, 34, 35, 38, 40 and 44 if such evidence certifies successful completion
of training which began before:

(a) 3 October 1990 for doctors with basic training, nurses responsible for general care,
dental practitioners with basic training, specialised dental practitioners, veterinary
surgeons, midwives and pharmacists, and

(b) 3 April 1992 for specialised doctors.

The evidence of formal qualifications referred to in the first subparagraph confers on the
holder the right to pursue professional activities throughout German territory under the
same conditions as evidence of formal qualifications issued by the competent German
authorities referred to in Annex V, points 5.1.1, 5.1.2, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2
and 5.6.2.
3. Without prejudice to the provisions of Article 37(1), each Member State shall recognise evidence of formal qualifications as doctor giving access to the professional activities of doctor with basic training and specialised doctor, as nurse responsible for general care, as veterinary surgeon, as midwife, as pharmacist and as architect held by Member States nationals and issued by the former Czechoslovakia, or whose training commenced, for the Czech Republic and Slovakia, before 1 January 1993, where the authorities of either of the two aforementioned Member States attest that such evidence of formal qualifications has the same legal validity within their territory as the evidence of formal qualifications which they issue and, with respect to architects, as the evidence of formal qualifications specified for those Member States in Annex VI, point 6, as regards access to the professional activities of doctor with basic training, specialised doctor, nurse responsible for general care, veterinary surgeon, midwife, pharmacist with respect to the activities referred to in Article 45(2), and architect with respect to the activities referred to in Article 48, and the pursuit of such activities.

Such an attestation must be accompanied by a certificate issued by those same authorities stating that such persons have effectively and lawfully been engaged in the activities in question within their territory for at least three consecutive years during the five years prior to the date of issue of the certificate.

4. Each Member State shall recognise evidence of formal qualifications as doctor giving access to the professional activities of doctor with basic training and specialised doctor, as nurse responsible for general care, as dental practitioner, as specialised dental practitioner, as veterinary surgeon, as midwife, as pharmacist and as architect held by nationals of the Member States and issued by the former Soviet Union, or whose training commenced

(a) for Estonia, before 20 August 1991,
(b) for Latvia, before 21 August 1991,
(c) for Lithuania, before 11 March 1990,

where the authorities of any of the three aforementioned Member States attest that such evidence has the same legal validity within their territory as the evidence which they issue and, with respect to architects, as the evidence of formal qualifications specified for those Member States in Annex VI, point 6, as regards access to the professional activities of doctor with basic training, specialised doctor, nurse responsible for general care, dental practitioner, specialised dental practitioner, veterinary surgeon, midwife, pharmacist with respect to the activities referred to in Article 45(2), and architect with respect to the activities referred to in Article 48, and the pursuit of such activities.

Such an attestation must be accompanied by a certificate issued by those same authorities stating that such persons have effectively and lawfully been engaged in the activities in question within their territory for at least three consecutive years during the five years prior to the date of issue of the certificate.

With regard to evidence of formal qualifications as veterinary surgeons issued by the former Soviet Union or in respect of which training commenced, for Estonia, before 20 August 1991, the attestation referred to in the preceding subparagraph must be accompanied by a certificate issued by the Estonian authorities stating that such persons have effectively and lawfully been engaged in the activities in question within their territory for at least five consecutive years during the seven years prior to the date of issue of the certificate.

With regard to evidence of formal qualifications as veterinarian surgeons issued by the former Soviet Union or in respect of which training commenced, for Estonia, before 20 August 1991, the attestation referred to in the preceding subparagraph must be accompanied by a certificate issued by the Estonian authorities stating that such persons have effectively and lawfully been engaged in the activities in question within their territory for at least five consecutive years during the seven years prior to the date of issue of the certificate.

45. Without prejudice to Article 43b, each Member State shall recognise evidence of formal qualifications as doctor giving access to the professional activities of doctor with basic training and specialised doctor, as nurse responsible for general care, as dental practitioner, as...
specialised dental practitioner, as veterinary surgeon, as midwife, as pharmacist and as architect held by nationals of the Member States and issued by the former Yugoslavia, or whose training commenced,

(a) for Slovenia, before 25 June 1991; and
(b) for Croatia, before 8 October 1991;

where the authorities of the aforementioned Member States attest that such evidence has the same legal validity within their territory as the evidence which they issue and, with respect to architects, as the evidence of formal qualifications specified for those Member States in Annex VI, point 6, as regards access to the professional activities of doctor with basic training, specialised doctor, nurse responsible for general care, dental practitioner, specialised dental practitioner, veterinary surgeon, midwife, pharmacist with respect to the activities referred to in Article 45(2), and architect with respect to the activities referred to in Article 48, and the pursuit of such activities.

Such an attestation must be accompanied by a certificate issued by those same authorities stating that such persons have effectively and lawfully been engaged in the activities in question within their territory for at least three consecutive years during the five years prior to the date of issue of the certificate.

6. Each Member State shall recognise as sufficient proof for Member State nationals whose evidence of formal qualifications as a doctor, nurse responsible for general care, dental practitioner, veterinary surgeon, midwife and pharmacist does not correspond to the titles given for that Member State in Annex V, points 5.1.1, 5.1.2, 5.1.3, 5.1.4, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2 and 5.6.2, evidence of formal qualifications issued by those Member States accompanied by a certificate issued by the competent authorities or bodies.

The certificate referred to in the first subparagraph shall state that the evidence of formal qualifications certifies successful completion of training in accordance with Articles 24, 25, 28, 31, 34, 35, 38, 40 and 44 respectively and is treated by the Member State which issued it in the same way as the qualifications whose titles are listed in Annex V, points 5.1.1, 5.1.2, 5.1.3, 5.1.4, 5.2.2, 5.3.2, 5.3.3, 5.4.2, 5.5.2 and 5.6.2.

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**Textual Amendments**


F5 Article 23a

**Specific circumstances**

1. By way of derogation from the present Directive, Bulgaria may authorise the holders of the qualification of ‘фелдшер’ (feldsher) awarded in Bulgaria before 31 December 1999 and exercising this profession under the Bulgarian national social security scheme on 1 January 2000 to continue to exercise the said profession, even if parts of their activity fall under the provisions of the present Directive concerning doctors of medicine and nurses responsible for general care respectively.
2. The holders of the Bulgarian qualification of 'фелдшер' (feldsher) referred to in paragraph 1 are not entitled to obtain professional recognition in other Member States as doctors of medicine nor as nurses responsible for general care under this Directive.

**Textual Amendments**


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Section 2

**Doctors of medicine**

**Article 24**

**Basic medical training**

1. Admission to basic medical training shall be contingent upon possession of a diploma or certificate providing access, for the studies in question, to universities.

2. Basic medical training shall comprise a total of at least five years of study, which may in addition be expressed with the equivalent ECTS credits, and shall consist of at least 5,500 hours of theoretical and practical training provided by, or under the supervision of, a university.

For professionals who began their studies before 1 January 1972, the course of training referred to in the first subparagraph may comprise six months of full-time practical training at university level under the supervision of the competent authorities.

3. Basic medical training shall provide an assurance that the person in question has acquired the following knowledge and skills:

(a) adequate knowledge of the sciences on which medicine is based and a good understanding of the scientific methods including the principles of measuring biological functions, the evaluation of scientifically established facts and the analysis of data;

(b) sufficient understanding of the structure, functions and behaviour of healthy and sick persons, as well as relations between the state of health and physical and social surroundings of the human being;

(c) adequate knowledge of clinical disciplines and practices, providing him with a coherent picture of mental and physical diseases, of medicine from the points of view of prophylaxis, diagnosis and therapy and of human reproduction;

(d) suitable clinical experience in hospitals under appropriate supervision.

**Textual Amendments**

Article 25

Specialist medical training

1. Admission to specialist medical training shall be contingent upon completion and validation of a basic medical training programme as referred to in Article 24(2) in the course of which the trainee has acquired the relevant knowledge of basic medicine.

2. Specialist medical training shall comprise theoretical and practical training at a university or medical teaching hospital or, where appropriate, a medical care establishment approved for that purpose by the competent authorities or bodies.

The Member States shall ensure that the minimum duration of specialist medical training courses referred to in Annex V, point 5.1.3 is not less than the duration provided for in that point. Training shall be given under the supervision of the competent authorities or bodies. It shall include personal participation of the trainee specialised doctor in the activity and responsibilities entailed by the services in question.

3. Training shall be given on a full-time basis at specific establishments which are recognised by the competent authorities. It shall entail participation in the full range of medical activities of the department where the training is given, including duty on call, in such a way that the trainee specialist devotes all his professional activity to his practical and theoretical training throughout the entire working week and throughout the year, in accordance with the procedures laid down by the competent authorities. Accordingly, these posts shall be the subject of appropriate remuneration.

3a. Member States may provide, in national legislation, for partial exemptions from parts of the specialist medical training courses listed in point 5.1.3 of Annex V, to be applied on a case-by-case basis provided that that part of the training has been followed already during another specialist training course listed in point 5.1.3 of Annex V, for which the professional has already obtained the professional qualification in a Member State. Member States shall ensure that the granted exemption equates to not more than half of the minimum duration of the specialist medical training course in question.

Each Member State shall notify the Commission and the other Member States of the national legislation concerned for any such partial exemptions.

4. The Member States shall make the issuance of evidence of specialist medical training contingent upon possession of evidence of basic medical training referred to in Annex V, point 5.1.1.

5. The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the adaptation of the minimum periods of training referred to in point 5.1.3 of Annex V to scientific and technical progress.

Textual Amendments


TITLE III CHAPTER III Section 2

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Article 26

Types of specialist medical training

Evidence of formal qualifications as a specialised doctor referred to in Article 21 is such evidence awarded by the competent authorities or bodies referred to in Annex V, point 5.1.2 as corresponds, for the specialised training in question, to the titles in use in the various Member States and referred to in Annex V, point 5.1.3.

[F1 In order to take due account of changes in national legislation and with a view to updating this Directive, the Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the inclusion in point 5.1.3 of Annex V of new medical specialties common to at least two-fifths of the Member States.]

Textual Amendments


Article 27

Acquired rights specific to specialised doctors

1. A host Member State may require of specialised doctors whose part-time specialist medical training was governed by legislative, regulatory and administrative provisions in force as of 20 June 1975 and who began their specialist training no later than 31 December 1983 that their evidence of formal qualifications be accompanied by a certificate stating that they have been effectively and lawfully engaged in the relevant activities for at least three consecutive years during the five years preceding the award of that certificate.

2. Every Member State shall recognise the qualification of specialised doctors awarded in Spain to doctors who completed their specialist training before 1 January 1995, even if that training does not satisfy the minimum training requirements provided for in Article 25, in so far as that qualification is accompanied by a certificate issued by the competent Spanish authorities and attesting that the person concerned has passed the examination in specific professional competence held in the context of exceptional measures concerning recognition laid down in Royal Decree 1497/99, with a view to ascertaining that the person concerned possesses a level of knowledge and skill comparable to that of doctors who possess a qualification as a specialised doctor defined for Spain in Annex V, points 5.1.2 and 5.1.3.

[F32a Member States shall recognise the qualifications of specialised doctors awarded in Italy, and listed in points 5.1.2 and 5.1.3 of Annex V, to doctors who started their specialist training after 31 December 1983 and before 1 January 1991, despite the training concerned not satisfying all the training requirements set out in Article 25, if the qualification is accompanied by a certificate issued by the competent Italian authorities stating that the doctor concerned has effectively and lawfully been engaged, in Italy, in the activities of a medical specialist in...]

(9) No 1024/2012 on administrative cooperation through the Internal Market Information System (the IMI Regulation) (Text with EEA relevance).
the same specialist area concerned, for at least seven consecutive years during the 10 years preceding the award of the certificate.]

3. Every Member State which has repealed its legislative, regulatory or administrative provisions relating to the award of evidence of formal qualifications as a specialised doctor referred to in Annex V, points 5.1.2 and 5.1.3 and which has adopted measures relating to acquired rights benefiting its nationals, shall grant nationals of other Member States the right to benefit from those measures, in so far as such evidence of formal qualifications was issued before the date on which the host Member State ceased to issue such evidence for the specialty in question.

The dates on which these provisions were repealed are set out in Annex V, point 5.1.3.

Textual Amendments


Article 28

Specific training in general medical practice

[F11. Admission to specific training in general medical practice shall be contingent upon completion and validation of a basic medical training programme as referred to in Article 24(2) in the course of which the trainee has acquired the relevant knowledge of basic medicine.]

2. The specific training in general medical practice leading to the award of evidence of formal qualifications issued before 1 January 2006 shall be of a duration of at least two years on a full-time basis. In the case of evidence of formal qualifications issued after that date, the training shall be of a duration of at least three years on a full-time basis.

Where the training programme referred to in Article 24 comprises practical training given by an approved hospital possessing appropriate general medical equipment and services or as part of an approved general medical practice or an approved centre in which doctors provide primary medical care, the duration of that practical training may, up to a maximum of one year, be included in the duration provided for in the first subparagraph for certificates of training issued on or after 1 January 2006.

The option provided for in the second subparagraph shall be available only for Member States in which the specific training in general medical practice lasted two years as of 1 January 2001.

3. The specific training in general medical practice shall be carried out on a full-time basis, under the supervision of the competent authorities or bodies. It shall be more practical than theoretical.

The practical training shall be given, on the one hand, for at least six months in an approved hospital possessing appropriate equipment and services and, on the other hand, for at least six months as part of an approved general medical practice or an approved centre at which doctors provide primary health care.
The practical training shall take place in conjunction with other health establishments or structures concerned with general medicine. Without prejudice to the minimum periods laid down in the second subparagraph, however, the practical training may be given during a period of not more than six months in other approved establishments or health structures concerned with general medicine.

The training shall require the personal participation of the trainee in the professional activity and responsibilities of the persons with whom he is working.

4. Member States shall make the issuance of evidence of formal qualifications in general medical practice subject to possession of evidence of formal qualifications in basic medical training referred to in Annex V, point 5.1.1.

5. Member States may issue evidence of formal qualifications referred to in Annex V, point 5.1.4 to a doctor who has not completed the training provided for in this Article but who has completed a different, supplementary training, as attested by evidence of formal qualifications issued by the competent authorities in a Member State. They may not, however, award evidence of formal qualifications unless it attests knowledge of a level qualitatively equivalent to the knowledge acquired from the training provided for in this Article.

Member States shall determine, inter alia, the extent to which the complementary training and professional experience already acquired by the applicant may replace the training provided for in this Article.

The Member States may only issue the evidence of formal qualifications referred to in Annex V, point 5.1.4 if the applicant has acquired at least six months’ experience of general medicine in a general medical practice or a centre in which doctors provide primary health care of the types referred to in paragraph 3.

**Article 29**

**Pursuit of the professional activities of general practitioners**

Each Member State shall, subject to the provisions relating to acquired rights, make the pursuit of the activities of a general practitioner in the framework of its national social security system contingent upon possession of evidence of formal qualifications referred to in Annex V, point 5.1.4.

Member States may exempt persons who are currently undergoing specific training in general medicine from this condition.
Article 30

Acquired rights specific to general practitioners

1. Each Member State shall determine the acquired rights. It shall, however, confer as an acquired right the right to pursue the activities of a general practitioner in the framework of its national social security system, without the evidence of formal qualifications referred to in Annex V, point 5.1.4, on all doctors who enjoy this right as of the reference date stated in that point by virtue of provisions applicable to the medical profession giving access to the professional activities of doctor with basic training and who are established as of that date on its territory, having benefited from the provisions of Articles 21 or 23.

The competent authorities of each Member State shall, on demand, issue a certificate stating the holder's right to pursue the activities of general practitioner in the framework of their national social security systems, without the evidence of formal qualifications referred to in Annex V, point 5.1.4, to doctors who enjoy acquired rights pursuant to the first subparagraph.

2. Every Member State shall recognise the certificates referred to in paragraph 1, second subparagraph, awarded to nationals of Member States by the other Member States, and shall give such certificates the same effect on its territory as evidence of formal qualifications which it awards and which permit the pursuit of the activities of a general practitioner in the framework of its national social security system.

Section 3

Nurses responsible for general care

Article 31

Training of nurses responsible for general care

1. Admission to training for nurses responsible for general care shall be contingent upon either:

(a) completion of general education of 12 years, as attested by a diploma, certificate or other evidence issued by the competent authorities or bodies in a Member State or a certificate attesting success in an examination of an equivalent level and giving access to universities or to higher education institutions of a level recognised as equivalent; or

(b) completion of general education of at least 10 years, as attested by a diploma, certificate or other evidence issued by the competent authorities or bodies in a Member State or a certificate attesting success in an examination of an equivalent level and giving access to a vocational school or vocational training programme for nursing.

2. Training of nurses responsible for general care shall be given on a full-time basis and shall include at least the programme described in Annex V, point 5.2.1.

The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning amendments to the list set out in point 5.2.1 of Annex V with a view to adapting it to scientific and technical progress.
The amendments referred to in the second subparagraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

3. The training of nurses responsible for general care shall comprise a total of at least three years of study, which may in addition be expressed with the equivalent ECTS credits, and shall consist of at least 4,600 hours of theoretical and clinical training, the duration of the theoretical training representing at least one third and the duration of the clinical training at least one half of the minimum duration of the training. Member States may grant partial exemptions to professionals who have received part of their training on courses which are of at least an equivalent level.

The Member States shall ensure that institutions providing nursing training are responsible for the coordination of theoretical and clinical training throughout the entire study programme.

4. Theoretical education is that part of nurse training from which trainee nurses acquire the professional knowledge, skills and competences required under paragraphs 6 and 7. The training shall be given by teachers of nursing care and by other competent persons, at universities, higher education institutions of a level recognised as equivalent or at vocational schools or through vocational training programmes for nursing.

5. Clinical training is that part of nurse training in which trainee nurses learn, as part of a team and in direct contact with a healthy or sick individual and/or community, to organise, dispense and evaluate the required comprehensive nursing care, on the basis of the knowledge, skills and competences which they have acquired. The trainee nurse shall learn not only how to work in a team, but also how to lead a team and organise overall nursing care, including health education for individuals and small groups, within health institutes or in the community.

This training shall take place in hospitals and other health institutions and in the community, under the responsibility of nursing teachers, in cooperation with and assisted by other qualified nurses. Other qualified personnel may also take part in the teaching process.

Trainee nurses shall participate in the activities of the department in question insofar as those activities are appropriate to their training, enabling them to learn to assume the responsibilities involved in nursing care.

6. Training for nurses responsible for general care shall provide an assurance that the professional in question has acquired the following knowledge and skills:

(a) comprehensive knowledge of the sciences on which general nursing is based, including sufficient understanding of the structure, physiological functions and behaviour of healthy and sick persons, and of the relationship between the state of health and the physical and social environment of the human being;

(b) knowledge of the nature and ethics of the profession and of the general principles of health and nursing;

(c) adequate clinical experience; such experience, which should be selected for its training value, should be gained under the supervision of qualified nursing staff and in places where the number of qualified staff and equipment are appropriate for the nursing care of the patient;
(d) the ability to participate in the practical training of health personnel and experience of working with such personnel;

(e) experience of working together with members of other professions in the health sector.

7. Formal qualifications as a nurse responsible for general care shall provide evidence that the professional in question is able to apply at least the following competences regardless of whether the training took place at universities, higher education institutions of a level recognised as equivalent or at vocational schools or through vocational training programmes for nursing:

(a) competence to independently diagnose the nursing care required using current theoretical and clinical knowledge and to plan, organise and implement nursing care when treating patients on the basis of the knowledge and skills acquired in accordance with points (a), (b) and (c) of paragraph 6 in order to improve professional practice;

(b) competence to work together effectively with other actors in the health sector, including participation in the practical training of health personnel on the basis of the knowledge and skills acquired in accordance with points (d) and (e) of paragraph 6;

(c) competence to empower individuals, families and groups towards healthy lifestyles and self-care on the basis of the knowledge and skills acquired in accordance with points (a) and (b) of paragraph 6;

(d) competence to independently initiate life-preserving immediate measures and to carry out measures in crises and disaster situations;

(e) competence to independently give advice to, instruct and support persons needing care and their attachment figures;

(f) competence to independently assure the quality of, and to evaluate, nursing care;

(g) competence to comprehensively communicate professionally and to cooperate with members of other professions in the health sector;

(h) competence to analyse the care quality to improve his own professional practice as a nurse responsible for general care.

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**Textual Amendments**


Article 32

Pursuit of the professional activities of nurses responsible for general care

For the purposes of this Directive, the professional activities of nurses responsible for general care are the activities pursued on a professional basis and referred to in Annex V, point 5.2.2.

Article 33

Acquired rights specific to nurses responsible for general care

1. Where the general rules of acquired rights apply to nurses responsible for general care, the activities referred to in Article 23 must have included full responsibility for the planning, organisation and administration of nursing care delivered to the patient.

**Footnotes:**

[1] Member States shall recognise evidence of formal qualifications in nursing that:

(a) were awarded in Poland, to nurses who completed training before 1 May 2004, which did not comply with the minimum training requirements laid down in Article 31; and

(b) are attested by the diploma ‘bachelor’ which was obtained on the basis of a special upgrading programme contained in:

(i) Article 11 of the Act of 20 April 2004 on the amendment of the Act on professions of nurse and midwife and on some other legal acts (Official Journal of the Republic of Poland of 2004 No 92, pos. 885 and of 2007, No 176, pos. 1237) and the Regulation of the Minister of Health of 11 May 2004 on the detailed conditions of delivering studies for nurses and midwives, who hold a certificate of secondary school (final examination — matura) and are graduates of medical lyceum and medical vocational schools teaching in a profession of a nurse and a midwife (Official Journal of the Republic of Poland of 2004 No 110, pos. 1170 and of 2010 No 65, pos. 420); or

(ii) Article 52.3 point 2 of the Act of 15 July 2011 on professions of nurse and midwife (Official Journal of the Republic of Poland of 2011 No 174, pos. 1039) and the Regulation of the Minister of Health of 14 June 2012 on the detailed conditions of delivering higher education courses for nurses and midwives who hold a certificate of secondary school (final examination — matura) and are graduates of a medical secondary school or a post-secondary school teaching in a profession of a nurse and a midwife (Official Journal of the Republic of Poland of 2012, pos. 770),

for the purpose of verifying that the nurse concerned has a level of knowledge and competence comparable to that of nurses holding the qualifications listed for Poland in point 5.2.2 of Annex V.}
As regards the Romanian qualification of nurse responsible for general care, only the following acquired rights provisions shall apply:

In the case of nationals of Member States who were trained as a nurse responsible for general care in Romania and whose training does not satisfy the minimum training requirements laid down in Article 31, Member States shall recognise the following evidence of formal qualifications as a nurse responsible for general care as being sufficient proof, provided that that evidence is accompanied by a certificate stating that those Member State nationals have effectively and lawfully been engaged in the activities of a nurse responsible for general care in Romania, including taking full responsibility for the planning, organisation and carrying out of the nursing care of patients, for a period of at least three consecutive years during the five years prior to the date of issue of the certificate:

(a) Certificat de competențe profesionale de asistent medical generalist with post-secondary education obtained from a școală postliceală, attesting to training started before 1 January 2007;

(b) Diplomă de absolvire de asistent medical generalist with short-time higher education studies, attesting to training started before 1 October 2003;

(c) Diplomă de licență de asistent medical generalist with long-time higher education studies, attesting to training started before 1 October 2003.]

Textual Amendments


Textual Amendments


Section 4

Dental practitioners

Article 34

Basic dental training

1. Admission to basic dental training presupposes possession of a diploma or certificate giving access, for the studies in question, to universities or higher institutes of a level recognised as equivalent, in a Member State.

2. Basic dental training shall comprise a total of at least five years of study, which may in addition be expressed with the equivalent ECTS credits, and shall consist of at least 5 000 hours of full-time theoretical and practical training that comprises at least the programme described in point 5.3.1 of Annex V and that is provided in a university, in a higher institute providing training recognised as being of an equivalent level or under the supervision of a university.

The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the amendment of the list set out in point 5.3.1 of Annex V with a view to adapting it to scientific and technical progress.

The amendments referred to in the second subparagraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

3. Basic dental training shall provide an assurance that the person in question has acquired the following knowledge and skills:

(a) adequate knowledge of the sciences on which dentistry is based and a good understanding of scientific methods, including the principles of measuring biological functions, the evaluation of scientifically established facts and the analysis of data;

(b) adequate knowledge of the constitution, physiology and behaviour of healthy and sick persons as well as the influence of the natural and social environment on the state of health of the human being, in so far as these factors affect dentistry;

(c) adequate knowledge of the structure and function of the teeth, mouth, jaws and associated tissues, both healthy and diseased, and their relationship to the general state of health and to the physical and social well-being of the patient;

(d) adequate knowledge of clinical disciplines and methods, providing the dentist with a coherent picture of anomalies, lesions and diseases of the teeth, mouth, jaws and associated tissues and of preventive, diagnostic and therapeutic dentistry;

(e) suitable clinical experience under appropriate supervision.

This training shall provide him with the skills necessary for carrying out all activities involving the prevention, diagnosis and treatment of anomalies and diseases of the teeth, mouth, jaws and associated tissues.
Article 35

Specialist dental training

1. Admission to specialist dental training shall be contingent upon completion and validation of basic dental training referred to in Article 34, or possession of the documents referred to in Articles 23 and 37.

2. Specialist dental training shall comprise theoretical and practical instruction in a university centre, in a treatment teaching and research centre or, where appropriate, in a health establishment approved for that purpose by the competent authorities or bodies.

3. The Member States shall make the issuance of evidence of specialist dental training contingent upon possession of evidence of basic dental training referred to in Annex V, point 5.3.2.

4. The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the adaptation of the minimum period of training referred to in paragraph 2 to scientific and technical progress.

5. In order to take due account of changes in national legislation, and with a view to updating this Directive, the Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the inclusion in point 5.3.3 of Annex V of new dental specialties common to at least two-fifths of the Member States.
Article 36

Pursuit of the professional activities of dental practitioners

1. For the purposes of this Directive, the professional activities of dental practitioners are the activities defined in paragraph 3 and pursued under the professional qualifications listed in Annex V, point 5.3.2.

2. The profession of dental practitioner shall be based on dental training referred to in Article 34 and shall constitute a specific profession which is distinct from other general or specialised medical professions. Pursuit of the activities of a dental practitioner requires the possession of evidence of formal qualifications referred to in Annex V, point 5.3.2. Holders of such evidence of formal qualifications shall be treated in the same way as those to whom Articles 23 or 37 apply.

3. The Member States shall ensure that dental practitioners are generally able to gain access to and pursue the activities of prevention, diagnosis and treatment of anomalies and diseases affecting the teeth, mouth, jaws and adjoining tissue, having due regard to the regulatory provisions and rules of professional ethics on the reference dates referred to in Annex V, point 5.3.2.

Article 37

Acquired rights specific to dental practitioners

1. Every Member State shall, for the purposes of the pursuit of the professional activities of dental practitioners under the qualifications listed in Annex V, point 5.3.2, recognise evidence of formal qualifications as a doctor [issued in Italy, Spain, Austria, the Czech Republic, Slovakia and Romania] to persons who began their medical training on or before the reference date stated in that Annex for the Member State concerned, accompanied by a certificate issued by the competent authorities of that Member State. The certificate must show that the two following conditions are met:

(a) that the persons in question have been effectively, lawfully and principally engaged in that Member State in the activities referred to in Article 36 for at least three consecutive years during the five years preceding the award of the certificate;

(b) that those persons are authorised to pursue the said activities under the same conditions as holders of evidence of formal qualifications listed for that Member State in Annex V, point 5.3.2.

Persons who have successfully completed at least three years of study, certified by the competent authorities in the Member State concerned as being equivalent to the training referred to in Article 34, shall be exempt from the three-year practical work experience referred to in the second subparagraph, point (a).

With regard to the Czech Republic and Slovakia, evidence of formal qualifications obtained in the former Czechoslovakia shall be accorded the same level of recognition as Czech and Slovak evidence of formal qualifications and under the same conditions as set out in the preceding subparagraphs.
2. Each Member State shall recognise evidence of formal qualifications as a doctor issued in Italy to persons who began their university medical training after 28 January 1980 and no later than 31 December 1984, accompanied by a certificate issued by the competent Italian authorities.

The certificate must show that the three following conditions are met:

(a) that the persons in question passed the relevant aptitude test held by the competent Italian authorities with a view to establishing that those persons possess a level of knowledge and skills comparable to that of persons possessing evidence of formal qualifications listed for Italy in Annex V, point 5.3.2;

(b) that they have been effectively, lawfully and principally engaged in the activities referred to in Article 36 in Italy for at least three consecutive years during the five years preceding the award of the certificate;

(c) that they are authorised to engage in or are effectively, lawfully and principally engaged in the activities referred to in Article 36, under the same conditions as the holders of evidence of formal qualifications listed for Italy in Annex V, point 5.3.2.

Persons who have successfully completed at least three years of study certified by the competent authorities as being equivalent to the training referred to in Article 34 shall be exempt from the aptitude test referred to in the second subparagraph, point (a).

Persons who began their university medical training after 31 December 1984 shall be treated in the same way as those referred to above, provided that the abovementioned three years of study began before 31 December 1994.

As regards evidence of formal qualifications of dental practitioners, Member States shall recognise such evidence pursuant to Article 21 in cases where the applicants began their training on or before 18 January 2016.

4. Each Member State shall recognise evidence of formal qualifications as a doctor issued in Spain to professionals who began their university medical training between 1 January 1986 and 31 December 1997, accompanied by a certificate issued by the Spanish competent authorities.

The certificate shall confirm that the following conditions have been met:

(a) the professional in question has successfully completed at least three years of study, certified by the Spanish competent authorities as being equivalent to the training referred to in Article 34;

(b) the professional in question was effectively, lawfully and principally engaged in the activities referred to in Article 36 in Spain for at least three consecutive years during the five years preceding the award of the certificate;

(c) the professional in question is authorised to engage in or is effectively, lawfully and principally engaged in the activities referred to in Article 36, under the same conditions as the holders of evidence of formal qualifications listed for Spain in point 5.3.2 of Annex V.

Textual Amendments

Section 5

Veterinary surgeons

Article 38

The training of veterinary surgeons

1. The training of veterinary surgeons shall comprise a total of at least five years of full-time theoretical and practical study, which may in addition be expressed with the equivalent ECTS credits, at a university or at a higher institute providing training recognised as being of an equivalent level, or under the supervision of a university, covering at least the study programme referred to in point 5.4.1 of Annex V.

The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the amendment of the list set out in point 5.4.1 of Annex V with a view to adapting it to scientific and technical progress.

The amendments referred to in the second subparagraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

2. Admission to veterinary training shall be contingent upon possession of a diploma or certificate entitling the holder to enter, for the studies in question, university establishments or institutes of higher education recognised by a Member State to be of an equivalent level for the purpose of the relevant study.

3. Training as a veterinary surgeon shall provide an assurance that the professional in question has acquired the following knowledge and skills:

   (a) adequate knowledge of the sciences on which the activities of a veterinary surgeon are based and of the Union law relating to those activities;

   (b) adequate knowledge of the structure, functions, behaviour and physiological needs of animals, as well as the skills and competences needed for their husbandry, feeding, welfare, reproduction and hygiene in general;

   (c) the clinical, epidemiological and analytical skills and competences required for the prevention, diagnosis and treatment of the diseases of animals, including anaesthesia, aseptic surgery and painless death, whether considered individually or in groups, including specific knowledge of the diseases which may be transmitted to humans;

   (d) adequate knowledge, skills and competences for preventive medicine, including competences relating to inquiries and certification;

   (e) adequate knowledge of the hygiene and technology involved in the production, manufacture and putting into circulation of animal feedstuffs or foodstuffs of animal

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origin intended for human consumption, including the skills and competences required to understand and explain good practice in this regard;

(f) the knowledge, skills and competences required for the responsible and sensible use of veterinary medicinal products, in order to treat the animals and to ensure the safety of the food chain and the protection of the environment.]

Textual Amendments


Article 39

Acquired rights specific to veterinary surgeons

Without prejudice to Article 23(4), with regard to nationals of Member States whose evidence of formal qualifications as a veterinary surgeon was issued by, or whose training commenced in, Estonia before 1 May 2004, Member States shall recognise such evidence of formal qualifications as a veterinary surgeon if it is accompanied by a certificate stating that such persons have effectively and lawfully been engaged in the activities in question in Estonia for at least five consecutive years during the seven years prior to the date of issue of the certificate.

Section 6

Midwives

Article 40

The training of midwives

1. The training of midwives shall comprise a total of at least:

(a) specific full-time training as a midwife comprising at least three years of theoretical and practical study (route I) comprising at least the programme described in Annex V, point 5.5.1, or

(b) specific full-time training as a midwife of 18 months' duration (route II), comprising at least the study programme described in Annex V, point 5.5.1, which was not the subject of equivalent training of nurses responsible for general care.

The Member States shall ensure that institutions providing midwife training are responsible for coordinating theory and practice throughout the programme of study.

F1 The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the amendment of the list set out in point 5.5.1 of Annex V with a view to adapting it to scientific and technical progress.
The amendments referred to in the third subparagraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

[FP2. Admission to training as a midwife shall be contingent upon one of the following conditions:

(a) completion of at least 12 years of general school education or possession of a certificate attesting success in an examination, of an equivalent level, for admission to a midwifery school for route I;

(b) possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V for route II.]

[FP3. Training as a midwife shall provide an assurance that the professional in question has acquired the following knowledge and skills:

(a) detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology;

(b) adequate knowledge of the ethics of the profession and the legislation relevant for the practice of the profession;

(c) adequate knowledge of general medical knowledge (biological functions, anatomy and physiology) and of pharmacology in the field of obstetrics and of the newly born, and also knowledge of the relationship between the state of health and the physical and social environment of the human being, and of his behaviour;

(d) adequate clinical experience gained in approved institutions allowing the midwife to be able, independently and under his own responsibility, to the extent necessary and excluding pathological situations, to manage the antenatal care, to conduct the delivery and its consequences in approved institutions, and to supervise labour and birth, postnatal care and neonatal resuscitation while awaiting a medical practitioner;

(e) adequate understanding of the training of health personnel and experience of working with such personnel.]
(a) full-time training of at least three years as a midwife, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 4 600 hours of theoretical and practical training, with at least one third of the minimum duration representing clinical training;

(b) full-time training as a midwife of at least two years, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 3 600 hours, contingent upon possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V;

(c) full-time training as a midwife of at least 18 months, which may in addition be expressed with the equivalent ECTS credits, consisting of at least 3 000 hours, contingent upon possession of evidence of formal qualifications as a nurse responsible for general care referred to in point 5.2.2 of Annex V, and followed by one year’s professional practice for which a certificate has been issued in accordance with paragraph 2.

2. The certificate referred to in paragraph 1 shall be issued by the competent authorities in the home Member State. It shall certify that the holder, after obtaining evidence of formal qualifications as a midwife, has satisfactorily pursued all the activities of a midwife for a corresponding period in a hospital or a health care establishment approved for that purpose.

Textual Amendments


Article 42

Pursuit of the professional activities of a midwife

1. The provisions of this section shall apply to the activities of midwives as defined by each Member State, without prejudice to paragraph 2, and pursued under the professional titles set out in Annex V, point 5.5.2.

2. The Member States shall ensure that midwives are able to gain access to and pursue at least the following activities:

(a) provision of sound family planning information and advice;

(b) diagnosis of pregnancies and monitoring normal pregnancies; carrying out the examinations necessary for the monitoring of the development of normal pregnancies;

(c) prescribing or advising on the examinations necessary for the earliest possible diagnosis of pregnancies at risk;

(d) provision of programmes of parenthood preparation and complete preparation for childbirth including advice on hygiene and nutrition;

(e) caring for and assisting the mother during labour and monitoring the condition of the foetus in utero by the appropriate clinical and technical means;
(f) conducting spontaneous deliveries including where required episiotomies and in urgent cases breech deliveries;

(g) recognising the warning signs of abnormality in the mother or infant which necessitate referral to a doctor and assisting the latter where appropriate; taking the necessary emergency measures in the doctor's absence, in particular the manual removal of the placenta, possibly followed by manual examination of the uterus;

(h) examining and caring for the new-born infant; taking all initiatives which are necessary in case of need and carrying out where necessary immediate resuscitation;

(i) caring for and monitoring the progress of the mother in the post-natal period and giving all necessary advice to the mother on infant care to enable her to ensure the optimum progress of the new-born infant;

(j) carrying out treatment prescribed by doctors;

(k) drawing up the necessary written reports.

Article 43

Acquired rights specific to midwives

1. Every Member State shall, in the case of Member State nationals whose evidence of formal qualifications as a midwife satisfies all the minimum training requirements laid down in Article 40 but, by virtue of Article 41, is not recognised unless it is accompanied by a certificate of professional practice referred to in Article 41(2), recognise as sufficient proof evidence of formal qualifications issued by those Member States before the reference date referred to in Annex V, point 5.5.2, accompanied by a certificate stating that those nationals have been effectively and lawfully engaged in the activities in question for at least two consecutive years during the five years preceding the award of the certificate.

   F3

2. The conditions laid down in paragraph 1 shall apply to the nationals of Member States whose evidence of formal qualifications as a midwife certifies completion of training received in the territory of the former German Democratic Republic and satisfying all the minimum training requirements laid down in Article 40 but where the evidence of formal qualifications, by virtue of Article 41, is not recognised unless it is accompanied by the certificate of professional experience referred to in Article 41(2), where it attests a course of training which began before 3 October 1990.

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4. Member States shall recognise evidence of formal qualifications in midwifery that:

   (a) were awarded in Poland, to midwives who completed training before 1 May 2004, which did not comply with the minimum training requirements laid down in Article 40; and
(b) are attested by the diploma ‘bachelor’ which was obtained on the basis of a special upgrading programme contained in:

(i) Article 11 of the Act of 20 April 2004 on the amendment of the Act on professions of nurse and midwife and on some other legal acts (Official Journal of the Republic of Poland of 2004 No 92, pos. 885 and of 2007 No 176, pos. 1237) and the Regulation of the Minister of Health of 11 May 2004 on the detailed conditions of delivering studies for nurses and midwives, who hold a certificate of secondary school (final examination — matura) and are graduates of medical lyceum and medical vocational schools teaching in a profession of a nurse and a midwife (Official Journal of the Republic of Poland of 2004 No 110, pos. 1170 and of 2010 No 65, pos. 420); or

(ii) Article 53.3 point 3 of the Act of 15 July 2011 on professions of nurse and midwife (Official Journal of the Republic of Poland of 2011 No 174, pos. 1039) and the Regulation of the Minister of Health of 14 June 2012 on the detailed conditions of delivering higher education courses for nurses and midwives who hold a certificate of secondary school (final examination — matura) and are graduates of a medical secondary school or a post-secondary school teaching in a profession of a nurse and a midwife (Official Journal of the Republic of Poland of 2012, pos. 770), for the purpose of verifying that the midwife concerned has a level of knowledge and competence comparable to that of midwives holding the qualifications listed for Poland in point 5.5.2 of Annex V.]

As regards the Romanian qualifications in midwifery, only the following acquired rights provisions will apply:

In the case of nationals of the Member States whose evidence of formal qualifications as a midwife (asistent medical obstetrică-ginecologie/obstetrics-gynecology nurse) were awarded by Romania before the date of accession and which do not satisfy the minimum training requirements laid down in Article 40, Member States shall recognise the said evidence of formal qualifications as being sufficient proof for the purposes of carrying out the activities of midwife, if they are accompanied by a certificate stating that those Member State nationals have effectively and lawfully been engaged in the activities of
midwife in Romania, for at least five consecutive years during the seven years prior to the issue of the certificate.]

Textual Amendments


Article 43b

Acquired rights in midwifery shall not apply to the following qualifications which were obtained in Croatia before 1 July 2013: viša medicinska sestra ginekološko-opstetričkog smjera (High Gynaecology-Obstetrical Nurse), medicinska sestra ginekološko-opstetričkog smjera (Gynaecology-Obstetrical Nurse), viša medicinska sestra primaljskog smjera (High Nurse with Midwifery Degree), medicinska sestra primaljskog smjera (Nurse with Midwifery Degree), ginekološko-opstetrička primalja (Gynaecology-Obstetrical Midwife) and primalja (Midwife).]

Textual Amendments

F7 Inserted by Act concerning the conditions of accession of the Republic of Croatia and the adjustments to the Treaty on European Union, the Treaty on the Functioning of the European Union and the Treaty establishing the European Atomic Energy Community.

Section 7

Pharmacist

Article 44

Training as a pharmacist

1. Admission to a course of training as a pharmacist shall be contingent upon possession of a diploma or certificate giving access, in a Member State, to the studies in question, at universities or higher institutes of a level recognised as equivalent.

2. Evidence of formal qualifications as a pharmacist shall attest to training of at least five years’ duration, which may in addition be expressed with the equivalent ECTS credits, comprising at least:

(a) four years of full-time theoretical and practical training at a university or at a higher institute of a level recognised as equivalent, or under the supervision of a university;

(b) during or at the end of the theoretical and practical training, six-month traineeship in a pharmacy which is open to the public or in a hospital under the supervision of that hospital’s pharmaceutical department.

The training cycle referred to in this paragraph shall include at least the programme described in point 5.6.1 of Annex V. The Commission shall be empowered to adopt delegated acts in accordance with Article 57c concerning the amendment of the list set out in point 5.6.1 of Annex V with a view to adapting it to scientific and technical progress, including the evolution of pharmacological practice.
The amendments referred to in the second subparagraph shall not entail an amendment of existing essential legislative principles in Member States regarding the structure of professions as regards training and conditions of access by natural persons. Such amendments shall respect the responsibility of the Member States for the organisation of education systems, as set out in Article 165(1) TFEU.

3. Training for pharmacists shall provide an assurance that the person concerned has acquired the following knowledge and skills:

(a) adequate knowledge of medicines and the substances used in the manufacture of medicines;

(b) adequate knowledge of pharmaceutical technology and the physical, chemical, biological and microbiological testing of medicinal products;

(c) adequate knowledge of the metabolism and the effects of medicinal products and of the action of toxic substances, and of the use of medicinal products;

(d) adequate knowledge to evaluate scientific data concerning medicines in order to be able to supply appropriate information on the basis of this knowledge;

(e) adequate knowledge of the legal and other requirements associated with the pursuit of pharmacy.

Textual Amendments

Article 45
Pursuit of the professional activities of a pharmacist

1. For the purposes of this Directive, the activities of a pharmacist are those, access to which and pursuit of which are contingent, in one or more Member States, upon professional qualifications and which are open to holders of evidence of formal qualifications of the types listed in Annex V, point 5.6.2.

F12 The Member States shall ensure that the holders of evidence of formal qualifications in pharmacy at university level or a level recognised as equivalent, which satisfies the requirements of Article 44, are able to gain access to and pursue at least the following activities, subject to the requirement, where appropriate, of supplementary professional experience:

(a) preparation of the pharmaceutical form of medicinal products;

(b) manufacture and testing of medicinal products;

(c) testing of medicinal products in a laboratory for the testing of medicinal products;

(d) storage, preservation and distribution of medicinal products at the wholesale stage;
(e) supply, preparation, testing, storage, distribution and dispensing of safe and efficacious medicinal products of the required quality in pharmacies open to the public;

(f) preparation, testing, storage and dispensing of safe and efficacious medicinal products of the required quality in hospitals;

(g) provision of information and advice on medicinal products as such, including on their appropriate use;

(h) reporting of adverse reactions of pharmaceutical products to the competent authorities;

(i) personalised support for patients who administer their medication;

(j) contribution to local or national public health campaigns.

3. If a Member State makes access to or pursuit of one of the activities of a pharmacist contingent upon supplementary professional experience, in addition to possession of evidence of formal qualifications referred to in Annex V, point 5.6.2, that Member State shall recognise as sufficient proof in this regard a certificate issued by the competent authorities in the home Member State stating that the person concerned has been engaged in those activities in the home Member State for a similar period.

4. The recognition referred to in paragraph 3 shall not apply with regard to the two-year period of professional experience required by the Grand Duchy of Luxembourg for the grant of a State public pharmacy concession.

5. If, on 16 September 1985, a Member State had a competitive examination in place designed to select from among the holders referred to in paragraph 2, those who are to be authorised to become owners of new pharmacies whose creation has been decided on as part of a national system of geographical division, that Member State may, by way of derogation from paragraph 1, proceed with that examination and require nationals of Member States who possess evidence of formal qualifications as a pharmacist referred to in Annex V, point 5.6.2 or who benefit from the provisions of Article 23 to take part in it.

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**Textual Amendments**


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**Section 8**

**Architect**

**F1 Article 46**

**Training of architects**

1. Training as an architect shall comprise:
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(a) a total of at least five years of full-time study at a university or a comparable teaching institution, leading to successful completion of a university-level examination; or

(b) not less than four years of full-time study at a university or a comparable teaching institution leading to successful completion of a university-level examination, accompanied by a certificate attesting to the completion of two years of professional traineeship in accordance with paragraph 4.

2. Architecture must be the principal component of the study referred to in paragraph 1. The study shall maintain a balance between theoretical and practical aspects of architectural training and shall guarantee at least the acquisition of the following knowledge, skills and competences:

(a) the ability to create architectural designs that satisfy both aesthetic and technical requirements;

(b) adequate knowledge of the history and theories of architecture and the related arts, technologies and human sciences;

(c) knowledge of the fine arts as an influence on the quality of architectural design;

(d) adequate knowledge of urban design, planning and the skills involved in the planning process;

(e) understanding of the relationship between people and buildings, and between buildings and their environment, and of the need to relate buildings and the spaces between them to human needs and scale;

(f) understanding of the profession of architect and the role of the architect in society, in particular in preparing briefs that take account of social factors;

(g) understanding of the methods of investigation and preparation of the brief for a design project;

(h) understanding of the structural design, and constructional and engineering problems associated with building design;

(i) adequate knowledge of physical problems and technologies and of the function of buildings so as to provide them with internal conditions of comfort and protection against the climate, in the framework of sustainable development;

(j) the necessary design skills to meet building users’ requirements within the constraints imposed by cost factors and building regulations;

(k) adequate knowledge of the industries, organisations, regulations and procedures involved in translating design concepts into buildings and integrating plans into overall planning.

3. The number of years of academic study referred to in paragraphs 1 and 2 may in addition be expressed with the equivalent ECTS credits.

4. The professional traineeship referred to in point (b) of paragraph 1 shall take place only after completion of the first three years of the study. At least one year of the professional traineeship shall build upon knowledge, skills and competences acquired during the study referred to in paragraph 2. To that end, the professional traineeship shall be carried out under the supervision of a person or body that has been authorised by the competent authority in the home Member State. Such supervised traineeship may take place in any country. The professional traineeship shall be evaluated by the competent authority in the home Member State.
By way of derogation from Article 46, the following shall also be recognised as complying with Article 21: training as part of social betterment schemes or part-time university studies which satisfies the requirements set out in Article 46(2), as attested by an examination in architecture passed by a professional who has been working for seven years or more in the field of architecture under the supervision of an architect or architectural bureau. The examination must be of university level and be equivalent to the final examination referred to in point (b) of Article 46(1).

**Article 48**

**Pursuit of the professional activities of architects**

1. For the purposes of this Directive, the professional activities of an architect are the activities regularly carried out under the professional title of ‘architect’.

2. Nationals of a Member State who are authorised to use that title pursuant to a law which gives the competent authority of a Member State the power to award that title to Member States nationals who are especially distinguished by the quality of their work in the field of architecture shall be deemed to satisfy the conditions required for the pursuit of the activities of an architect, under the professional title of ‘architect’. The architectural nature of the activities of the persons concerned shall be attested by a certificate awarded by their home Member State.

**Article 49**

**Acquired rights specific to architects**

1. Each Member State shall accept evidence of formal qualifications as an architect listed in Annex VI, awarded by the other Member States, and attesting a course of training which began no later than the reference academic year referred to in that Annex, even if they do not satisfy the minimum requirements laid down in Article 46, and shall, for the purposes of access to and pursuit of the professional activities of an architect, give such evidence the same effect on its territory as evidence of formal qualifications as an architect which it itself issues.
Under these circumstances, certificates issued by the competent authorities of the Federal Republic of Germany attesting that evidence of formal qualifications issued on or after 8 May 1945 by the competent authorities of the German Democratic Republic is equivalent to such evidence listed in that Annex, shall be recognised.

[F3 1a. Paragraph 1 shall also apply to evidence of formal qualifications as an architect listed in Annex V, where the training started before 18 January 2016.]

2. Without prejudice to paragraph 1, every Member State shall recognise the following evidence of formal qualifications and shall, for the purposes of access to and pursuit of the professional activities of an architect performed, give them the same effect on its territory as evidence of formal qualifications which it itself issues: certificates issued to nationals of Member States by the Member States which have enacted rules governing the access to and pursuit of the activities of an architect as of the following dates:

(a) 1 January 1995 for Austria, Finland and Sweden;
(b) 1 May 2004 for the Czech Republic, Cyprus, Latvia, Lithuania, Hungary, Malta, Poland, Slovenia and Slovakia;
(ba) [F8 1 July 2013 for Croatia;]
(c) 5 August 1987 for the other Member States.

[X1 The certificates referred to in the first subparagraph shall certify that the holder was authorized, no later than the respective date, to use the professional title of architect, and that he has been effectively engaged, in the context of those rules, in the activities in question for at least three consecutive years during the five years preceding the award of the certificate.

[F3 3. Each Member State shall give the following evidence the same effect on its territory as evidence of formal qualifications it itself issues for the purposes of access to and pursuit of the professional activities of an architect: evidence of completion of training existing as of 5 August 1985 and commenced no later than 17 January 2014, provided by ‘Fachhochschulen’ in the Federal Republic of Germany over a period of three years, satisfying the requirements set out in Article 46(2) and giving access to the activities referred to in Article 48 in that Member State under the professional title of ‘architect’, in so far as the training was followed by a four-year period of professional experience in the Federal Republic of Germany, as attested by a certificate issued by the competent authority in whose roll the name of the architect wishing to benefit from the provisions of this Directive appears.]

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**Editorial Information**


**Textual Amendments**


F8 Inserted by Council Directive 2013/25/EU of 13 May 2013 adapting certain directives in the field of right of establishment and freedom to provide services, by reason of the accession of the Republic of Croatia.