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Preface

Dear Reader,

countless specialists work in Austria’s healthcare institutions. Most of them acquired qualifications in a healthcare profession regulated by legislation on the profession itself and the required education and training.

With their commitment, the experts working in diverse healthcare professions make an indispensable contribution to the delivery of medical, psychosocial and nursing care to the Austrian population. By means of legislation on healthcare professions, we make sure that young people starting a career in health care will be able to rely on sound education and comprehensive competences throughout their lives. Moreover, this legislation creates the basis for a high level of mobility and opens up the opportunity for further development in related occupational areas while the focus always is on providing the best possible services to the patients.

Healthcare services are a dynamic and expanding sector. The demographic development of the population as well as higher health awareness results in a rise in demand for healthcare services and, what is more, these services are subject to continuous change and new requirements with regard to professional qualifications and quality assurance.

The European Directive 2013/55/EU amending Directive 2005/36/EC that became effective on 18 January 2016 provides for new recognition mechanisms and instruments designed to facilitate the mobility of healthcare professionals in the European Union and the European Economic Area as well as Switzerland. These include, for example, points of single contact and the European Professional Card.

According to WHO’s definition, the term „public health“ also includes „veterinary public health“ and, hence, all the activities, efforts and expertise of veterinary medicine contributing to ensuring, promoting and restoring human health. Therefore, the veterinary profession is also considered to be a healthcare profession.

This new edition of „Healthcare Professions in Austria“ reflects the changes introduced by the 2016 amendment of the Gesundheits- und Krankenpflegegesetz (Healthcare and Nursing Act) and the Gesundheitsberuferegister-Gesetz (Healthcare Profession Register Act) as well as the profession of medical physicists. Furthermore, other updates required have been made.

This brochure gives an up-to-date overview of regulated healthcare professions in Austria that may also be useful for you in making your career choice.

I should like to express my sincere thanks to all those who contributed to the preparation of this publication.

Pamela Rendi-Wagner, M.D., MSc
Federal Minister of Health and Women’s Affairs
Introduction

Healthcare professions are those professions that are regulated on the basis of the powers defined for “public health” in the Austrian Federal Constitutional Law (Article 10(1)(12) B-VG) and whose professional profile includes the performance of activities related to the population’s general state of health. These activities cover services within the framework of healthcare that are provided directly to people and/or directly or indirectly for people in order to promote, maintain, restore or improve health in an integral sense and in all phases of life.

Healthcare professions share the following characteristics:
• Legislation protects them by means of reservations related to the exercise of activities and professions, professional titles and, on principle, educational requirements.
• They make an important contribution to health care in intramural and extramural areas, in prevention, diagnosis, therapy and rehabilitation.
• Healthcare professionals have to exercise their professions with due diligence and without discrimination. They have to ensure the wellbeing and health of the people entrusted to them in compliance with applicable regulations and professional duties as well as in line with technical and scientific knowledge and experiences.
• Without exception, persons who acquired their qualifications abroad have to obtain recognition of their professional qualifications and/or certificates.
• Patient-oriented training/clinical practice in a clinical setting is implemented in line with legally defined framework conditions as well as under monitoring and supervision.

Healthcare professionals have to regularly take further training on most recent developments and findings in the sciences relevant to their professions. This obligation of continuing professional development (CPD) is defined as a professional duty for all healthcare professions by law. Regular, continuous further training is to be considered an indication of quality. The willingness to ensure further development, efficiency and optimised use of resources to the benefit of the patients can be seen, for example, in intensified research and application of evidence-based measures. The required continuous updating of skills and competences to make sure that they stay abreast of new medical and scientific knowledge and are adjusted to changes in society took on a new dimension owing to the Convention on the Recognition of Qualifications concerning Higher Education in the European Region (Lisbon 1997).

Demanded as a European objective of education for the first time in the year 2000 and defined as the need for “life-long learning” for the development of a dynamic and competitive knowledge society, this requirement plays a particularly important role in the healthcare professions.

Healthcare professions which are not regulated in dedicated legislation include:
• medical device advisers (Medizinproduktegesetz – Medical Device Act, Federal Law Gazette No. 657/1996),
• safety officers for medical devices (Medizinproduktegesetz – Medical Device Act, Federal Law Gazette No. 657/1996)
• pharmaceutical representatives (Arzneimittelgesetz – Medicinal Products Act, Federal Law Gazette No. 185/1983)

Those professions are not described in detail in the present brochure.

Trades (related to healthcare) according to the Gewerbeordnung 1994 (Trade, Commerce and Industry Regulation Act, Federal Law Gazette No. 194/1994) such as opticians, surgical truss makers, orthopaedic technicians, corset makers, pedicurists, acoustic-aid technicians, contact lens opticians, beauticians (beauty care) – including piercing and tattooing –, life and social counsellors, masseurs – including shiatsu, ayurveda wellness treatments, Tui Na An Mo wellness treatments, Jamche Kunye practice and “other fully self-contained systems” –, orthopaedic shoemakers, dental technicians and human energy practitioners, are not considered to be healthcare professions and therefore, are not included in this brochure.
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1 DOCTOR OF MEDICINE

Job description/field of activities:

The profession of doctor of medicine covers all activities based on the findings of medical science carried out directly on patients or indirectly for patients. In particular, they include:

- examinations for the existence or absence of physical and mental diseases or disorders, disabilities or malformations and anomalies of a pathological nature,
- assessment of such conditions by means of medical diagnostic aids,
- treatment of such conditions,
- performance of surgical procedures, including the taking or infusion of blood,
- prevention of diseases,
- obstetrics as well as measures of medically assisted reproduction,
- prescription of medicinal products, medical aids and medical diagnostic tools,
- performance of post-mortem examinations.

Each doctor of medicine licensed to practice the profession autonomously is authorised to issue medical certificates and deliver medical expert opinions.

The medical profession may only be exercised autonomously by general practitioners (and doctors licensed to practice) as well as specialised doctors.

Under Article 184 of Strafgesetzbuch (Penal Code), any person has to be punished who, by way of business and without having received the education required for exercising the medical profession, engages in activities reserved for doctors of medicine with regard to a larger number of people.

Professional title:

- Ärztin für Allgemeinmedizin / Arzt für Allgemeinmedizin (general practitioner)
- Fachärztin / Facharzt (specialised doctor)

Turnusärztinnen/Turnusärzte (interns) are those doctors of medicine who undergo training to become general practitioners or specialised doctors.

Professional qualifications:

The professions of general practitioner or specialised doctor may be exercised autonomously by persons who meet:

- the general requirements,
- the special requirements defined for general practitioners and specialised doctors, respectively,
- the requirement of registration on the medical practitioners’ register.

General requirements:

- legal capacity,
• trustworthiness necessary for fulfilling the duties of the profession,
• medical fitness necessary for fulfilling the duties of the profession,
• sufficient command of the German language, and
• legal residence throughout Austria, including the right to work as an employed or self-employed person.

Special requirements:
• Degree of *Doktor der gesamten Heilkunde* (doctor of medicine; doctor medicinae universae) awarded by a university in the Republic of Austria or an academic degree received abroad and recognised as equivalent to *Doktor der gesamten Heilkunde* in Austria;
• for specialised doctors in oral and maxillo-facial surgery, a certificate confirming qualifications for practicing the dental profession pursuant to the provisions of the *Zahnärztegesetz* (Dental Practitioners Act), Federal Law Gazette I No. 126/2005;
• a diploma issued by the Austrian Medical Chamber on special training for general practitioners or a specialised doctors’ diploma, with persons wishing to work as specialised doctors in dental, oral and maxillo-facial surgery having to meet the requirement of point 1 (b) of *Ärztegesetz* (Medical Practitioners Act) by the time when they take their specialised doctors’ examination;
• instead of those documents (identified in the above three bullet points), equivalent, recognised EEA professional qualifications or recognised third-country diploma.

Training requirements for general practitioners:
• A minimum of nine months of practical training (basic training) to acquire basic clinical competences in surgical and conservative specialties;
• after successful completion of basic training, a minimum of thirty-three months of practical training under an employment contract with recognised training institutions (wards and other organisational units of hospitals, including university clinics, other organisational units of medical universities or universities with a department of medicine as well as specialised hospitals);
• successfully completed general practitioner training and examination.

Training requirements for specialised doctor:
• A minimum of nine months of practical training (basic training) to acquire basic clinical competences in surgical and conservative specialties;
• after successful completion of basic training, a minimum of sixty-three months of training in recognised training institutions (wards and other organisational units of hospitals, including university clinics, other organisational units of medical universities or universities with a department of medicine, specialised hospitals, examination establishments of the health administration, occupational medicine centres under Art. 80 of *Arbeitnehmerinnenschutzgesetz* (Employees’ Protection Act), Federal Law Gazette No. 450/1994, institutions for mentally ill criminals or criminals needing withdrawal programmes as well as hospital departments in prisons), including:
  o a minimum of twenty-seven months of practical training in the relevant specialty (basic speciality training) under an employment contract, with the exception of training in surgical disciplines with a duration of at least fifteen months; and
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- a minimum of twenty-seven months of advanced practical training (advanced specialty training) under an employment contract, with the exception of training in the specialty of oral and maxillo-facial surgery;
  - successfully completed training and passed specialised doctor’s examination.

The medical profession as an intern (Turnusärztin/Turnusarzt) may be exercised under supervision by persons who meet the following requirements:
  - the general requirements,
  - the specific requirement of a degree of Doktor der gesamten Heilkunde (doctor of medicine) awarded by a university in the Republic of Austria or an academic degree received abroad and recognised as equivalent to Doktor der gesamten Heilkunde in Austria or evidence of formal qualifications in basic medical training according to Annex V, point 5.1.1. of Directive 2005/36/EC or equivalent medical qualifications not recognised automatically,
  - the requirement of registration on the medical practitioners’ register.

Career:

Doctors of medicine who have met the requirements for exercising the medical profession as general practitioners (or doctors licensed to practice) are entitled to exercise as general practitioners (or as doctors licensed to practice) regardless of whether they work on a self-employed basis or under an employment contract.

Doctors who have met the requirements for exercising the medical profession as specialised doctors in a medical specialty are entitled to exercise as specialised doctors in this field of medicine as a medical specialty regardless of whether they work on a self-employed basis or under an employment contract.

Specialised doctors have to limit their professional activities to their medical specialty. This does not apply to:

1. activities as occupational health physicians under the terms of ArbeitnehmerInnenschutzgesetz (Employees' Protection Act),
2. specialised doctors who perform transdisciplinary activities under the conditions of Article 40 of Ärztegesetz 1998 (Medical Practitioners Act) in organised emergency response services (emergency ambulance or emergency helicopter),
3. specialised doctors in anaesthesiology and intensive care medicine, surgery, internal medicine and trauma surgery if they provide immediate emergency care on the basis of organisational regulations under legislation on health care establishments and if they completed further training pursuant to Article 40 of Ärztegesetz 1998 (Medical Practitioners Act).

Special forms of practicing the profession of doctor of medicine:

- **Occupational health physician**: Doctors of medicine licensed to practice and specialised doctors who perform activities of occupational health experts under the terms of the ArbeitnehmerInnenschutzgesetz (Employees' Protection Act).
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- **Emergency doctor**: Doctors of medicine licensed to practice, general practitioners and specialised doctors who perform medical activities in organised emergency response services (emergency ambulance or emergency helicopter).
- **Medical officer**: Doctors of medicine who are employed to perform statutory tasks at public health authorities and who engage in that activity as their main profession; labour inspection doctors are also considered to be medical officers.
- **Police doctors**: Medical officers working for a Land police directorate or the Federal Ministry for the Interior on the basis of a contractual agreement or public-law employment contract.
- **Military doctors**: Officers of the military medical service and doctors of medicine working on the basis of a contract or conscription to military or training service in the Austrian Armed Forces.

**Education**:

- Diploma (bachelor and master) programme on human medicine at a medical university, medical department of a university or accredited private university (degree of Doktor der gesamten Heilkunde (doctor of medicine)) and
- general practitioners' training or
- specialised doctors’ training.

Overall duration of education:
Diploma (bachelor and master) programme on human medicine: 12 semesters and min. 5,500 hours
General practitioners' training: min. 3.5 years
Specialised doctors' training: min. 6 years
Specialisation: max. 36 months

After completion of general practitioners' training or specialised doctors' training, specialisation is possible through further training that may also extend across medical specialties.

For further information on education and training, please also see "Professional qualifications".

The recognition of EU/EEA qualifications is performed by the Austrian Medical Chamber.

**Statutory representative body**:

- Austrian Medical Chamber
- Medical Chambers in the Laender

The purpose of the Austrian Medical Chamber is:
- to take care of all matters related to the common professional, social and economic interests of its members,
- to take the legal acts for its members as provided by law, and
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- to promote the reputation of the medical profession and compliance with the duties of the medical profession.

The activities separate into the autonomous field of competences and the delegated field of competences.

Examples of the autonomous field of competences of the Austrian Medical Chamber are:
- conclusion of collective agreements,
- maintenance of the medical practitioners’ register
- performance of procedures for registration on and deregistration from the medical practitioners’ register, including the issue of doctor’s ID cards
- quality assurance in further and continuing medical training
- quality assurance of medical practice by implementing quality assurance measures (self-evaluation)
- disciplinary proceedings related to a breach of professional duties of doctors of medicine,
- adoption of rules of arbitration
- adoption of regulations, for example, on the medical practitioners’ register.

Examples of the delegated field of competences of the Austrian Medical Chamber are:
- proceedings related to the recognition of medical education institutions and the withdrawal of such recognition
- quality assurance of medical practice, e.g. quality control and maintenance of a quality register
- adoption of regulations, such as the regulation on the knowledge, experiences and skills required in the subjects included in general practitioners’ training, in the main subjects of specialties and subspecialties as well as on the detailed contents of minor subjects of specialties.

Disciplinary regulations:

Doctors of medicine commit a disciplinary offence, if, in Austria or abroad, they
- adversely affect the reputation of the doctors of medicine practicing in Austria by their behaviour towards the general public, patients or colleagues, or
- break their professional duties that they undertook to comply with when they were awarded the degree of Doctor medicinae universae or that they are obliged to comply with by law.

Legal basis:

Verordnung über die Ausbildung zur Ärztin für Allgemeinmedizin/zum Arzt für Allgemeinmedizin und zur Fachärztin/zum Facharzt (Ärztinnen-/Ärzte-Ausbildungsordnung 2015 – Ordinance on Education and Training for Medical Practitioners), Federal Law Gazette II No. 147/2015
Verordnung über Medizinische Universitäten in Österreich (Medizinische Universitäten-Verordnung 2016 – Ordinance on Medical Universities in Austria), Federal Law Gazette II No. 408/2015
Verordnung über die arbeitsmedizinische Ausbildung von Ärztinnen und Ärzten (Ordinance on Training in Occupational Medicine for Medical Practitioners), Federal Law Gazette No. 489/1995
Regulations of the Austrian Medical Chamber
- Ärztelisteverordnung (Doctor of medicines Register Regulation)
- Ärztlicher Verhaltenskodex (Code of Medical Conduct)
- Werberichtlinie "Arzt und Öffentlichkeit" (Advertising Directive „Doctors of Medicine and the Public“)
- Bearbeitungsgebührenverordnung (Processing Fee Regulation)
- Diplomordnung (Diploma Regulation)
- Hygieneverordnung (Hygiene Regulation)
- Verordnung über die Kenntnisse, Erfahrungen und Fertigkeiten in der Ausbildung zur Ärztin für Allgemeinmedizin/zum Arzt für Allgemeinmedizin und zur Fachärztin/zum Facharzt, sowie über die Ausgestaltung und Form der Rasterzeugnisse, Prüfungszertifikate und Ausbildungsbücher (KEF und RZ-V 2015 – Regulation on knowledge, experiences and skills in general practitioners' and specialised doctors’ training and on the design and form of logbook certificates, examination certificates and training logbooks)
- Prüfungsordnung (Examination Regulation)
- Qualitätssicherungsverordnung (Quality Assurance Regulation)
- Sprachprüfungs-Verordnung (Language Examination Regulation)
- Verordnung über ärztliche Fortbildung (Regulation on Further Medical Training)
- Rahmenverordnung über Spezialisierungen und Spezialisierungsverordnung 2017 (Framework Regulation on Specialties and Specialisation Regulation)
- Visitationsverordnung 2017 (Inspection Regulation)
- etc.
1.1. General practitioner

The field of activities of general practitioners covers the provision of medical care related to all aspects of human life, in particular human health promotion, diagnosis and treatment of diseases for all persons regardless of their age, sex or type of health problem.

In particular, the tasks of general practitioners include:

- health promotion, prevention and follow-up,
- patient-oriented early diagnosis of diseases,
- diagnosis and treatment of any type of disease,
- treatment of life-threatening conditions,
- general medical care of disabled, chronically ill and elderly persons,
- diagnosis and treatment of health impairments caused by environmental factors,
- initiation of rehabilitation measures,
- integration of medical, social and mental care services for patients,
- co-operation with specialised doctors, other healthcare professionals and health care institutions, in particular hospitals.
1.2. Specialised doctor – medical specialties

Fields of activities / specialties:

- **Anaesthesiology and intensive care medicine:**
  General, regional and local anaesthesia, including preparatory and follow-up care, maintenance of vital functions during surgical procedures, emergency and pain medicine as well as intensive care medicine as a co-ordinated management of treatment for patients with life-threatening conditions and diseases, including stabilisation after major surgical procedures in consultation with the doctors responsible for the specialist treatment of the underlying medical condition. Uninterrupted 24-hour management of intensive medical care includes, in particular, the monitoring of vital functions and, if necessary, stabilisation during diagnostic and surgical procedures, including organ support.

- **Anatomy:**
  Science of the normal structure and condition of the human body with its tissues and organs, including systematic topographic-functional aspects.

- **Clinical immunology specialties:**
  - **Clinical immunology:**
    Diagnosis, performance of serological cellular, chemical and molecular biological examination procedures for analysing the immune system, provision of immunological advice on immune-mediated diseases as well as production and control of immunological preparations.
  - **Clinical immunology and specific prophylaxis and tropical medicine:**
    Entire clinical immunology, diagnosis, assessment and treatment of domestic infectious diseases and of infectious diseases occurring world-wide, especially in tropical and subtropical countries, migration and travel medicine, epidemiology of infectious diseases as well as knowledge and implementation of prophylactic measures against infectious diseases, in particular by vaccination and immunisation as well as chemoprophylaxis and immunotherapies and related efficacy evaluations.

- **Clinical microbiology specialties:**
  - **Clinical microbiology and hygiene:**
    Diagnosis and assessment of all animate and inanimate noxious agents detrimental to the human body and diseases caused by them based on specialist diagnostic laboratory methods, interpretation of the results obtained and measures to control them and prevention of diseases. The main fields of activities include medical microbiology, environmental hygiene, water and food hygiene, hospital hygiene as well as epidemiology.
**Clinical microbiology and virology:**
Microbiology, diagnosis of all human virus infections, interpretation of findings, provision of virological advice to doctors treating patients as well as development of measures to control and prevent viral diseases.

**Clinical pathology and neuropathology:**
Entire clinical pathology and molecular pathology, knowledge of neurobiological and neurophysiological foundations of the structure and function of the nervous system, sense organs and skeletal musculature as well as morphological and molecular diagnosis of diseases of the nervous system, sense organs and skeletal musculature based on analyses of tissue material, cell material and body fluids (e.g. resections, biopsies, punctures, smears), including assessment.

**Clinical pathology specialties:**

- **Clinical pathology and molecular pathology:**
  Prevention and morphological and molecular diagnosis of diseases based on analyses of tissue material, cell material and body fluids (e.g. resections, biopsies, punctures, smears), including the assessment of therapeutic measures, as well as observation of the development of diseases and performance of post-mortem examinations.

- **Dermatology and venereology:**
  Prevention, diagnosis, treatment and rehabilitation of all diseases of the skin and internal organs insofar as they are connected with the skin in terms of physiology and pathophysiology, mucosas contiguous with skin and skin appendages, dermatological manifestations of systemic diseases, specialist oncology and allergology as well as prevention, diagnosis, treatment and rehabilitation of chronic venous insufficiency, peripheral angiopathy, venereology as well as prevention, diagnosis and treatment of sexually transmitted diseases.

- **Forensic medicine:**
  Applied medicine, toxicology, molecular biology and evidence analysis for the justice, public security and health care system, in particular investigation, assessment, reconstruction and clarification of natural and violent deaths, injuries, impairments of health and after-effects of injuries sustained by surviving victims, poisoning, effects of alcohol and addictive substances, bodies and body parts for the purpose of establishing identity, sexual crimes, child abuse, disputed parentage, medical errors, traces and other evidence as well as medical discussion of legal issues and, in particular, as expert witnesses before the courts and administrative authorities.

- **Gynaecology and obstetrics:**
  Identification, prevention, conservative and surgical treatment as well as follow-up of sex-specific disorders of women, including plastic, reconstructive interventions of gynaecological oncology, endocrinology, reproductive medicine as well as provision of care and monitoring during normal and abnormal pregnancies, births, post-partum processes as well as prenatal and perinatal medicine.
• **Histology, embryology and cell biology:**
  Entire micromorphology and development of the human body, congenital abnormalities, foundations and methods of experimental cell and molecular biology, reproduction medicine, stem cell biology and regenerative medicine.

• **Internal medicine specialties:**
  
  o **Internal medicine:**
    Prevention, diagnosis and treatment as well as rehabilitation and follow-up of diseases of the respiratory organs, heart, blood vessels and circulatory system, digestive organs, kidneys and efferent urinary tract, blood and blood-forming organs, metabolism and internal secretion, immune system, supporting and connective tissues, infectious diseases and poisonings, solid tumours and haematological neoplasms as well as other diseases of the blood and blood coagulation, specialist pharmacology, specialist geriatrics and palliative medicine as well as specialist intensive medical care. The specialty also covers health promotion and patient care taking account of somatic and social interactions and co-ordination of health care in an interdisciplinary approach and within the framework of internal medicine specialties.

  o **Internal medicine and angiology:**
    Entire internal medicine, identification, prevention, definition of indications, diagnosis, non-surgical treatment and rehabilitation of diseases of the blood vessels and lymph vessels.

  o **Internal medicine and cardiology:**
    Entire internal medicine, prevention, clinical, non-invasive and invasive diagnostics, conservative and interventional treatment as well as rehabilitation of diseases of the heart and large vessels taking special account of risk factors, causal factors and consequences.

  o **Internal medicine and endocrinology and diabetology:**
    Entire internal medicine, prevention, diagnosis, treatment and follow-up of endocrine diseases, including tumours and endocrine metabolism.

  o **Internal medicine and gastroenterology and hepatology:**
    Entire internal medicine, prevention, diagnosis, treatment and follow-up of all diseases of the gastrointestinal tract, liver and pancreas, including diagnostic and therapeutic gastrointestinal procedures.

  o **Internal medicine and haematology and internal oncology:**
    Entire internal medicine, prevention, diagnosis, non-surgical treatment and rehabilitation, including bone marrow or stem cell transplantation as well as other cell therapies, immunological and gene therapy procedures for malignant and non-malignant diseases of the blood, blood-forming organs, blood coagulation, all tissues as well as co-ordination of multimodal therapy procedures, follow-up and palliative care of patients with malignant diseases.
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- **Internal medicine and infectiology:**
  Epidemiology, diagnosis, treatment as well as support of doctors active in preventive and therapeutic care and in public health care in the prevention, identification and conservative treatment of pathogenic diseases.

- **Internal medicine and intensive care medicine:**
  Entire internal medicine, co-ordinated management of treatment for patients whose vital or organ functions are at risk or disturbed to a life-threatening extent and have to be supported or maintained by procedures of intensive care medicine. Continuous intensive care management includes, in particular, the monitoring of vital functions and physiological parameters as well as performance of diagnostic and therapeutic procedures, including organ support or organ replacement.

- **Internal medicine and nephrology:**
  Entire internal medicine, prevention, diagnosis, treatment and follow-up of renal diseases as well as comorbidities of acute and chronic renal failure, furthermore the prevention, diagnosis and therapy of essential and secondary hypertension and the definition of indications, planning and performance of renal replacement therapy and extracorporeal therapy procedures.

- **Internal medicine and pneumology:**
  Entire internal medicine, prevention, diagnosis, differential diagnosis, treatment, including palliation and rehabilitation, of diseases affecting the lungs and respiration, furthermore definition of indications for thoracic surgery as well as specialist co-operation with all other specialties.

- **Internal medicine and rheumatology:**
  Entire internal medicine, prevention, aetiology, pathogenesis, diagnosis, non-surgical therapy and rehabilitation of rheumatic diseases. Rheumatic diseases include inflammatory and degenerative diseases of the joints and vertebral column, soft tissue diseases, bone and metabolic diseases, infectious diseases, acute and chronic pain, functional disorders with symptoms in the musculoskeletal system, systemic autoimmune and autoinflammatory diseases of the connective tissue and blood vessels as well as diseases of the inner organs and nervous system if they are related to the above diseases.

- **Medical and chemical laboratory diagnostics:**
  Application of morphological, biological, chemical, molecular, physical and special immunological test methods to body fluids, assessment of their morphological constituents as well as secreted and excreted materials for determining physiological characteristics, detecting pathological conditions and monitoring developments, including the required functional tests and specialist assessments, furthermore, support of doctors active in preventive and therapeutic care.

- **Medical genetics:**
  Diagnosis of genetic disorders, determination of the morbidity risk, genetic counselling of patients and their families as well as specialised basic and applied research, in
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particular by applying cytogenetic, biochemical and molecular genetic methods as well as application of knowledge on the course and rules of human biological functions, aetiology and pathogenesis of hereditary and polygenic hereditary diseases, general human genetics, cytogenetics, molecular genetics, dysmorphology, clinical genetics, including syndromology, population genetics and genetic epidemiology.

- **Neurology:**
  Prevention, diagnosis, causal, symptomatic and palliative treatment and rehabilitation of primary and secondary diseases and dysfunctions of the central, peripheral and vegetative nervous system and the musculature.

- **Nuclear medicine:**
  Use of non-contained radioactive substances for the diagnosis and treatment of diseases of all organ systems as well as prevention and diagnosis of thyroid diseases and osteoporosis, clinical examinations, application of supporting equipment-based methods, performance of interventions required, in-vitro diagnostics using radionuclides and required complementary methods, therapy using non-contained radionuclides, radiobiology, dosimetry, radiation protection, in particular with regard to non-contained radioactive substances, operation of the devices required, including depth correction, image overlay as well as diagnosis and treatment of accidental radionuclide incorporation as well as emergency care after radiological accidents.

- **Occupational medicine and applied physiology:**
  Study of the interaction between work, occupation and health as well as knowledge of the influence of physical activity and lack of exercise on the performance capabilities and prerequisites of healthy and ill persons with the objective of maintaining and promoting mental and physical health and performance as well as application of this knowledge in disabled sports, health sports, competitive sports and high-performance sports taking special account of the problem of doping. Moreover, the tasks of occupational medicine especially cover the identification of health- and performance-relevant factors in a company's operations, the assessment of the impact of those factors on people and operational processes, development and implementation of preventive measures, the examination, diagnosis and assessment of health conditions and occupational diseases with a view to their possible work-related causes as well as co-operation in medical measures related to illnesses caused by accidents at work or working conditions, including the provision of work-related rehabilitation and re-integration.

- **Ophthalmology and optometry:**
  Prevention, identification, treatment, follow-up and rehabilitation of anatomical and functional changes of the eye and related structures, including optometry and plastic, reconstructive surgery in the periocular region.

- **Oral and maxillo-facial surgery:**
  Prevention, diagnosis, conservative and surgical treatment, reconstruction and rehabilitation of congenital or acquired deformations, dysfunctions, diseases and injuries of soft and hard tissue in the oral and maxillo-facial regions.
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- **Orthopaedics and traumatology:**
  Prevention, diagnosis, conservative and surgical treatment, follow-up and rehabilitation of all diseases and injuries of bones, joints and connected soft tissues.

- **Otolaryngology:**
  Prevention, diagnosis, conservative and surgical treatment, follow-up and rehabilitation of diseases, including dysfunctions, injuries, malformations, deformations and tumours of the nose, paranasal sinuses, nasolacrimal passages, bony orbits, ear and organ of equilibrium, cranial nerves, lips, cheeks, tongue, base of the tongue and mouth, tonsils, pharynx, larynx, upper aerodigestive tract, salivary glands of the head as well as the otobasis and rhinobasis and the soft tissues of the facial skull and neck.

- **Paediatric psychiatry and psychotherapeutic medicine:**
  Prevention, diagnosis, treatment, including psychotherapeutic medicine, and rehabilitation of mental diseases, disorders and behavioural syndromes occurring in childhood and adolescence, including psychiatric treatment of developmental mental diseases as well as specialist assessment.

- **Paediatrics:**
  Prevention, diagnosis, treatment and rehabilitation of all diseases occurring in childhood and adolescence, growth and development disorders of a maturing organism and vaccinations.

- **Pharmacology and toxicology:**
  Research on the effects of pharmaceuticals and harmful substances in animal experiments, on humans and on the environment, investigation of resorption, distribution, chemical changes and elimination of agents, co-operation in the development and application of new pharmaceuticals as well as in the assessment of their therapeutic benefits, collaboration in the identification and assessment of the risk resulting from harmful substances, provision of advice to doctors on medication therapy and poisonings as well as specialist assessment.

- **Physical medicine and general rehabilitation:**
  Prevention, diagnosis, treatment, rehabilitation and palliation of dysfunctions and health disorders of all organ systems and relevant diseases, in particular, using physical and rehabilitative means for analgesia and restoration or improvement of body structures, body functions, activity and participation. In particular, the field of activities also includes the diagnosis and definition of indications for therapeutic measures as well as procedures of rehabilitative intervention with conservative physical and manual therapies as well as the arrangement and evaluation of rehabilitative measures.

- **Physiology and pathophysiology:**
  Knowledge of vital functions, relevant practical and methodological experiences and skills as well as their application in basic and applied research, in particular in the fields of clinical and occupational physiology. The field of pathophysiology comprises the
identification of the functional causes of diseases based on functional pathological findings obtained mainly in experiments and, thus, foundations for understanding the diagnosis and development of diseases as well as the mechanisms of action induced by therapeutic measures.

- **Psychiatry and psychotherapeutic medicine:**
  Prevention, diagnosis and treatment, including psychotherapeutic medicine and forensic psychiatry, rehabilitation as well as specialist assessment of mental diseases, disorders and behavioural syndromes.

- **Public health:**
  Special knowledge of the structures and organisation of public health care systems, health information systems, population medicine, insurance medicine and epidemiology, expertise in the health of humans – as individuals and as a population – for communicable and non-communicable diseases, for the prevention and early diagnosis of diseases as well as rehabilitation. It includes knowledge of disciplines related to medicine, such as sociology, health management, health economy as well as of the fields of activities of other healthcare professions and takes account of social determinants of health. It covers the analysis and consideration of health concerns of people as well as the provision of advice to public organisations and institutions.

- **Radiology:**
  Diagnosis of diseases by means of ionising radiation with the exception of non-contained radionuclides, ultrasound and magnetic resonance, diagnostic and therapeutic procedures using optical imaging processes as well as specialist radiation protection.

- **Radiotherapy and radiation oncology:**
  Definition of indications, treatment and follow-up of all diseases for which radiotherapy is indicated, including all related technical procedures and therapeutic measures, all types of bio-modulation contributing to modifying sensitivity to radiation, radiobiology as well as specialist radiation protection.

- **Surgery specialisations:**
  - **Cardiac surgery:**
    Prevention, identification, conservative and surgical treatment and follow-up of diseases, injuries, after-effects of injuries, malformations of the heart and surrounding vessels, mediastinum and lungs in the context of cardiac surgery interventions, definition of indications for transplantations, including risk and prognostic assessment, foundations of minimally invasive therapy and application of circulatory assistance systems.
  - **General surgery and abdominal surgery:**
    Prevention, identification, conservative and surgical treatment and follow-up of congenital or acquired deformations and malformations of internal organs and of diseases, injuries and after-effects of injuries of internal organs that are treatable by surgery as well as oncological reconstructive surgery and transplantation surgery.
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- **General surgery and vascular surgery:**
  Entire general and abdominal surgery as well as prevention, identification, conservative and surgical treatment and follow-up of diseases, injuries and malformations of the vascular system, including rehabilitation.

- **Neurosurgery:**
  Prevention, identification, conservative and surgical treatment and follow-up of diseases of the central, peripheral and vegetative nervous system, including its supplying vessels and supporting elements (vertebral column), as well as surgical treatment of pain. This comprises the adequate treatment of diseases of the brain and its envelopes as well as of the cranium and supplying vessels, diseases of the pituary, cranial nerves, spinal nerves and peripheral nerves, diseases of the vegetative nervous system, diseases of the spinal cord and its envelopes as well as diseases of the vertebral column.

- **Paediatric surgery:**
  Prevention, identification, conservative and surgical treatment and follow-up of diseases, injuries, after-effects of injuries, malformations and burns in newborns, infants, children and adolescents as well as of prenatal development disorders and infections.

- **Plastic, reconstructive and aesthetic surgery:**
  Prevention, identification, conservative and surgical treatment, follow-up, reconstruction and improvement of visible dysfunctions and shape of the body that are congenital or caused by a disease, degeneration, age, tumour or accident as well as treatment of burns in the acute phase and in the secondary reconstructive phase as well as differential therapy in case of post-surgical complications, large wounds, impaired wound healing and malformations as well as transplantation of isogenic, allogenic and synthetic replacement structures.

- **Thoracic surgery:**
  Prevention, identification, conservative and surgical treatment and follow-up of diseases, injuries, after-effects of injuries, neoplasms, infections, malformations of the lungs, pleura, tracheobronchial system, mediastinum, thoracic wall, diaphragm and adjacent structures in the context of cardiac surgery interventions as well as definition of indications for transplantations, including risk and prognostic assessment, and foundations of minimally invasive therapy.

- **Transfusion medicine:**
  Selection and medical care of blood donors, production, testing and further development of allogeneic and autologous blood, blood components and tissues, including stem cells, and fields of activities in the preparation, performance and evaluation of haemotherapeutic measures.

- **Urology:**
  Prevention, diagnosis, treatment and rehabilitation of all diseases, malformations and injuries of the urinary tract, urogenital system, retroperitoneum, adrenal glands, sexual
dysfunctions, the entire specialist oncology of men and women of all ages as well as andrology.
1.3. Specialisation

- **Geriatrics:**
  Preventive, curative, rehabilitative and palliative care in the field of general medicine or the relevant specialty for patients who, in particular, are of an advanced biological age, have several reduced organ functions and/or diseases in most cases, functional deficits and, therefore, higher vulnerability taking special account of physical, mental and sociocultural aspects as well as multidimensional geriatric assessments, including interface management.

- **Hand surgery:**
  Prevention, identification, surgical and conservative treatment, follow-up and rehabilitation of diseases, injuries, malformations and tumours of the hand and distal forearm as well as reconstruction after diseases or injuries.

- **Phoniatrik:**
  Diagnosis and treatment of voice, speech and language disorders, difficulties in swallowing as well as childhood hearing disorders.
1.4. Excursus: Aesthetic treatment and surgery

Aesthetic surgery (cosmetic surgery, medical aesthetics) is a surgical intervention without medical indication to achieve a subjectively perceived improvement of visual appearance or to enhance the beauty of the human body or to bring about an aesthetic change in physical appearance, including the removal of signs of ageing.

In particular, aesthetic procedures include onlay graft, tummy tuck (abdominoplasty), eyebrow correction, breast lift (mastopexy), breast implant (breast augmentation) and breast reduction (reduction mammoplasty), lipofilling, face lift (rhytidectomy), liposuction (suction lipectomy), buttock lift, face implants, neck lift, chin implant (genioplasty), body lift, ear pinning (otoplasty), lip enhancement and lip augmentation, reshaping of the nose (rhinoplasty), arm lift (brachioplasty), reshaping of the upper and lower eyelids (blepharoplasty), thigh lift (dermolipectomy), penis enlargement, forehead lift, vaginoplasty and labiaplasty.

An aesthetic treatment is a treatment by means of non-surgical methods, in particular, using medicinal products and minimally invasive methods without medical indication to achieve a subjectively perceived improvement of visual appearance or to enhance the beauty of the human body or to bring about an aesthetic change in physical appearance, including the removal of signs of ageing.

Aesthetic treatments that involve the use of medicinal products, e.g. botulinum toxin, and physical methods, e.g. photorejuvenation (laser skin resurfacing, laser peel, laser wrinkle treatment, thermage and comparable treatments) constitute medical activities falling under the Ärztegesetz 1998 (Medical Practitioners Act).

Aesthetic surgery may only be performed by the following doctors of medicine:

- specialised doctors in plastic, aesthetic and reconstructive surgery entitled to exercise the profession independently,
- other specialised doctors entitled to exercise the profession independently taking account of Article 31 (3) of the Ärztegesetz 1998 provided that they are authorised by regulations of the Austrian Medical Chamber, and
- general practitioners entitled to exercise the profession independently provided that they are recognised for specific procedures by the Austrian Medical Chamber. This recognition requires that they demonstrate equivalent knowledge, experiences and skillsto those of the specialised doctors listed under points 1 and 2.

Interns (Turnusärztinnen/Turnusärzte) may only perform aesthetic treatments and procedures in the context of their training to become a general practitioner or specialised doctor under Article 3 (3) of Ärztegesetz 1998.

Other doctors of medicine must not perform aesthetic surgery.

On its website, the Austrian Medical Chamber publishes information on:

- specialised doctors in plastic, aesthetic and reconstructive surgery who perform aesthetic surgery according to the Bundesgesetz über die Durchführung von
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ästhetischen Behandlungen und Operationen (Federal Act on the Performance of Aesthetic Treatments and Surgery),

- other specialised doctors who are authorised to perform certain aesthetic procedures, including aesthetic procedures associated with them, and
- general practitioners who are authorised to perform certain aesthetic procedures based on proof of equivalent knowledge, experiences and skills.

Aesthetic surgery is subject to special, more extensive requirements related to the provision of information by the doctor of medicine, informed consent by the patient as well as minors and disabled persons. During the first consultation of the doctor of medicine, a surgery passport has to be issued for each patient who intends to undergo one or more aesthetic surgical procedures.

There is a ban on aesthetic treatments or surgery for persons below the age of 16.

Aesthetic treatments and surgery must not be advertised especially by:

- stating that an aesthetic treatment or surgery is recommended, certified or applied by doctors of medicine, dental practitioners or other specialists,
- pointing out the particular inexpensiveness of the aesthetic treatment or surgery or offering free consultations,
- promotional presentations,
- promotional measures that exclusively or mainly target minors, and
- promotional contests, games, prize draws or comparable methods.

If photos modified by means of image editing software are used, they are to be identified as being edited and not corresponding to reality.

Legal basis:

Bundesgesetz über die Durchführung von ästhetischen Behandlungen und Operationen (Federal Act on the Performance of Aesthetic Treatments and Surgery), Federal Law Gazette I No. 80/2012
Verordnung der Österreichischen Ärztekammer über Qualifikationen und einen Operationspass für ästhetische Operationen (Regulation of the Austrian Medical Chamber on Qualifications and a Surgery Passport for Aesthetic Surgery), 2013
2. DENTAL PRACTITIONER

Job description/field of activities:

The dental profession covers all activities based on findings of dental science carried out directly on people or indirectly for people, including therapies of complementary and alternative medicine.

In particular, activities reserved for dental practitioners include:
- examinations for the existence or absence of diseases and anomalies of the teeth, mouth, jaws and associated tissues,
- assessment of the conditions listed above by means of diagnostic aids of dental medicine,
- treatment of the conditions listed above,
- performance of surgical procedures related to the conditions listed above,
- performance of cosmetic and aesthetic procedures on teeth provided that these require dental examination and diagnosis,
- prescription of medicinal products, medical aids and diagnostic tools of dental medicine in relation to the conditions listed above,
- prevention of diseases of the teeth, mouth, jaws and associated tissues,
- issue of dental certificates and preparation of dental expert opinions.

In addition, the field of activities of dental practitioners also covers:
- production of dental prostheses for use in the mouth,
- performance of technical and mechanical work to correct dental prostheses,
- production of artificial teeth and other elements of dental prostheses, for those persons who are treated by the dental practitioner.

Professional title:

Zahnärztin/Zahnarzt (dental practitioner)

Professional qualifications:

The profession may be exercised autonomously by persons who meet the following requirements:
- legal capacity,
- trustworthiness necessary for exercising the profession,
- medical fitness necessary for exercising the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming the qualification for the profession,
- registration on the list of dental practitioners.

Career:

Dental practitioners can exercise their profession autonomously on a self-employed basis or under an employment contract.
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Education:

Diploma (master) programme on dental medicine at a medical university or an accredited private university

Duration of education: 6 years

The recognition of EU/EEA qualifications is performed by the Austrian Dental Chamber.

Statutory representative body:

Austrian Dental Chamber

The purpose of the Austrian Dental Chamber is:

- to take care of matters related to the common professional, social and economic interests of its members, and
- to promote the reputation of the dental profession and compliance with the duties of the dental profession.

Examples of the autonomous field of activities of the Austrian Dental Chamber are:

- conclusion of contracts governing the relationship between members of the dental profession and social security institutions
- conclusion of collective agreements
- quality assurance in dental practice
- education and training for dental support staff
- establishment of patient arbitration boards
- adoption of regulations, such as further training guidelines.

Examples of the delegated field of activities of the Austrian Dental Chamber are:

- maintenance of the list of dental practitioners
- issue of dental practitioners’ ID cards
- withdrawal of professional licenses
- recognition of EEA qualifications
- adoption of regulations, for example, on quality assurance.

Legal basis:

Bundesgesetz über die Standesvertretung der Angehörigen des zahnärztlichen Berufs und des Dentistenberufs (Zahnärztekammergesetz – Dental Chamber Act), Federal Law Gazette I No. 154/2005
Verordnung betreffend die zahnärztlichen Qualifikationsnachweise aus dem Europäischen Wirtschaftsraum und der Schweizerischen Eidgenossenschaft (Zahnärzte-EWR-Qualifikationsnachweis-Verordnung 2008 – Ordinance on the Recognition of EEA Diplomas in Dental Medicine), Federal Law Gazette II No. 194
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Regulations and guidelines of the Austrian Dental Chamber

Note:

Specialises doctors in dental, oral and maxillo-facial surgery are members of the dental profession subject to the following special regulations:

Professional title:
- Zahnärztin/Zahnarzt (dental practitioner) or
- Fachärztin für Zahn-, Mund- und Kieferheilkunde/Facharzt für Zahn-, Mund- und Kieferheilkunde (specialised doctor in dental, oral and maxillo-facial surgery)

Education:
Studies in human medicine and 2- to 3-year post-graduate course on dental medicine (no longer available).

II. Dentists are members of the dentist profession who are subject to the provisions on the dental profession complemented by the following special regulations:

Job description/field of activities:
The dentist profession covers the field of activities of dental practitioners with the exception of those dental treatments performed under or requiring general anaesthesia.

Professional title:
Dentistin/Dentist (dentist)

Education:
Dentist education and one-year work as assistant dentist (since 31 December 1975, the state dentist examination and work as assistant dentist have not been available any more).
**3. CLINICAL PSYCHOLOGIST**

**Job description/field of activities:**

The exercise of the profession of clinical psychologist, using clinical psychological means based on the science of psychology, its findings, theories, methods and techniques and the acquisition of professional competence pursuant to the *Psychologengesetz* 2013 (Psychologists Act), comprises the analysis, interpretation and prognosis of human experience and behaviour as well as influences thereon that are related to health, caused by disorders or causing disorders and the clinical psychological treatment of behavioural disorders, psychological changes and conditions.

The field of activities reserved for clinical psychologists includes:
- clinical psychological diagnosis with regard to health-related and health-conditioned behaviour and experience as well as diseases and their influence on human experience and behaviour, and
- based thereon, the preparation of clinical psychological reports and expert opinions on the performance capability, personality traits or behaviour patterns with regard to psychological disorders, diseases influencing human experience and behaviour and diseases influenced by human experience and behaviour.

Furthermore, the field of activities of clinical psychologists includes, in particular:
- application of clinical psychological treatment methods to persons of all ages and groups in a focused, target- and solution-oriented way building on clinical psychological diagnoses,
- clinical-psychological assistance for persons affected by crisis situations and their family members,
- clinical psychological counselling on diverse aspects of health impairments, their conditions and possibilities for change,
- clinical psychological evaluation.

**Competence profile:**

- Diagnosis of mental disorders and diseases and of psychological factors influencing other diseases for different issues and age groups,
- preparation of clinical psychological reports and expert opinions,
- clinical psychological treatment and counselling of persons with mental diseases and disorders in various settings, for different disorders and problems as well as with different age groups, engaging also in specialist exchanges in a multiprofessional team of healthcare professionals, especially with doctors,
- actions in the field of health promotion and prevention in the field of primary health care,
- team consultations, visits, discussions in multiprofessional co-operation, in particular with other healthcare professions.

The activities identified are performed autonomously irrespective of the fact whether a clinical psychologist is self-employed or employed.
The following list gives examples of possible problems addressed by clinical psychology:

- Organic, including symptomatic, mental disorders (F00-F09)
- Mental and behavioural disorders due to psychoactive substance use (F10-F19)
- Schizophrenia, schizotypal and delusional disorders (F20-F29)
- Affective disorders (F30-F39)
- Neurotic, stress-related and somatoform disorders (F40-F48)
- Behavioural syndromes associated with physiological disturbances and physical factors (F50-F59)
- Disorders of adult personality and behaviour (F60-F69)
- Mental retardation (F70-F79)
- Disorders of psychological development (F80-F89)
- Behavioural and emotional disorders with onset usually occurring in childhood and adolescence (F90-F98)
- Unspecified mental disorders (F99)
- Psychological factors relevant for physical and neurological diseases

Tasks:

- Clinical psychological diagnostics for assessing mental health disorders
- Preparation of clinical psychological reports and expert opinions
- Clinical psychological treatment
- Clinical psychological counselling
- Education and research.

The tasks of clinical psychologists include clinical psychological diagnostics. They use scientific methods to assess the personality structure, psychological status, type and extent of psychological conditions, performance or its restriction. Based on the findings, clinical psychologists decide on counselling and treatment measures that may be necessary, draw up reports, expert opinions and certificates.

Clinical psychological treatment also includes preventive and rehabilitative measures. The objective is to prevent diseases, mitigate or eliminate mental disorders or conditions and support ill persons in better coping with their disease.

In clinical psychological counselling, clinical psychologists provide targeted information and aids to decision-making to the person, group or family consulting them and, if necessary, support them in identifying and delimiting the most important issues and concerns as well as suitable solutions.

Professional title:

*Klinische Psychologin/Klinischer Psychologe* (clinical psychologist)

Education:

- Diploma/bachelor and master programme on psychology with a total of at least 300 ECTS credits, whereof a minimum of 180 ECTS credits relate to knowledge and
skills in the field of empirical-scientific psychology and a minimum of 75 ECTS credits to study contents, including their practical application in exercises or internships, in the fields of psychopathology, psychopharmacology, psychiatry and neurology, psychological diagnostics with a special focus on health-related experiences and behaviours, mental disorders, including exercises, methods and applications in the field of health promotion, disease prevention and rehabilitation, psychological interventions in the field of health psychology and clinical psychology, including exercises.

- **Postgraduate training** for the acquisition of theoretical and practical competences in clinical psychology for a total of 2,500 hours:
  - acquisition of theoretical professional competence in a minimum period of twelve months for at least 340 units: basic module with a minimum of 220 units and advanced module with a minimum of 120 units,
  - acquisition of practical professional competence through clinical psychological work for a minimum of 2,098 hours as well as case supervision (120 units) and self-awareness (76 units).

Completion of education:
Oral final exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

**Professional qualifications:**

The profession may be exercised autonomously by persons who meet the following requirements:
- authorisation to use the professional title of *Psychologin/Psychologe* (psychologist; successful completion of studies in psychology with a total of at least 300 ECTS credits at a recognised post-secondary education institution in Austria, the EU, the EEA or Switzerland or recognized equivalent foreign qualifications,
- acquisition of professional competence (final certificate),
- legal capacity,
- physical and mental fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- professional indemnity insurance,
- place of work,
- registration on the list of clinical psychologists.

**Legal basis:**


*Bundesgesetz über die Niederlassung und die Ausübung des freien Dienstleistungsverkehrs von klinischen Psychologen und Gesundheitspsychologen aus dem Europäischen*
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Wirtschaftsraum (EWR-Psychologengesetz – EEA Psychologists Act), Federal Law Gazette I No. 113/1999
4. HEALTHCARE PSYCHOLOGIST

Job description/field of activities:

The exercise of the profession of healthcare psychologist using health psychological means comprises tasks for developing health promoting actions and projects. They are based on psychological science, its findings, theories, methods and techniques as well as the acquisition of professional competence under the terms of dedicated legislation. They are related to the promotion and maintenance of health, diverse aspects of health-related behaviours of individuals and groups and all measures serving to improve the framework of health promotion and disease prevention and the improvement of the system of health care delivery.

The field of activities of healthcare psychologists covers:

- the analysis of individuals of all ages and groups performed by health psychological means, in particular, with regard to diverse aspects of health behaviour and its causes,
- based thereon, the preparation of health psychological reports and expert opinions, in particular on health-related risk behaviours and their causes,
- health psychological actions for individuals of all ages and groups with regard to health behaviour, in particular health-related risk behaviour, such as diet, exercise, smoking, including the provision of advice on the promotion and maintenance of health as well as avoidance of health risks taking account of everyday life, leisure and work,
- health psychological analysis and counselling of organisations, institutions and systems with regard to health-related framework conditions and actions of health promotion, prevention and rehabilitation,
- health psychological development, implementation and evaluation of actions and projects, in particular in the field of health promotion.

The activities identified are performed autonomously irrespective of the fact whether a healthcare psychologist is self-employed or employed.

Competence profile:

- Counselling of persons of all ages and groups with regard to health-promoting aspects of individual behaviours and of institutions with regard to personal, social and structural factors influencing physical and mental health,
- health psychological diagnosis and treatment of persons of all ages and groups with regard to different mental aspects of health-related risk behaviours (e.g. diet, exercise, substance abuse, stress management),
- planning, implementation and evaluation of health-promoting actions and projects in various settings (kindergarten and school, workplace and enterprises, social residential environment, institutions of primary health care), in particular within the framework of projects,
- employee- and team-related tasks within the framework of multiprofessional co-operation, in particular with other healthcare professions.
The following list gives examples of the applications of healthcare psychology:

- Information and education on health risks and protective factors in different phases and situations of life,
- realisation and abandonment of one's own risk behaviour (e.g. with regard to diet, exercise, work, nicotine, alcohol, drugs) and training of behaviours promoting health,
- lifestyle changes by taking responsibility for one's own health and actively organising everyday life in a way promoting health,
- learning of effective coping mechanisms in critical phases of life (e.g. start of parenthood, divorce, loss of close people, unemployment, retirement),
- uptake of health-promoting behaviours in partnerships, families, schools, companies, institutions, etc.,
- reduction of stress,
- development and implementation of concepts of health promotion and disease prevention.

Tasks:

The field of activities of healthcare psychologists includes:

- the analysis of individuals (individual case work) and groups (and larger systems, such as families, organisations, institutions) of all ages using health psychological means, in particular with regard to different aspects of health behaviour and its causes,
- based thereon, the preparation of health psychological reports and expert opinions, in particular on health-related risk behaviours and their causes,
- health psychological actions for individuals (individual case work) and groups (and larger systems, such as families, organisations, institutions) of all ages with regard to health behaviours, in particular health-related risk behaviours,
- health psychological analysis and counselling of organisations, institutions and systems with regard to health-related framework conditions and actions of health promotion, prevention and rehabilitation,
- health psychological development, implementation and evaluation of actions and projects, in particular in the field of health promotion.

Health psychological counselling and care/support services are based on a broad range of research results on how to change behaviours, attitudes, mindsets and feelings for the better. To that effect, they take account of important psychosocial factors that constitute special risks of ill health as well as special health protective factors.

Health psychological interventions can be made either directly by providing health psychological counselling and training to individuals, families or groups or, for example, in health promotion and prevention projects at schools, companies, hospitals and rehabilitation centres.

Professional title:

*Gesundheitspsychologin/Gesundheitspsychologe* (healthcare psychologist)
**Education:**

- **Diploma/bachelor and master programme on psychology** with a total of at least 300 ECTS credits, whereof a minimum of 180 ECTS credits relate to knowledge and skills in the field of empirical-scientific psychology and a minimum of 75 ECTS credits to study contents, including their practical application in exercises or internships, in the fields of psychopathology, psychopharmacology, psychiatry and neurology, psychological diagnostics with a special focus on health-related experiences and behaviours, mental disorders, including exercises, methods and applications in the field of health promotion, disease prevention and rehabilitation, psychological interventions in the field of healthcare psychology and clinical psychology, including exercises.

- **Postgraduate education and training** for the acquisition of theoretical and practical competences in healthcare psychology for a total of 1,940 hours:
  - Acquisition of theoretical professional competence in a minimum period of twelve months for at least 340 units: basic module with a minimum of 220 units and advanced module with a minimum of 120 units,
  - Acquisition of practical professional competence through health psychological work for a minimum of 1,553 hours as well as case supervision (100 units) and self-awareness (76 units).

**Completion of education:**
Oral final exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

**Professional qualifications:**

The profession may be exercised autonomously by persons who meet the following requirements:

- Authorisation to use the professional title of **Psychologin/Psychologe** (psychologist; successful completion of studies in psychology with a total of at least 300 ECTS credits at a recognised post-secondary education institution in Austria, the EU, the EEA or Switzerland or recognized equivalent foreign qualifications,

- Acquisition of professional competence (final certificate),

- Legal capacity,

- Physical and mental fitness necessary for fulfilling the duties of the profession,

- Trustworthiness necessary for fulfilling the duties of the profession,

- German language skills required for exercising the profession,

- Professional indemnity insurance,

- Place of work,

- Registration on the list of healthcare psychologists.
Legal basis:


*Bundesgesetz über die Niederlassung und die Ausübung des freien Dienstleistungsverkehrs von klinischen Psychologen und Gesundheitspsychologen aus dem Europäischen Wirtschaftsraum (EWR-Psychologengesetz – EEA Psychologists Act), Federal Law Gazette I No. 113/1999*

*Verordnung über Ausgleichsmaßnahmen im Rahmen der Berufsanerkennung von Gesundheitspsychologen und Klinischen Psychologen aus dem Europäischen Wirtschaftsraum (EWR-Psychologenverordnung – EEA Psychologists Ordinance), Federal Law Gazette II No. 408/1999*

*Bundesgesetz über die Organisation der Universitäten und ihre Studien (Universitätsgesetz 2002 – Universities Act), Federal Law Gazette I No. 120/2002*
5. PSYCHOTHERAPIST

Job description/field of activities:

Psychotherapy is an independent therapeutic method used in health care to diagnose and treat mental, psychosocial or psychosomatic conditions and disorders classifiable as diseases by means of scientific-psychotherapeutic methods. The purpose of psychotherapy is:

- to heal or mitigate mental distress,
- to help in personal crises,
- to change disturbed behaviours and attitudes,
- to promote maturity, personal development and health.

Psychotherapists practicing the profession with sole responsibility perform the activities described autonomously irrespective of the fact whether they are self-employed or employed.

Psychotherapy can be expedient, for example, in the following cases:

- anxieties reducing the quality of life,
- intrusive compulsive thoughts and behaviours,
- depressions,
- addictions,
- somatopsychic and chronical diseases,
- psychosomatic diseases (diseases related to unresolved and stressful mental problems),
- psychoses (schizophrenic disorders, bipolar disorders) and personality development disorders,
- functional disorders (frequently recurring physical symptoms without organic causes),
- distressing life situations and personal crises,
- problems and crises in relationships and family.

Tasks:

- The specific objective of psychotherapy is not a given, but is discussed by psychotherapist and patient at the beginning of treatment. There is no fixed pattern for the process of psychotherapy. The way it proceeds depends on the personality in question and on the interaction of psychotherapist and patient. The psychotherapist supports the patient in his/her development and in finding a suitable solution to problems and changes. The focus is on dialogue and exchanges between psychotherapist and patient,
- education and research
- psychotherapeutic diagnostics
- preparation of psychotherapeutic expert opinions.

At present, the following psychotherapeutic methods are recognised in Austria:

- Depth psychological-psychodynamic orientation:
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- **Psychoanalytic methods:**
  - Analytical psychology
  - Group psychoanalysis/psychoanalytical psychotherapy
  - Individual psychology
  - Psychoanalysis/psychoanalytical psychotherapy
  - Psychoanalysis-oriented psychotherapy

- **Methods based on depth psychology:**
  - Autogenous psychotherapy
  - Daseinsanalysis
  - Dynamic group psychotherapy
  - Hypnotherapy
  - Katathym-imaginative psychotherapy
  - Concentrative movement therapy
  - Transactional analysis psychotherapy

- **Humanistic-existential orientation:**
  - Existential analysis
  - Existential analysis and logotherapy
  - Gestalt theoretical psychotherapy
  - Integrative Gestalt therapy
  - Integrative therapy
  - Client-centred psychotherapy
  - Person-centred psychotherapy
  - Psychodrama

- **Systemic orientation:**
  - Neuro-linguistic psychotherapy
  - Systemic family therapy

- **Behaviour therapy orientation:**
  - Behaviour therapy

**Professional title:**

*Psychotherapeutin/Psychotherapeut* (psychotherapist)

**Education:**

Two-phase theoretical and practical education and training:

- General section (propaedeutic) (*Propädeutikum*) at least 765 hours of theoretical instruction and at least 550 hours of practical training
- Specialised section (specialism): at least 300 hours of theoretical instruction and at least 1600 hours of practical training

**Prerequisites of education:**

*Psychotherapeutic propaedeutic:*

- University entrance qualification or
- education and training as nurse or
- admission, by official decision, by virtue of their special aptitude based on an expert opinion of the Psychotherapy Advisory Council.
Psychotherapeutic specialism:
- Age of 24 years
- successful completion of the psychotherapeutic propaedeutic
- completion of one of the professional education courses or university programmes identified in the *Psychotherapiegesetz* (Psychotherapy Act) or
- admission, by official decision, by virtue of their special aptitude based on an expert opinion of the Psychotherapy Advisory Council.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Professional qualifications:

The profession may be exercised autonomously by persons who meet the following requirements:
- successful completion of the psychotherapeutic propaedeutic and specialism,
- legal capacity,
- age of 28 years,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- registration on the list of psychotherapists,
- professional indemnity insurance.

Legal basis:

6. MUSIC THERAPIST

Job description/field of activities:

Music therapy is an independent, scientific, artistic, creative and expressive form of therapy. It consists in the deliberate and planned treatment of persons with behavioural disorders and conditions induced by emotional, somatic, intellectual or social factors by means of musical interventions in a therapeutic relationship between one or more clients and one or more therapists with the objective of:

- preventing, mitigating or eliminating symptoms,
- changing behaviours and attitudes requiring treatment,
- promoting and maintaining or restoring the development, maturity and health of the client.

The music therapist profession is exercised by the professional performance of the activities described above, in particular for the following purposes:

- prevention, including health promotion,
- treatment of acute and chronic diseases,
- rehabilitation,
- promotion of social skills, including supervision,
- education and research.

Music therapy especially provides help for:

- people with psychoses (schizophrenic disorders, bipolar disorders) and personality development disorders,
- people with neurotic or psychosomatic disorders and diseases, children and adolescents exhibiting behavioural syndromes,
- children and adolescents with cancer,
- elderly people especially with neuropathological brain changes,
- people with progressive, malignant diseases, in particular AIDS and cancer patients,
- people with traumatic brain injury (in particular with organic brain syndrome) and/or neurological brain changes as well as coma patients,
- people with dependence syndrome,
- disabled people of all ages.

Types of professional practice:

The Musiktherapiegesetz (Music Therapists Act) defines two ways of exercising the music therapist profession entailing different rights and duties:

Music therapists practicing the profession with sole responsibility perform the activities described in the job description autonomously irrespective of the fact whether they are self-employed or employed.
If music therapy is applied to treat acute and chronic diseases or for the purpose of rehabilitation, referral by

- a doctor of medicine or
- a clinical psychologist or
- a psychotherapist or
- a dental practitioner

is required before or after the first music therapy session and, at any rate, before the second session.

Music therapists practicing the profession with shared responsibility perform the activities described in the job description within the framework of employment on order by

- a doctor of medicine or
- a clinical psychologist or
- a music therapist entitled to practice the profession with sole responsibility or
- a psychotherapist or
- a dental practitioner

and under regular supervision by a music therapist entitled to practice the profession with sole responsibility to the extent technically required.

**Professional title:**

*Musiktherapeutin/Musiktherapeut* (music therapist), regardless of the way the profession is exercised

**Additional designation:**
The academic degree obtained by completing music therapy education has to be used in an abbreviated form in addition to the professional title.

**Education:**

**Education and training for professional practice with shared responsibility:**

- a bachelor programme on music therapy at an Austrian university or
- a bachelor programme on music therapy at an Austrian university of applied sciences.

Duration of education: 6 semesters

**Education and training for professional practice with sole responsibility:**

- a diploma programme on music therapy at an Austrian university or
- a master programme on music therapy at an Austrian university after completion of education required for practicing music therapy (bachelor of music therapy) with shared responsibility or
- a master programme on music therapy at an Austrian university of applied sciences after completion of education required for practicing music therapy (bachelor of music therapy) with shared responsibility.

Duration of education: 4 semesters
The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

**Professional qualifications:**

- **General requirements:**
  - legal capacity,
  - medical fitness necessary for fulfilling the duties of the profession,
  - trustworthiness necessary for fulfilling the duties of the profession,
  - German language skills required for fulfilling the duties of the profession,
  - liability insurance.

- **Special requirements:**
  - for professional practice with shared responsibility: evidence of successful completion of education for practicing music therapy with shared responsibility or equivalent education (in particular recognition of studies completed abroad, recognised EEA qualifications),
  - for professional practice with sole responsibility: evidence of successful completion of education for practicing music therapy with sole responsibility or equivalent education (in particular recognition of studies completed abroad, recognised EEA qualifications).

- **Registration on the list of music therapists**

**Legal basis:**

*Bundesgesetz über die berufsmäßige Ausübung der Musiktherapie (Musiktherapiegesetz – Music Therapists Act), Federal Law Gazette I No. 93/2008*

*Bundesgesetz über die Organisation der Universitäten und ihre Studien (Universitätsgesetz 2002 – Universities Act), Federal Law Gazette I No. 120/2002*

*Bundesgesetz über Fachhochschul-Studiengänge (Fachhochschul-Studiengesetz – University of Applied Sciences Studies Act), Federal Law Gazette No. 340/1993*
7. PHARMACIST

Job description/field of activities:

Legislation mandates pharmacists to ensure the proper supply of the population with medicinal products. Hence, pharmacists bear a high level of responsibility and are obliged to exercise special diligence.

In particular, the pharmaceutical activities that may only be performed by pharmacists include:

- the development, manufacture and testing of medicinal products,
- the distribution of pharmacy-only medicinal products,
- the provision of advice and information on medicinal products,
- the checking of stocks of medicinal products at hospitals.

Pharmacists perform their tasks in various fields of activities and mainly:

- at pharmacies,
- at hospitals,
- in industry,
- at testing institutes,
- in the Austrian Armed Forces,
- at universities,
- in environmental protection.

Professional title:

Apotheker/Apothekerin (pharmacist)

Professional qualifications:

To be able to exercise their profession in Austria, pharmacists need a general professional license that is granted by way of decision by the Austrian Chamber of Pharmacists when the following conditions are met:

- state diploma in pharmacy or recognised qualifications,
- reliability (no criminal conviction for a premeditated offence to more than one year in prison, no ban on exercising the profession),
- German language skills required for exercising the profession.

Career:

After graduating in pharmacy and taking the pharmacist exam after one year of work experience, pharmacists are generally licenced to work autonomously in community pharmacies or hospital pharmacies.

After five years of work as a generally licenced pharmacist at the earliest, professionals have the right to work on a self-employed basis and obtain a license for a new pharmacy or take over the license of an existing pharmacy.
Education:

- Diploma programme on pharmacy at a university and
- one year of work experience (aspirants' year) followed by an exam.

Duration of education:
Diploma programme on pharmacy: 9 semesters
Professional experience: 1 year

The recognition of EU/EEA qualifications is performed by the Austrian Chamber of Pharmacists.

Statutory representative body:

- Austrian Chamber of Pharmacists
- Regional offices in the Laender

The Austrian Chamber of Pharmacists, for example, is responsible for:

- practical training of pharmacists (in particular examination procedure and organisation of pharmacist's examinations),
- issuing of pharmacist ID cards, award of the state diploma in pharmacy, grant and withdrawal of general professional licenses, recognition of foreign qualifications,
- grant of licenses for the operation of an existing community pharmacy and permit for operating an existing branch pharmacy, approval of the relocation of pharmacies,
- approval of partnership agreements, lease agreements and manager appointments,
- publication of technical information on proprietary medicinal products,
- public relations,
- provision of information and advice to members,
- conclusion of collective agreements,
- disciplinary proceedings related to a breach of professional duties of pharmacists, maintenance of a disciplinary register,
- quality assurance measures,
- establishment, operation or promotion of welfare and support institutions for members and their surviving dependants,
- adoption of regulations, such as code of conduct, disciplinary code and further training guidelines,
- submission of comments on bills and draft ordinances,
- maintenance of a register of pharmacies and pharmacists.
Pharmazeutische Gehaltskasse (salary fund of pharmacists):

The Pharmazeutische Gehaltskasse is the social and welfare institution for employed and self-employed pharmacists. It has the following tasks:

- calculating and paying the salaries of all pharmacists who work on the basis of an employment contract at a community or hospital pharmacy,
- granting of benefits to pharmacists and their surviving dependants,
- job placements for members,
- performing clearing services between health insurance funds and pharmacies (settlement of charges on medical prescriptions).

Disciplinary regulations:

Pharmacists or aspirants commit a disciplinary offence if they

- adversely affect the honour or reputation of the pharmacists' profession by their behaviour towards the general public, customers or colleagues,
- break professional duties they have to comply with under legislation or other regulations.

Legal basis:

*Gesetz betreffend die Regelung des Apothekenwesens (Apothekengesetz 1906 – Pharmacy Act), Imperial Gazette No. 5/1907
Verordnung über die Verwendung des pharmazeutischen Fachpersonals im Betriebe der öffentlichen und Anstaltsapotheken, ferner die fachliche Ausbildung und Fachprüfung für den Apothekerberuf (Pharmazeutische Fachkräfteverordnung – Ordinance on Qualified Pharmaceutical Personnel), Federal Law Gazette No. 40/1930
Bundesgesetz über die Österreichische Apothekerkammer (Apothekerkammergesetz 2001 – Chamber of Pharmacists Act), Federal Law Gazette I No. 111
Code of Conduct of 1 April 2009
8. VETERINARY SURGEON

Job description/field of activities:

The profession of veterinary surgeon covers all activities based on scientific knowledge of veterinary medicine that serve for preventing, mitigating and curing animal conditions and diseases, contributing to the maintenance and development of productive animal populations taking account of animal welfare as well as the protection of humans against risks and adverse effects of zoonoses. Another significant field of activities relates to ensuring the safety of food and products of animal origin and working towards an improvement of their quality.

Activities reserved for members of the profession of veterinary surgeon are:

- examination and treatment of animals,
- medical measures designed to prevent animal diseases,
- surgical procedures on animals,
- vaccination, injection, transfusion, infusion, instillation and blood sampling on animals,
- prescription of medicinal products for animals,
- ante-mortem inspection of animals to be slaughtered and meat inspection,
- issue of veterinary certificates and expert opinions,
- artificial insemination of domestic animals.

Competence profile:

- Examination of animals and diagnosis of disorders and diseases,
- treatment of animals with diseases and disorders,
- care of animal stocks and husbandries,
- co-operation in zoonosis and animal disease control,
- visits, discussions in multiprofessional co-operation, in particular with other healthcare professions.

The activities identified are performed autonomously irrespective of the fact whether a veterinary surgeon is self-employed or employed.

Professional title:

Tierärztin/Tierarzt (veterinary surgeon)

Professional qualifications:

The profession may be exercised autonomously by persons who meet the following requirements:

- full legal capacity,
- citizenship of Austria or other contracting parties to the European Economic Area,
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• successful completion of the diploma programme on veterinary medicine at the University of Veterinary Medicine Vienna or foreign education programmes recognised as equivalent,
• sufficient command of the official language,
• registration on the list of veterinary practitioners.

Career:

Veterinary surgeons can exercise their profession autonomously on a **self-employed** basis or under an employment contract.

Education:

Diploma programme on veterinary medicine at a university of veterinary medicine

Duration of education:
12 semesters (6 years) structured in three parts

The recognition of EU/EEA qualifications is performed by the Austrian Veterinary Chamber.

**Statutory representative body:**

Austrian Veterinary Chamber

Disciplinary regulations:

Veterinary surgeons have to comply with professional regulations in practicing their profession.

Legal basis:

*Bundesgesetz über den Tierarzt und seine berufliche Vertretung (Tierärztegesetz – Veterinary Surgeons Act)*, Federal Law Gazette I No. 16/1975
*Bundesgesetz über die Österreichische Tierärztekammer (Tierärztekammergesetz – Act on the Veterinary Chamber)*, Federal Law Gazette I No. 86/2012

**Note:**

**Specialised veterinary surgeons** are veterinary surgeons who demonstrated their qualifications in a certain specialty of veterinary medicine for which a specialised veterinary surgeon title exists by passing an examination before a specialist veterinary examination commission. The specialised veterinary surgeon title does not affect the scope of their licence to practice.
9. MEDICAL PHYSICIST

Job description/field of activities:

The professional profile of medical physicists primarily covers applied radiophysics and radiation technology related to medical exposures of patients for diagnostic and therapeutic purposes as well as radiation protection during such exposures. According to the Medizinische Strahlenschutzverordnung (Medical Radiation Protection Ordinance), this includes, in particular, patient dosimetry, the development and application of complex procedures and equipment, optimisation and quality assurance (including quality control) as well as the performance of tasks and the provision of advice on other issues of radiation protection for medical exposures.

In Austria, the majority of medical physicists is active in fields in which ionising radiation is applied and more than half of them in radiotherapy. Considerably less medical physicists work in other fields, such as optics, acoustics, sonography and MR. The information given below only relates to medical physicists applying ionising radiation.

In particular, medical physicists perform the following activities with regard to the application of ionising radiation:

General:
- Conversion of physical doses into biologically effective doses based on models,
- co-ordination of service and repair work as well as subsequent physical-technical acceptance testing,
- in-vivo dose measurement on patients,
- organisational, technical and structural radiation protection,
- support during the clinical implementation of new diagnostic and therapeutic procedures,
- individual dosimetric control of planned radiation exposure,
- activities of a radiation safety officer,
- provision of advice and preparation of specifications for the acquisition of new equipment.

In radiotherapy:
- Collection of basic data from radiation devices as well as preparation and verification of radiation models in radiation planning systems,
- regular quality assurance for all modes used in radiotherapy and adaptation of quality assurance measures in line with standards in effect and applicable requirements,
- dosimetric set-up and calibration of radiation devices,
- establishment of complex radiation plans,
- planning of brachytherapy.

In nuclear medicine:
- Development of programmes for imaging and quantitative analyses of physiological parameters,
- complex patient-related calculations for nuclear medical therapy,
- advice on therapy planning.
• development of all quality assurance measures required for equipment and monitoring of their implementation,
• control of compliance with diagnostic reference values.

In interventional and diagnostic radiology:
• Advice on all dosimetric issues,
• control of compliance with diagnostic reference values,
• development of all quality assurance measures required for equipment and monitoring of their implementation,
• dose optimisation in radiological applications,
• optimisation of examination parameters for paediatric exposures.

Medical physicists active as radiation protection officers are responsible for radiation protection in organisational and technical terms in the field assigned to them and organise appropriate internal courses for further and continuing training. Moreover, medical physicists are also providing advice on issues of radiation protection, draw up expert opinions and perform other tasks in the field of radiation protection.

Research and science:
In interdisciplinary research projects, medical physicists support the development and improvement of existing techniques as well as the development of new devices and procedures. In this context, the addition of further imaging modes as well as the development of software for control, analysis and computation algorithms are of particular relevance. Medical physics frequently supports the development of new devices by simulations, also with a view to patient safety in implementation and application.

The implementation and adaptation of imaging systems for diagnostics and therapy to medical routines and their development as well as data processing in this field are another key area of research in medical physics. Research results are presented in scientific publications or at specialised conferences.

Education:
Medical physicists teach at various universities, universities of applied sciences in medical-technical subjects as well as in radiation protection courses under radiation protection legislation.

Professional title:
Medizinphysikerin/Medizinphysiker (medical physicist)

Education:
• Postgraduate university course on medical physics at the Medical University of Vienna
  Admission requirements and subjects taught are laid down in Issue 26 of the Mitteilungsblatt der Medizinischen Universität Wien (see "Legal basis").
• Certification "Fachanerkennung für Medizinische Physik" by the Austrian Society for Medical Physics (ÖGMP)
The requirements for certification are laid down in the guidelines "Richtlinien zur Fachanerkennung der ÖGMP".

**Professional qualifications:**

According to Article 6 (1) (1) of Medizinische Strahlenschutzverordnung (Medical Radiation Protection Ordinance), persons who successfully completed a postgraduate university course on medical physics at an Austrian university are permitted to work as medical physicists in areas in which ionising radiation is used.

Comparable Austrian or foreign qualifications are recognised by the Federal Ministry of Health and Women's Affairs according to Article 6 (1) (2) of the Medical Radiation Protection Ordinance. It is common administrative practice that the certification “Fachanerkennung der ÖGMP” is recognised as a comparable qualification.

**Legal basis:**


Verordnung über Maßnahmen zum Schutz von Personen vor Schäden durch Anwendung ionisierender Strahlung im Bereich der Medizin (Medizinische Strahlenschutzverordnung – Medical Radiation Protection Ordinance), Federal Law Gazette II No. 409/2004


Mitteilungsblatt der Medizinischen Universität Wien (Gazette of the Medical University of Vienna), academic year 2013/2014, Issue 26, No. 30
10. MIDWIFE

Job description/field of activities:

Advice, supervision and care of pregnant women, women in labour and lying-in women, delivery assistance, co-operation in maternity and infant care.

In their work, midwives have to perform autonomously, in particular, the following tasks:

- providing information on basic methods of family planning,
- confirming pregnancies, monitoring normal pregnancies and performing the examinations required to monitor normal pregnancies,
- arranging examinations required for the earliest possible detection of abnormal pregnancy or providing information on such examinations,
- preparation for parenthood, comprehensive preparation for childbirth, including advice on hygiene and nutrition issues,
- assisting women in labour and monitoring the foetus in the womb using suitable clinical and technical means,
- spontaneous deliveries, including support of the perineum and, in the case of urgency, breech deliveries and, if necessary, performance of episiotomy,
- recognising signs of anomalies in the mother or child requiring consultation of a doctor or medical interventions, as well as assisting during any medical measures; in the absence of a doctor, taking the required measures, in particular manual removal of the placenta and, if applicable, subsequent manual examination of the uterus,
- evaluating the vital signs and functions of newborns, initiating and performing the measures and providing the assistance required in emergencies, taking immediate measures to resuscitate newborns,
- care of newborns, taking blood from newborns by heel prick and performing the required measurements,
- care of lying-in women, monitoring mothers after delivery and providing appropriate advice on the optimum care of newborns,
- carrying out the measures stipulated by a doctor,
- preparing the written records required.

Competence profile:

Midwives have acquired the following qualifications for exercising the midwife profession with sole responsibility:

- Technical-methodological competences: They have learnt to combine profession-specific knowledge, medical knowledge and knowledge on other relevant disciplines with the competences and skills acquired as a basis for performing all the tasks involved in the activities of midwives. Upon completion of their education, the graduates have developed professional ethics governing their actions and activities in a medical and societal context.

A midwife is able to:

- perform the tasks of supervision, advice and care of women in pregnancy, in labour and in the post-natal period as well as new-born babies and infants in
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- an autonomous and process-oriented way and provide assistance during delivery,
  - assess the regular course of pregnancy, delivery, the post-natal period and the breast-feeding period as well as the healthy development of new-born babies and infants and take measures adequate to the situation,
  - realise the limits of the autonomous performance of their profession and, in the case of the suspicion or occurrence of irregular conditions hazardous for woman or child during pregnancy, delivery and puerperium, take the measures required on a doctor’s order and in co-operation with a doctor,
  - use medicines in accordance with legal provisions,
  - realise when other professions are competent and take the required measures in a targeted way to the benefit of women in pregnancy, in labour and in the post-natal period as well as new-born babies and infants through multi-professional co-operation adequate to the situation,
  - implement profession-specific concepts of health promotion and prevention in a targeted way,
  - recognise psychosocial change and development processes as well as take and initiate appropriate measures,
  - inform women and their families in a competent way, in particular with regard to sexuality, control of conception and family planning and thereby create the basis for their personal decisions,
  - analyse measures, reflect on them and develop solutions and approaches on his/her own in a way adequate to the situation,
  - perform the activities of midwives in line with technical and scientific findings and experiences,
  - document the course of advice and care as well as analyse and evaluate the results,
  - meet the requirements of quality assurance and hygiene,
  - act in line with the ethical principles and legal bases specific to the profession,
  - recognise life-threatening conditions and initiate or take appropriate life-saving emergency measures,
  - develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- Social communication competences and self-competences, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A midwife is able to:
  - assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
  - justify his/her own decisions in a responsible way to external actors,
  - apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
  - provide information and explanations in a professional way and establish a relation of trust to the patient or her family members,
  - take account of cultural and regional needs, lifestyles and values,
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- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the midwifery profession.

- **Scientific competences** allowing them to understand and plan research processes.

A midwife is able to:
- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession,
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
- make scientific findings and phenomena usable for professional and scientific development.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming midwife qualifications,
- registration on the midwife register.

Career:

- On a self-employed basis,
- as an employee of a hospital,
- as an employee of institutions of prenatal and postnatal care,
- as an employee of doctor of medicines,
- as an employee of medical group practices.

Midwives are entitled to work on a **self-employed basis**. Midwives have to notify the Austrian Midwives Association when they set up practice and when their address changes.

Professional title:

*Hebamme* (midwife)

Education:

Bachelor programme at a university of applied sciences (UAS)
Duration of education: 6 semesters
Admission requirements for UAS bachelor programmes:
- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor

The recognition of EU/EEA qualifications is performed by the Austrian Midwives Association.

Specialised training:
Specialised training for teaching and managerial tasks

Statutory representative body:
Austrian Midwives Association

Examples of the autonomous field of competences of the Austrian Midwives Association are:
- preparing guidelines for the organisation of further training courses and ensuring their implementation
- preparing documentation guidelines for self-employed midwives
- documentation of the further training of midwives.

Examples of the delegated field of competences of the Austrian Midwives Association are:
- maintaining a register of all midwives authorised to exercise the profession in Austria (midwives register)
- issuing of midwife ID cards
- recognising EEA qualifications.

Legal basis:
Verordnung betreffend die Qualifikationsnachweise der Hebammen aus dem Europäischen Wirtschaftsraum und der Schweizerischen Eidgenossenschaft (Hebammen-EWR-Qualifikationsnachweis-Verordnung 2008 – Ordinance on EEA Midwifery Qualifications), Federal Law Gazette II No. 195
11. MEDICAL TECHNICAL PROFESSIONS

11.1. Physiotherapeutic profession – physiotherapist

Job description/field of activities:

Autonomous performance of all physiotherapeutic measures on a doctor’s orders in intramural and extramural care with special consideration of functional relations in the fields of health education, prophylaxis, therapy and rehabilitation, in particular mechanotherapy measures, e.g. all types of kinesitherapy, perception, manual therapy of joints, respiratory therapy, all types of curative massage, reflex therapy, lymphatic drainage, ultrasound therapy, all measures of electrotherapy, thermotherapy, phototherapy, hydrotherapy and balneotherapy as well as profession-specific diagnostic methods and co-operation in electrodiagnostic examinations; furthermore, advice and education of healthy persons in the fields mentioned above without a doctor’s orders.

Competence profile:

Physiotherapists have acquired the following qualifications for exercising the physiotherapeutic profession with sole responsibility:

- **Technical-methodological competences** for the autonomous performance of physical therapy. They have learnt to combine physiotherapeutical knowledge and skills with medical knowledge and knowledge from other relevant disciplines as a basis for their autonomous physiotherapeutical actions in order to apply them in particular in the fields of occupational medicine, surgery, gynaecology and obstetrics, geriatrics, internal medicine, intensive care, cardiology, paediatrics, neurology, orthopaedics, physical medicine, psychiatry, pulmology, rheumatology, traumatology and urology. They master the work steps of physical therapy that serve for maintaining, promoting, improving or recovering mobility in the framework of health promotion, prevention, therapy and rehabilitation. Upon completion of their education, they have developed professional ethics governing their actions and activities in a medical and societal context.

A physiotherapist is able to:

- perform physical therapy as a part of the overall medical process on a doctor’s orders; this includes the work steps of problem identification, planning, implementation and quality assurance, evaluation, documentation and reflection,
- identify the health problem of the patient, recognise the information relevant for physical therapy in the medical reports available and, if necessary, contact the relevant doctor or other persons responsible to obtain relevant information that is missing,
- realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- realise when specific physiotherapeutical measures are contraindicated,
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- imagine body positions and movement patterns and realise the effect of symptoms on motion behaviour,
- prepare a physiotherapeutical report based on the results of the information obtained and guided by hypotheses verified by examination methods specific to the profession through inspection, palpation and functional examination,
- prepare a therapy plan, define the objectives of physical therapy and implement the therapy plan,
- perform therapies in line with technical and scientific findings and experiences,
- discuss the therapy plan with the patient, adjust it to his/her needs and motivate him/her to co-operate,
- critically review the volume of the measures and the course of intervention, and adjust it to the patient,
- perform physiotherapeutical measures with groups of persons and adequately respond to processes of group dynamics,
- meet the requirements of quality management and hygiene,
- document the course of therapy as well as analyse and evaluate the results,
- assess the impact of unphysiological stress on the motion system within the framework of prevention and therapy, perform the physiotherapeutical process within the framework of health promotion and prevention and offer targeted measures promoting development and maintaining health,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- **Social communication competences and self-competences**, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A physiotherapist is able to:

- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- **Scientific competences** allowing them to understand and plan research processes.

A physiotherapist is able to:

- retrieve information on recent scientific findings obtained at the national and international level,
formulate issues of relevance to research in the field specific to his/her profession,
select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
make scientific findings and phenomena usable for professional and scientific development.

Professional qualifications:
The profession may be exercised by persons who meet the following requirements:
- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming the qualification for the profession.
- From 1 January 2018: registration on the healthcare profession register.

Career:
The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, physiotherapists are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:
Physiotherapeutin/Physiotherapeut (physiotherapist)

Education:
Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:
- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor

Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
Specialised training:

Specialised training for:
- special tasks
- teaching tasks
- managerial tasks

Legal basis:

*Bundesgesetz über die Regelung der gehobenen medizinisch-technischen Dienste (MTD-Gesetz – Federal Act Regulating Medical Technical Professions), Federal Law Gazette No. 460/1992*

*Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegister-Gesetz – Federal Act on the Registration of Healthcare Professions), Federal Law Gazette I No. 87/2016*

*Verordnung über Fachhochschul-Bakkalaureatsstudiengänge für die Ausbildung in den gehobenen medizinisch-technischen Diensten (FH-MTD-Ausbildungsverordnung – Ordinance on Training for Medical Technical Professions at Universities of Applied Science), Federal Law Gazette II No. 2/2006*

*Bundesgesetz über Fachhochschul-Studiengänge (Fachhochschul-Studiengesetz – University of Applied Sciences Studies Act), Federal Law Gazette No. 340/1993*
11.2. Medical-technical laboratory profession – biomedical analyst

Job description/field of activities:

Autonomous application of all laboratory methods on a doctor’s orders as required within the framework of medical examination, treatment and research, in particular clinico-chemical, haematological, immunohaematological, histological, cytological, microbiological, parasitological, mycological, serological and nuclear medical tests, as well as co-operation in tests in the field of electro-neurological and cardiopulmonary functional diagnostics.

Competence profile:

Biomedical analysts have acquired the following qualifications for exercising the medical-technical laboratory profession with sole responsibility:

- Technical-methodological competences for the autonomous performance of the biomedical analysis process. They have learnt to combine profession-specific knowledge and skills related to current biomedical analysis methods and techniques with knowledge from other relevant disciplines as a basis for their autonomous actions in order to apply them in particular in the fields of haematology, haemostaseology, histology, immunohaematology, immunology, clinical chemistry, microbiology, molecular biology, cell culturing and cytology in line with the state of the biomedical and technical-analytical art and co-operate in functional diagnostic examinations. Upon completion of their education, the graduates have developed professional ethics governing their actions and activities in a medical and societal context.

A biomedical analyst is able to:

- perform the biomedical analysis process as a part of the overall medical process on a doctor’s orders; the biomedical analysis process includes the work steps of pre-analytics, planning, performance of analyses and post-analytics (quality assurance, technical validation, documentation, communication of results and archiving),
- understand the requirements related to the analyses requested, assess whether the material available is suitable for the biomedical analyses requested and, if necessary, clarify with the person in charge relevant missing information or the need for supplying new samples,
- realise the limits of the autonomous performance of his/her profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- assess which data and parameters are required for identifying patients and samples,
- obtain the material for analyses in an autonomous and expert fashion and establish a relation to the patient based on trust in a professional dialogue,
- relate the knowledge acquired on the measurement process, evaluation, method-specific measurement values and calculation methods with the functionalities of current and new equipment technologies and apply that knowledge,
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- perform the tasks required for preparing samples, reagents and equipment in line with quality assurance criteria and taking account of influencing and disturbing factors,
- apply suitable steps and measures of laboratory analyses,
- organise the processing of samples in a way that is specific to the sample material and efficient in terms of laboratory logistics,
- perform autonomously the analyses on the examination material by means of the appropriate measurement, detection and evaluation procedures,
- assess and quantify cellular structures and structural changes in microscopy,
- recognise and respond adequately to technical and biological disturbing factors that are specific to the method used,
- meet the requirements of quality management and legal regulations related to occupational safety and health, radiation protection, environmental protection and hygiene,
- appropriately store the material to be analysed and the reagents,
- autonomously assess, technically validate, document, report and archive analysis results and, if applicable, present them in charts and statistical analyses,
- apply hygiene measures in an appropriate and adequate way and verify compliance by means of suitable test methods,
- apply the knowledge acquired also in research, science, industry or veterinary medicine,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- **Social communication competences and self-competences**, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A biomedical analyst is able to:

- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- **Scientific competences** allowing them to understand and plan research processes.

A biomedical analyst is able to:
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- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession,
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
- make scientific findings and phenomena usable for professional and scientific development.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming biomedical analysis qualification,
- From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, members of the medical-technical laboratory service are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:

Biomedizinische Analytikerin/Biomedizinischer Analytiker (biomedical analyst)

Education:

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:

- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor

Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.
The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

**Specialised training:**

Specialised training for:
- special tasks
- teaching tasks
- managerial tasks

**Legal basis:**

*Bundesgesetz über die Regelung der gehobenen medizinisch-technischen Dienste (MTD-Gesetz – Federal Act Regulating Medical Technical Professions), Federal Law Gazette No. 460/1992*

*Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegister-Gesetz – Federal Act on the Registration of Healthcare Professions), Federal Law Gazette I No. 87/2016*

*Verordnung über Fachhochschul-Bakkalaureatsstudiengänge für die Ausbildung in den gehobenen medizinisch-technischen Diensten (FH-MTD-Ausbildungsverordnung – Ordinance on Education and Training for Medical Technical Professions at Universities of Applied Science), Federal Law Gazette II No. 2/2006*

*Bundesgesetz über Fachhochschul-Studiengänge (Fachhochschul-Studiengesetz – University of Applied Sciences Studies Act), Federal Law Gazette No. 340/1993*
11.3. Radiological-technical profession – radiological technologist

Job description/field of activities:

On a doctor’s orders, autonomous application of all radiological-technical methods using ionising radiation, e.g. diagnostic radiology, radiotherapy, nuclear medicine and other imaging techniques such as sonography and nuclear magnetic resonance tomography, examination and treatment of patients as well as performance of medical research; furthermore, application of contrast media on a doctor’s orders and only in co-operation with doctors.

Competence profile:

Radiological technologists have acquired the following qualifications for exercising the radiological-technical profession with sole responsibility:

- Technical-methodological competences for the autonomous performance of radiological-technical examination and treatment methods: They have learnt to combine profession-specific knowledge and skills with medical knowledge and knowledge on medical information and communication technology as a basis for their autonomous actions in the fields of nuclear medicine, radiological diagnostics and intervention, tomography and radiotherapy and to perform autonomously tasks in the field of quality assurance, patient protection and radiation protection. Upon completion of their education, they have developed professional ethics governing their actions and activities in a medical and societal context.

A radiological technologist is able to:

- appraise the appropriateness of the requested radiological examination or treatment on the basis of their knowledge on indications and contraindications and, if necessary, contact the relevant doctor to obtain relevant medical information that is missing,
- realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- bed and position patients by means of clear and precise instructions and assistance taking account of the indication and the patients’ special personal needs and, if necessary, develop alternative patient-friendly positioning possibilities,
- apply examination and treatment methods in an expert fashion and operate the equipment in a technically correct way on the basis of knowledge about their structure and functioning,
- realise the requirements and limits of high-tech examination and treatment methods, select, substantiate and justify suitable parameters and act in line with the needs of the patient and the situation in order to obtain the best examination and treatment results possible,
- recognise typical pathologies in the course of examinations, realise their significance for the further examination procedure and, if necessary, clarify them with the relevant doctor,
analyse imaging or examination results and assess them in line with qualitative guidelines, identify and eliminate errors and their causes, explain product quality and, if applicable, suggest options for further radiological-technical measures,

- select, apply and operate examination or treatment materials in a technically correct way and in line with the indication and the patient’s needs,

- study the physical and mental condition of the patient before treatment and check his/her physiological parameters,

- autonomously post-process images and sequences and, if necessary, optimise them,

- document examination and treatment data as well as analyse and evaluate the results,

- recognise the relation between radiation energy, radiation dosage and their radiobiologic impact on the patient and ensure the least radiation exposure possible for an optimum image or examination,

- fulfil the function of a radiation protection officer and take the measures laid down in radiation protection legislation,

- implement radiation concepts, prepare radiation plans and accordingly carry out the therapy,

- establish the relationship between the patient’s bedding and positioning, the selection of imaging parameters, the pathophysiological correlate and the examination data recorded, identify deviations and, if necessary, optimise the relevant parameters,

- handle radioactive materials and take decontamination and disposal measures,

- meet the requirements of medical and medico-physical quality management and legal regulations related to occupational safety and health, radiation protection, environmental protection and hygiene,

- co-operate in the establishment, maintenance and further development of medical databases, data networks and their clinical-medical integration,

- apply the knowledge acquired also in research, science, industry or veterinary medicine,

- recognise life-threatening conditions and, if necessary, prepare and carry out emergency measures,

- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

**Social communication competences and self-competences**, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A radiological technologist is able to:

- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,

- justify his/her own decisions in a responsible way to external actors,

- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
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- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- **Scientific competences** allowing them to understand and plan research processes.

A radiological technologist is able to:

- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession;
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
- make scientific findings and phenomena usable for professional and scientific development.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming the radiological-technical qualifications,
- From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, radiological technologists are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:

*Radiologietechnologin/Radiologietechnologe* (radiological technologist)

Education:

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters
Admission requirements for UAS bachelor programmes:

- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor

*Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.*

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

**training:**

Specialised training for:

- special tasks
- teaching tasks
- managerial tasks

**Legal basis:**

11.4. Dietological and nutrition consulting profession – dietitian

Job description/field of activities:

Autonomous selection, design and calculation of special diets for persons who are ill or suspected to be ill on a doctor’s orders as well as guidance on and supervision of the preparation of the related meals, including the provision of advice to ill persons or their family members on the practical implementation of a doctor’s dietary instructions inside and outside of hospitals; selection, design and calculation of diets for healthy persons and groups or persons and groups subject to special physical stress (e.g. pregnancy, sports), including the provision of advice on nutrition to them without a doctor’s orders.

Competence profile:

Dietitians have acquired the following qualifications for exercising the dietological and nutrition consulting profession with sole responsibility:

- technical-methodological competences for the autonomous performance of the dietological process and autonomous activities in nutrition and catering management: They have learnt to combine dietological knowledge and skills with medical and nutrition physiological knowledge and with knowledge from other relevant disciplines in order to apply them in a targeted way in drawing up special diets as well as in providing advice and treatment for various diseases and conditions related, in particular, to metabolism, the gastro-intestinal tract and the uro-genital tract as well as oncological diseases and to provide nutritional advice and training to healthy persons in the framework of health promotion and prevention. Upon completion of their education, they have developed professional ethics governing their actions and activities in a medical and societal context.

A dietitian is able to:

- perform the dietological process as a part of the overall medical process on a doctor’s order; the dietological process comprises the work steps of nutrition-medical therapy ranging from nutrition case history, identification of the nutritional status, reporting on and assessing dietological findings as well as planning, implementation up to quality assurance, evaluation, documentation and reflection,
- identify the health problem of the patient, recognise the medical information relevant for nutrition medicine in the medical reports available and, if necessary, contact the relevant doctor to obtain relevant medical information that is missing,
- realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- define the need for dietological action and identify the nutritional status, if necessary, by means of anthropometric or other measurement methods,
- to prepare the dietological report and assessment on the basis of the disease and condition, the nutrition case history and the therapy-relevant data and to draw dietological conclusions,
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- prepare a dietological therapy concept in line with the doctor’s orders, define suitable treatment measures and plan the therapy units,
- implement the therapy concept in a process-oriented way, evaluate it continuously and, if necessary, adapt it,
- perform therapies in line with technical and scientific findings and experiences,
- discuss the therapy concept with the patient or his/her family members, adjust it to his/her needs as well as provide guidance and motivation for cooperation and self-monitoring,
- document the course of therapy as well as analyse and evaluate the results,
- in catering management, compose recipes and framework diets, including calculation of the nutritional value, based on the nutrition physiological importance of food groups and take into consideration the regional and individual nutrition behaviour as well as institutional and operational framework conditions,
- draw up and apply a therapy concept also for artificially fed patients,
- prepare nutrition information for individuals and groups of persons, perform dietological processes and provide nutrition counselling within the framework of health promotion and prevention,
- meet the requirements of quality management and legal regulations related to environmental protection, food and hygiene,
- apply the knowledge acquired also in research, science, industry or the hotel, restaurant and catering sector,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- Social communication competences and self-competences, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A dietitian is able to:
- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles;
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.
• **Scientific competences** allowing them to understand and plan research processes. A dietitian is able to:
  o retrieve information on recent scientific findings obtained at the national and international level,
  o formulate issues of relevance to research in the field specific to his/her profession;
  o select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
  o make scientific findings and phenomena usable for professional and scientific development.

**Professional qualifications:**

The profession may be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming the qualifications as dietologist,
- **From 1 January 2018:** registration on the healthcare profession register.

**Career:**

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, dietitians are entitled to work on a **self-employed** basis (**only effective until 31 December 2017**).

**Professional title:**

*Diätologin/Diätologe* (dietitian)

**Education:**

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:

- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor (UAS bachelor programme)

*Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.*
The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

**Specialised training:**

Specialised training for:
- special tasks
- teaching tasks
- managerial tasks

**Legal basis:**

*Bundesgesetz über die Regelung der gehobenen medizinisch-technischen Dienste (MTD-Gesetz – Federal Act Regulating Medical Technical Professions), Federal Law Gazette No. 460/1992*

*Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegister-Gesetz – Federal Act on the Registration of Healthcare Professions), Federal Law Gazette I No. 87/2016*

*Verordnung über Fachhochschul-Bakkalaureatsstudiengänge für die Ausbildung in den gehobenen medizinisch-technischen Diensten (FH-MTD-Ausbildungsverordnung – Ordinance on Education and Training for Medical Technical Professions at Universities of Applied Science), Federal Law Gazette II No. 2/2006*

*Bundesgesetz über Fachhochschul-Studiengänge (Fachhochschul-Studiengesetz – University of Applied Sciences Studies Act), Federal Law Gazette No. 340/1993*
11.5. Occupational therapy profession – occupational therapist

Job description/field of activities:

Autonomous treatment of ill and handicapped persons on a doctor’s orders by means of creative and craft activities, training on self-help and manufacture, application and instructions on the use of aids, including splints, for the purpose of injury prevention, therapy and rehabilitation; counselling and training activities without a doctor’s orders in the fields of ergonomy and general joint protection for healthy persons.

Competence profile:

Occupational therapists have acquired the following qualifications for exercising the occupational therapeutic profession with sole responsibility:

- Technical-methodological competences for the autonomous performance of occupational therapy: They have learnt to combine occupational-therapy knowledge and skills with medical knowledge and knowledge from other relevant disciplines as a basis for their autonomous occupational-therapy actions in order to apply them in particular in the fields of occupational medicine, including ergonomy and professional integration, geriatrics, hand surgery, internal medicine, including rheumatology, paediatrics, neurology, orthopaedics, physical medicine, psychiatry and traumatology. They master the work steps of occupational therapy that serve for maintaining, promoting, improving or recovering the personal ability to perform activities in the framework of health promotion, prevention, therapy and rehabilitation. Upon completion of their education, they have developed professional ethics governing their actions and activities in a medical and societal context.

An occupational therapist is able to:

- perform occupational therapy as a part of the overall medical process on a doctor’s orders; this includes the work steps of problem identification, planning, implementation and quality assurance, evaluation, documentation and reflection,
- identify the health problem and resources of the patient, recognise the information relevant for occupational therapy in the medical reports available and, if necessary, contact the relevant doctor or other persons responsible to obtain relevant information that is missing,
- realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- prepare an occupational-therapy report based on the results of the information obtained and guided by hypotheses verified by examination methods specific to the profession,
- identify biomechanical, motoric, sensory/perceptive, cognitive and psychosocial skills and competences of the patient,
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- identify the patient’s personal capacity to act in all spheres of life taking account of environmental factors with regard to the social, cultural, physical and institutional setting,
- perform activity analyses in the sense of linking requirement and ability analyses,
- prepare a therapy plan, define the objectives of occupational therapy and implement the therapy plan,
- perform therapies in line with technical and scientific findings and experiences,
- discuss the therapy plan with the patient or his/her family members, adjust it to individual needs and provide guidance and motivation for co-operation,
- review critically the course of intervention and adjust it to the patient,
- take account of the requirements of quality management,
- document the course of therapy as well as analyse and evaluate the results,
- perform the occupational-therapy process within the framework of health promotion and prevention and offer targeted measures designed to promote development and maintain health,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- Social communication competences and self-competences, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

An occupational therapist is able to:
- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- Scientific competences allowing them to understand and plan research processes.

An occupational therapist is able to:
- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession;
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
Professional qualifications:

The profession may be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming qualifications as occupational therapist.
- From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, occupational therapists are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:

Ergotherapeutin/Ergotherapeut (occupational therapist)

Education:

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:

- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor (UAS bachelor programme)

Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
Specialised training:

Specialised training for:
- special tasks
- teaching tasks
- managerial tasks

Legal basis:

*Bundesgesetz über die Regelung der gehobenen medizinisch-technischen Dienste (MTD-Gesetz – Federal Act Regulating Medical Technical Professions), Federal Law Gazette No. 460/1992*

*Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegistergesetz – Federal Act on the Registration of Healthcare Professions), Federal Law Gazette I No. 87/2016*

*Verordnung über Fachhochschul-Bakkalaureatsstudiengänge für die Ausbildung in den gehobenen medizinisch-technischen Diensten (FH-MTD-Ausbildungsverordnung – Ordinance on Education and Training for Medical Technical Professions at Universities of Applied Science), Federal Law Gazette II No. 2/2006*

*Bundesgesetz über Fachhochschul-Studiengänge (Fachhochschul-Studiengesetz – University of Applied Sciences Studies Act), Federal Law Gazette No. 340/1993*
11.6. Logopaedic, phoniatic and audiologic profession – speech therapist / logopedist

Job description/field of activities:

Autonomous logopedic assessment and treatment of language, speech, voice, swallowing and hearing disorders as well as audiometric examinations on a doctor’s or dental practitioner’s orders.

Competence profile:

Speech therapists/Logopedists have acquired the following qualifications for exercising the logopedic, phoniatic and audiologic profession with sole responsibility:

- **Technical-methodological competences** for the autonomous performance of logopedic therapy: They have learnt to combine logopedic knowledge and skills with medical knowledge and knowledge from other relevant disciplines about the development of language, speech, voice, hearing and about disorders and disabilities in the cranial, facial and oral area for autonomous logopedic activities in order to apply them in examinations and in treating language, speech, voice, hearing and swallowing disorders, in particular in the disciplines of audiology, surgery (ENT, oral and facial surgery as well as neurosurgery), geriatrics, otorhinolaryngology, internal medicine, intensive care, paediatrics, paediatric psychiatry, neurology, neuropaediatrics, neurorehabilitation, phoniatics, psychiatry and dentistry. They master the work steps of the logopedic process that serve for maintaining, promoting, improving, initiating or recovering the personal ability to communicate in the framework of health promotion, prevention, therapy and rehabilitation. Upon completion of their education, the graduates have developed professional ethics governing their actions and activities in a medical and societal context.

A logopedist is able to:

- perform the logopedic process as a part of the overall medical process on a doctor’s orders; this includes the work steps of problem identification, planning, implementation and quality assurance, evaluation, documentation and reflection,
- identify the health problem of the patient, recognise the logopedically and audiometrically relevant information in the medical reports available and, if necessary, contact the relevant doctor or other persons responsible to obtain relevant information that is missing,
- realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- prepare a logopedic report based on the medical diagnosis, the discussion of the logopedic case history and the results of the information obtained and guided by hypotheses verified by examination methods specific to the profession,
- identify the communication skills, disorders and disabilities of the patient through active listening and observation as well as a selection of suitable specific examination methods,
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- prepare a therapy plan, define therapy objectives and implement the therapy plan within the framework of the logopedic process,
- perform therapies in line with technical and scientific findings and experiences,
- discuss the therapy plan with the patient or his/her family members, adjust it to individual needs and provide guidance and motivation for co-operation,
- review critically the course of intervention and adjust it to the patient,
- take account of the requirements of quality management,
- document the course of therapy, draft a report on logopedic findings as well as analyse and evaluate the results,
- perform logopedic processes within the framework of health promotion and prevention and offer targeted measures designed to promote development and maintain health,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- Social communication competences and self-competences, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

A logopedist is able to:
- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- Scientific competences allowing them to understand and plan research processes.

A logopedist is able to:
- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession,
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
- make scientific findings and phenomena usable for professional and scientific development.
Professional qualifications:

The profession may be exercised by persons who meet the following requirements:
- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
- recognised certificate confirming the qualifications as logopedist,
- From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, logopedists are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:

Logopädin/Logopäde (logopedist/speech therapist)

Education:

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:
- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor (UAS bachelor programme)

Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Specialised training:

Specialised training for:
- special tasks
- teaching tasks
- managerial tasks
Legal basis:


_Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegister-Gesetz – Federal Act on the Registration of Healthcare Professions), Federal Law Gazette I No. 87/2016_

_Verordnung über Fachhochschul-Bakkalaureatsstudiengänge für die Ausbildung in den gehobenen medizinisch-technischen Diensten (FH-MTD-Ausbildungsverordnung – Ordinance on Training for Medical Technical Professions at Universities of Applied Science), Federal Law Gazette II No. 2/2006_

11.7. Orthoptistic profession – orthoptist

Job description/field of activities:

Autonomous performance of preventive measures as well as examination, assessment and treatment of vision impairments, squint, amblyopia and eye motility disorders on a doctor’s orders.

Competence profile:

Orthoptists have acquired the following qualifications for exercising the orthoptistic profession with sole responsibility:

- **Technical-methodological competences** for the autonomous performance of the orthoptistic process. They have learnt to combine orthoptic knowledge and skills with medical knowledge and knowledge from other relevant disciplines as a basis for their autonomous orthoptic actions in order to apply them in particular in the fields of paediatrics, neurology, neuro-ophthalmology, ophthalmology, orthoptics, optometry, pleoptics and strabology. They master the work steps of the orthoptic process in obtaining findings and assessing functional diseases of the eye and in the framework of therapy and rehabilitation for improving functional disorders of the visual system. Upon completion of their education, they have developed professional ethics governing their actions and activities in a medical and societal context.

An orthoptist is able to:

- perform the orthoptic process as a part of the overall medical process on a doctor’s orders; the orthoptic process includes the work steps of recording the orthoptic case history, providing information and advice, reporting on and assessing orthoptic findings, therapy implementation as well as quality assurance, evaluation, documentation and reflection,
- identify the health problem of the patient, recognise the orthoptically relevant information in the medical reports available and, if necessary, contact the relevant doctor or other persons responsible to obtain medically relevant information that is missing; realise the limits of the autonomous performance of their profession and identify relations to the applicable legal regulations,
- realise when other healthcare professions and other professions are competent and co-operate in a multi-professional team,
- apply orthoptic examination methods guided by hypotheses and perform orthoptic examination measures adapted to the patient in question in a technically correct way,
- obtain a general orthoptic status and, if necessary, an in-depth orthoptic status and document the examination data,
- derive an orthoptic diagnosis from the examination results,
- prepare a therapy plan, define therapy objectives, propose and apply suitable orthoptic, pleoptic and optic treatment methods and suggest and implement adaptation options or possibilities for coping with everyday life,
- perform therapies in line with technical and scientific findings and experiences,
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- discuss the therapy plan with the patient or his/her family members, adjust it to individual needs and provide guidance and motivation for co-operation,
- take account of the requirements of hygiene and quality management,
- document the course of therapy as well as analyse and evaluate the results,
- perform orthoptic processes within the framework of health promotion and prevention and offer targeted measures designed to promote development and maintain health,
- recognise life-threatening conditions and provide appropriate first aid,
- develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

- Social communication competences and self-competences, in particular communication skills, critical capacity, conflict resolution, empathy, role distance, frustration tolerance, self-determination capacity, self-reflection capacity, the ability to shape and co-determine processes, the ability to work in teams and professional self-perception for exercising their profession.

An orthoptist is able to:
- assess realistically his/her own capacity with regard to technical, organisational, co-ordinating and administrative professional requirements,
- justify his/her own decisions in a responsible way to external actors,
- apply communicative and organisational skills required for accomplishing complex interdisciplinary tasks,
- provide information and explanations in a professional way and establish a relation of trust to the patient or his/her family members,
- take account of cultural and regional needs, lifestyles and values,
- work in line with professional rules as well as economic and ecological principles,
- meet the requirements of life-long learning and further training obligations with a view to continuously staying abreast of new findings in medical science in order to ensure a high quality level in professional activities,
- contribute to the further development of the profession.

- Scientific competences allowing them to understand and plan research processes.

An orthoptist is able to:
- retrieve information on recent scientific findings obtained at the national and international level,
- formulate issues of relevance to research in the field specific to his/her profession,
- select and apply relevant scientific research methods and process the data obtained for finding answers to the issues raised,
- make scientific findings and phenomena usable for professional and scientific development.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:
- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- language skills required for exercising the profession,
• recognised certificate confirming qualifications as orthoptist,
• From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job description irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Upon notification of the district administrative authority, orthoptists are entitled to work on a self-employed basis (only effective until 31 December 2017).

Professional title:

Orthoptistin/Orthoptist (orthoptist)

Education:

Bachelor programme at a university of applied sciences (UAS)

Duration of education: 6 semesters

Admission requirements for UAS bachelor programmes:
• General university entrance qualifications or relevant professional qualifications,
• professional aptitude and medical fitness.

Completion of education: Bachelor examination/bachelor (UAS bachelor programme)

Note: Training programmes at academies for medical technical professions will be discontinued on 1 January 2019.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Specialised training:

Specialised training for:
• special tasks
• teaching tasks
• managerial tasks

Legal basis:

12. NURSING PROFESSIONS

12.1. Nursing / Nurse

Job profile/competences:

Nurses are responsible for the direct and indirect nursing of people of all age groups, families and population groups in mobile, out-patient, boarding-out and in-patient settings as well as at all levels of care (primary healthcare, specialised out-patient care and in-patient care). Their actions are driven by ethical, legal, intercultural, psychosocial and systemic perspectives and principles. On the basis of scientific findings, nurses contribute to promoting and maintaining health, supporting recovery processes, alleviating and coping with health impairments as well as maintaining the highest possible quality of living from a nursing perspective by means of health-promoting, preventive, curative, rehabilitative as well as palliative competences.

Within the framework of medical diagnostics and therapy, nurses perform the measures and tasks assigned to them by doctors.

In the context of interprofessional co-operation, nurses contribute to maintaining the continuity of care.

Nurses develop, organise and implement nursing strategies, concepts and programmes to strengthen health competence, especially in case of chronic diseases, in family health nursing, school health nursing as well as community- and population-oriented nursing.

Core competences in nursing:
The core competences of nurses comprise the autonomous identification of nursing needs as well as the assessment of the dependence of patients on care, diagnostics, planning, organisation, implementation, control and evaluation of all nursing measures (nursing process) in all care settings and at all care levels, the prevention, health promotion and health counselling within the framework of nursing and nursing research.

Within the framework of nursing, the core competences of nurses include in particular:

- overall responsibility for the nursing process,
- planning and performance of nursing interventions or measures,
- assistance in and promotion of activities of everyday life,
- observation and monitoring of the health status,
- theory- and concept-driven conduct of conversations and communication,
- provision of advice on health and nursing care as well as organisation and implementation of trainings,
- promotion of health competence, health promotion and prevention,
- preparation of nursing expert opinions,
- delegation, subdelegation and supervision in line with the level of complexity, stability and specialisation of the nursing situation,
- guidance and supervision of supporting staff as well as guidance, instruction and accompanying control of persons according to Articles 3a to 3d,
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- guidance, support and appraisal of trainees,
- ethical, evidence- and research-based actions, including knowledge management,
- further development of professional competence for action,
- co-operation in specialised research projects and implementation of specialised research results,
- application of complementary nursing methods,
- co-operation in quality and risk management,
- psychosocial support in health and nursing care.

Competences in emergencies:
Competences in emergencies include:
- Recognition and assessment of emergencies and taking of appropriate measures and autonomous performance of life-saving emergency measures if and as long as a doctor of medicine is not available; a doctor has to be called immediately. In particular, life-saving emergency measures include:
  - chest compressions and ventilation,
  - defibrillation by means of semi-automatic devices or devices in the semi-automatic mode, and
  - administration of oxygen.

Competences in medical diagnostics and therapy:
In the field of medical diagnostics and therapy, the competences of nurses cover the autonomous performance of medical-diagnostic and medical-therapeutic measures and activities on a doctor’s orders. In particular, competences in medical diagnostics and therapy include:
- administration of medicines, including cytostatic agents and contrast media,
- preparation and administration of injections and infusions,
- puncturing and taking of blood from capillaries, the peripheral venous system, arteria radialis and arteria dorsalis pedis as well as taking of blood from the central venous system via an existing vascular access device,
- placing and change of indwelling peripheral venous cannulas, including maintenance of a free passage, and, if appropriate, their removal.
- replacement of the dialysis solution within the framework of peritoneal dialysis,
- administration of whole blood and/or blood components, including bedside blood group verification,
- placing of transurethral catheters for urine drainage, instillation and irrigation for both sexes as well as residual urine determination by means of disposable catheters,
- measurement of residual urine volumes by means of non-invasive sonographic methods, including decision-making on and performance of single catheterisation,
- preparation of, assistance in and follow-up of endoscopic interventions.
- assistance tasks during surgical wound treatment,
- removal of drainages, sutures and wound staples as well as application and change of dressings and bandages,
- placing and removal of transnasal and transoral gastric tubes,
- administration of clysters, enemas and colonic irrigations,
- suctioning from the upper airways and the tracheostoma,
- change of suprapubic catheters and percutaneous gastric exchange systems,
• application of corsets, orthoses and motorised continuous passive motion devices with a predefined range of motion,
• operation of supply and discharge systems,
• performance of monitoring using medical monitoring devices, including their operation,
• implementation of standardised diagnostic programmes,
• performance of medical-therapeutical interventions (e.g. adjustment of insulin, pain and anticoagulant therapy), in particular in line with standard operating procedures (SOPs),
• provision of guidance and instructions to patients as well as persons to which individual medical tasks are assigned according to Article 51a or Article 50b of Ärztegesetz (Medical Practitioners Act) in line with a doctor's instructions,

Continued prescription of medical products:
In line with a doctor's instructions, nurses are authorised to extend the prescription of medical products prescribed by a doctor in the fields of food intake, incontinence care, mobilisation and walking aids, dressing materials, prophylactic devices and measurement instruments as well as ileostoma, jejunostoma, colostoma and urostoma until changes in the patient's situation require the discontinuation of prescription or the provision of feedback to the doctor or until the doctor changes the instructions. When the extension of prescriptions is rejected or discontinued by nurses, the prescribing doctor has to be informed.

Competences in a multiprofessional healthcare team:
The multiprofessional competences relate to the nursing expertise of nurses as a part of a multiprofessional healthcare team in co-operation with healthcare, social and other professions. The multiprofessional competences of nurses include nursing expertise especially with regard to:
• measures to prevent diseases and accidents as well as to maintain and promote health,
• admission and discharge management,
• health counselling,
• interprofessional networking,
• information transfer and knowledge management,
• co-ordination of the treatment and care process, including the assurance of the continuity of care,
• initial assessment of spontaneous patients by means of standardised triage and assessment systems,
• ethical decision-making,
• promotion of health competence.

Professional qualifications:
The profession may be exercised by persons who meet the following requirements:
• legal capacity,
• medical fitness necessary for fulfilling the duties of the profession,
• trustworthiness necessary for fulfilling the duties of the profession,
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- language skills required for exercising the profession,
- recognised certificate confirming qualifications as nurse,
- From 1 January 2018: registration on the healthcare profession register.

Career:

The profession is exercised by autonomously performing the activities described in the job profile and competences irrespective of the fact whether this is done on a self-employed basis or under an employment contract.

Nurses may also work as temporary agency workers in line with the provisions of the Arbeitskräfteüberlassungsgesetz (Temporary Agency Work Act) if no more than 15 percent of the nursing staff are temporary agency workers and if the quality and continuity of care is ensured with a view to the structure of the institution and the nursing and care needs of its patients, clients or people needing care.

Upon notification of the district administrative authority, nurses are entitled to work on a self-employed basis (only effective until 31 December 2017).

Competence profile:

nurses have acquired the following qualifications:

- Professional competence (comprising expertise and methodological competence as well as instrumentation and technical competence):
  Individual-related competence:
  A nurse:
  - is able to integrate key care concepts, models, theories, principles, processes, methods and techniques into health and nursing care in a situation- and individual-related way after a critical review,
  - has basic knowledge of nursing science and research as well as a science- and research-based framework for decision-making, action and argumentation in health and nursing care,
  - is able to use knowledge in health and nursing care, in particular from the fields of anatomy, physiology, pathology and other medical disciplines,
  - is able to rely on findings and methods of psychology, sociology and health sciences for activities of health promotion and prevention within the framework of health and nursing care,
  - understands health and nursing care as a human encounter and a social responsibility alike,
  - fulfils the paedagogical tasks of health and nursing care, in particular providing instructions, advice and training, on the basis of the findings and methods of paedagogical and educational science as well as social and human science,
  - is able to take professional action in line with the legal framework,
  - has basic knowledge of normative ethics and the ethics of healthcare professions and is able to recognise ethical conflicts in the professional field of action, addresses them and develops possible solutions in the nursing team or in a multiprofessional team,
o respects human and patient rights and advocates respect for them within the framework of health and nursing care,
o is able to build a relationship of trust with people of all ages and families, in particular to promote compliance,
o is able to recognise life-threatening conditions, provide first aid and take life-saving emergency measures until a doctor arrives,
o is able to observe the overall health of people of all ages and recognise deviations requiring clarification or intervention,
o can identify the state of development, health risk factors and indicators, problems, requirements, needs, development potentials and resources of people of all ages as well as of families taking account of their cultures and world views on the basis of the nursing anamnesis as well as suitable assessment instruments and use this information in the nursing diagnostic process,
o is familiar with the background, intention and applications of nursing classification systems and is able to apply selected systems,
o is able to define nursing objectives in co-operation with the person concerned or his/her reference system on the basis of nursing diagnoses and, building thereon, plan the necessary nursing interventions and strategies while taking account of the wishes of the person concerned and respecting his/her dignity,
o is able to select nursing interventions on the basis of overall nursing knowledge as well as the preferences and resources of the people taking account of physical, mental, religious, spiritual, sociocultural, gender and ethical aspects,
o orientates nursing interventions in a professional way to the criteria of effectiveness, well-being, safety, efficiency and ecology,
o is able to anticipate possible consequences of dysfunctions, impairments, diseases, diagnostics and therapies on people of all ages and work towards a compensation together with the persons concerned or their reference system,
o is able to recognise whether people of all ages need psychosocial support, can meet this need himself/herself within the framework of the nursing process or determine whether other health or social professions have to be called in,
o is able to evaluate nursing outcomes and give reasons for them by making reference to current scientific findings,
o is able to guide people to take over activities of self-care or nursing in full or in part in line with their needs and requirements,
o is able to identify the needs, risks and resources existing in physical and psychological respects, if necessary, taking account of sociocultural aspects and provide advice to people or families in a planned way with regard to the promotion, maintenance and restoration of health and disease prevention in the prevailing context,
o is able to support and assist persons concerned or their reference system in coping with and handling functional impairments, diseases, crises and during the process of dying,
o is able to recognise complex and problematic situations of nursing as such and cope with and reflect on them in a professional way, if necessary, together with other health and social professions,
o is able to identify and fulfil his/her documentation obligations in the field of activities concerned,
is able to document data and information relevant for nursing based on existing documentation systems and assess the quality of documentations in line with verifiable standards,

is able to organise nursing care in line with the principles of patient and process orientation and perform administrative tasks arising in this context,

is able to provide target-oriented and systematic guidance to trainees with different qualification levels in health and nursing care and evaluate the relevant learning outcomes,

is able to provide guidance to auxiliary nurses and social care professionals in taking over nursing activities or in assisting in basic care and to ensure supervision or accompanying control on the performance of these activities,

is able to assess whether individual nursing interventions can be delegated to lay carers on the basis of a comprehensive individual-specific assessment of the situation in line with the nursing process,

is able to train and instruct lay carers to perform individually defined nursing activities in a quality-assured way,

is able to develop a quality assurance system permitting the timely identification of circumstances that no longer permit nursing care by lay carers in co-operation with the person receiving care or his/her legal representative or the persons authorised by him/her to manage his/her affairs and the lay carer,

is able to perform accompanying control and the function and role of case and care manager when lay carers provide nursing services to persons needing care,

is able to recognise pathological changes and symptoms in people of all ages and interpret them with regard to their consequences for nursing on the basis of his/her knowledge of natural sciences and medicine,

is able to take observation and monitoring measures supporting diagnosis and therapy by means of standardised measurement methods, devices and tools and to document the results in a quality assured way,

has factual, methodological and rationale knowledge of the objectives, modes of action, implementation arrangements, hazards and complications of medical diagnostics and therapies for the performance of diagnostically or therapeutically relevant interventions and nursing techniques for persons of all ages,

masters the skills, techniques and strategies required for the performance of therapeutic and diagnostic measures on a doctor's orders,

is able to inform people or their reference system of the necessary diagnostic or therapeutic measures in an encouraging and strengthening way so as to allay or at least reduce their fear and insecurity,

is able to guide people to take over diagnostic or therapeutic measures in full or in part in line with their needs and requirements,

is familiar with the legally relevant regulations related to medical diagnostics and therapy as well as medical devices, derives recommendations for action from them and implements these in nursing practice,

is able to act in line with professional legislation in the field of activities with shared responsibility and take over medical activities on orders and bear responsibility for their performance,

is able to realize in a concrete situation whether he/she has the competence required for performing a doctor's orders and decides on taking over activities
based on the awareness of liability-related consequences, especially with regard
to negligence for taking on a task for which he/she is not qualified,

- is able to decide after an in-depth assessment of a concrete situation on the
  possibility of further delegating a doctor's order to authorised persons and
  supervises or controls the performance of the task delegated,

- uses a multidisciplinary and cross-professional and interdisciplinary approach to
  solve health problems,

- is able to take part in the interdisciplinary and interprofessional discourse and
dialogue, input aspects and suggestions relevant for nursing into preventive,
diagnostic, therapeutic and rehabilitative co-ordination processes with regard to
persons of all ages and take over domain-specific responsibility in this context,

- is able to recognise hazards and health risks at work, assess them and either take
measures to prevent accidents or diseases himself/herself or develop and assess
related measures and strategies in co-operation with experts,

- is able to motivate, provide guidance and advice to individuals, families and
groups to adopt lifestyles promoting health and preventing diseases,

- is able to co-operate in the assessment of measures and strategies promoting
health and preventing diseases on site or organise this assessment
himself/herself.

Organisational competence:
A nurse:

- is able to harness his/her basic knowledge of business administration and
organisation theory by identifying consequences for nursing work in the
relevant field of action,

- is able to provide information on control mechanisms and finance systems
related to nursing in the health care and social sector,

- is able to state reasons for the application of nursing-specific organisation
and work forms in different nursing settings or health care areas,

- is able to fulfil his/her task and role in an intraprofessional or
interprofessional team and co-operate with other professions in a co-
ordinated and continuous manner,

- is able to optimise work processes and process quality at the interfaces
existing between the relevant health care and functional areas and, in case of
interface problems, initiate the development and implementation of
problem-solving strategies with the aim of ensuring the continuity of care,

- is able to ensure a clear distribution of roles and functions in a
multiprofessional team against the backdrop of his/her basic knowledge of
disease, case and care management and actively contribute to planning and
shaping the care and treatment chain for persons of all ages,

- is able to align nursing care as a service provided in the health care and social
system in a team- and client-oriented way and in line with economic needs,

- is able to consider decisions to his/her best knowledge and belief in dilemma
situations resulting from conflicts between professional ethics, economic
efficiency and individuality,

- has basic knowledge of nursing-specific information and service
documentation systems so that he/she can familiarise himself/herself with
word processing, presentation, statistics or database programs used in
individual areas,
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- is familiar with the field of application as well as the principles, tools and methods of project management and is able to plan, implement and evaluate simple projects related to nursing,
- is able to interpret the structural, process and outcome quality of nursing and co-operate in quality assurance work in the relevant institution in a substantiating way,
- is able to contribute to making data available for statistical purposes, understand and logically interpret statistical data based on his/her basic knowledge of statistical data collection and analyses methods,
- is able to develop, arrange and perform professional activities, especially in the case of self-employment, in line with organisational and managerial principles.

**Society-related competence:**
A nurse:
- is able to understand the key structures and institutions of the Austrian health care and social security system and their interactions and identify the different roles and tasks of the actors of these systems,
- is able to recognise the information needs, problems, resources and needs for action with regard to the nursing needs as well as the health and social support of the population and identify possible solutions from the perspective of health and nursing care,
- is familiar with the potential range of tasks of nursing professionals especially in schools, childcare facilities, enterprises and communities and develops innovative concepts for application in these fields,
- is familiar with the range of tasks of health promotion and prevention,
- is able to perform nursing- and health-specific information and educational activities, using techniques of communication science, in a way adapted to the target groups,
- is able to input the perspective of nursing on health, dysfunctions or impairment, disease, dying or death into the sociopolitical discourse and participate or organise related events, actions, working groups, programmes and projects.

**Social communication competence and self-competence:**
A nurse:
- is able to build, maintain and end social relationships in a deliberate and reflected way in the professional context,
- has an approach to people characterised by empathy, appreciation and congruence,
- has intercultural competence in dealing with people from different cultures,
- is able to professionally organise the dialogue with the target groups of nursing and within intraprofessional and interprofessional teams on the basis of knowledge, competences and skills in interaction, communication and conduct of conversations,
- is able to participate in the intraprofessional and interprofessional exchange of information and knowledge as well as knowledge management of the relevant institution in a clear, understandable and target-oriented way,
- is versed in giving and receiving differentiated and constructive feedback,
o is able to recognise communication barriers and conflicts and initiate possible solutions and coping strategies,
o is able to perform professional information and communication tasks in a situation-specific way,
o is able to develop personally effective learning and working strategies based on different problem-solving, decision-making and creativity techniques,
o reflects on personal values and norms as well as behaviours and actions and is able to align attitudes and behaviours with the internationally recognised professional code of practice,
o is able to be a positive role model based on his/her behaviour,
o is able to reflect on professional and nursing situations on the basis of concepts and theories, assess them in a differentiated way and draw conclusions for future professional activities,
o is able to make autonomously informed decisions and to justify them responsibly to external actors,
o is able to take responsibility for personal decisions, actions and their consequences,
o is able to learn from personal experiences and meet the requirements of lifelong learning and professional further training obligations by continuously adjusting professional activities to findings of nursing, medical and social sciences,
o is able to act and react in a fast, secure and flexible way in routine situations,
o is able to assess the psychosocial requirements of fields of actions and deal with them in a constructive way,
o is able to recognise his/her own professional and personal possibilities and limitations and apply personally effective coping strategies under stress,
o has an integrative basic attitude and understanding and is able to think and act in a systemically networked and interdisciplinary way,
o is aware of his/her own role within the framework of professional development and is able to contribute actively to the further development of the profession.

• Scientific competence:
  A nurse:
o is able to research scientific findings in a national and international context, in particular for evidence-based reflection, evaluation and argumentation in health and nursing care,
o is able to formulate research questions and hypotheses concerning nursing,
o has basic knowledge of quantitative and qualitative nursing research and is able to understand and critically assess research on practice-relevant problems,
o is able to co-operate in research, apply research results and contribute to the implementation of best practices,
o is able to use scientific findings and methods in developing evidence-based interventions, standards, specifications, guidance and guidelines in health and nursing care as well as in the framework of research processes,
o is able to take part in scientific discourse and to understand and edit research reports.
Professional title:

*Diplomierte Gesundheits- und Krankenpflegerin/Diplomierter Gesundheits- und Krankenpfleger* (nurse)

Education:

- Bachelor programme at a university of applied sciences (UAS)
- School for nurses *(until 31 Dec. 2023)*

Duration of education (UAS bachelor programme): 3 years

Duration of education (school for nurses in general care – *until 31 Dec. 2023*):

- 3 years and 4,600 hours
- Short training course for assistant nurses: 2 years
- Short training course for medical NCOs: 1 year
- Short training course after specialised basic training in paediatric or psychiatric nursing: 1 year
- Short training course for midwives: 2 years
- Short training course for persons, who successfully completed studies of human medicine: 1 year and 6 months

Admission requirements for UAS bachelor programmes:

- General university entrance qualifications or relevant professional qualifications,
- professional aptitude and medical fitness.

Admission requirements for schools for nurses *(until 31 Dec. 2023)*:

- medical fitness,
- trustworthiness,
- successful completion of ten school grades,
- admission test or interview.

A board decides on admission.

Completion of education:

- Bachelor examination/bachelor (UAS bachelor programme),

Holders of a diploma in nursing awarded by a school for nurses have access to the VET diploma examination according to the *Bundesgesetz über die Berufsreifeprüfung* (Federal Act on the VET Diploma Examination), Federal Law Gazette I No. 68/1997.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
Legal basis:

Verordnung über die Ausbildung im gehobenen Dienst für Gesundheits- und Krankenpflege (Gesundheits- und Krankenpflege-Ausbildungsverordnung – Ordinance on Training in Health Care and Nursing), Federal Law Gazette II No. 179/1999
Verordnung betreffend die Qualifikationsnachweise in der allgemeinen Gesundheits- und Krankenpflege aus dem Europäischen Wirtschaftsraum und der Schweizerischen Eidgenossenschaft (Gesundheits- und Krankenpflege-EWR-Qualifikationsnachweisverordnung 2008 – Ordinance on EEA Health Care and Nursing Qualifications), Federal Law Gazette II No. 193
12.1.2 Specialisation

Setting- and target group-specific specialisations are:

- Paediatric nursing
- Psychiatric nursing
- Intensive care
- Intensive paediatric care
- Anaesthetic nursing
- Renal nursing
- Surgical nursing
- Hospital hygiene
- Wound management and stoma care
- Hospice and palliative care
- Psychogeriatric nursing

Teaching tasks include in particular:

- Teaching in the field of health and nursing care
- Management of schools for nurses
- Management of specialised training courses
- Management of auxiliary nursing courses

Managerial tasks include in particular:

- Management of the nursing service at a hospital
- Management of the nursing service at a nursing care institution

Conditions for performing teaching and managerial tasks:

- Two years of lawful full-term work in nursing or for an appropriately longer period in case of part-time work,
- Successful completion of the relevant specialised training or tertiary education recognised for teaching or managerial tasks.

Work in setting- and target group-specific specialisations going beyond the competences listed under 12.1.1 requires the successful completion of relevant specialised training or specialisations at level 2 (extension of competences) within five years of taking up activities.

Field of activities in specialisations:

- **Paediatric nursing:**
  Nursing and care of children and adolescents with physical or mental diseases; care and feeding of newborns and infants; nursing and care of disabled, seriously ill or dying children and adolescents; nursing contributions to health promotion and disease prevention in children and adolescents; nursing contributions to primary health care and the rehabilitation of children and adolescents.

- **Psychiatric nursing:**
  Observation, care and nursing of persons with acute or chronic mental disorders, including institutionalised persons, persons suffering from addictions, mentally ill
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criminals (Article 21 of the Penal Code (Strafgesetzbuch)) and persons with intellectual deficiencies, as well as assisting in medical measures in in-patient and out-patient departments, boarding-out, extramural and complementary settings; observation, care and nursing of people with neurological diseases and the resulting accompanying illnesses; working with people suffering from mental disorders and neurological diseases; conducting talks with people suffering from mental disorders and neurological diseases and their family members; psycho-social care; psychiatric and neurological rehabilitation and follow-up care; transitional care.

- **Intensive care:**
  Observation, care, monitoring and nursing of seriously ill patients as well as co-operation in anaesthesia and renal replacement therapy; co-operation in reanimation and shock therapy, co-operation in all anaesthetic procedures, monitoring and care of seriously ill and respiratory insufficient patients using invasive and non-invasive methods, co-operation in controlling and maintaining equipment functional (monitoring, artificial respiration, catheters and related infusions systems), taking blood from catheters in place, e.g. arterial catheters, placing gastric and duodenal tubes as well as temperature probes, performing and monitoring elimination procedures with catheters in place, co-operation in implementing and monitoring extracorporeal circulation, co-operation in pain therapy, in particular during renal replacement therapy and detoxication, excluding placing the required catheters, etc.

- **Intensive paediatric care:**
  Intensive care of preterm infants, newborns, children and adolescents; observation, care, monitoring and nursing of seriously ill patients as well as co-operation in anaesthesia and renal replacement therapy; co-operation in reanimation and shock therapy, co-operation in all anaesthetic procedures, monitoring and care of seriously ill and respiratory insufficient patients using invasive and non-invasive methods, co-operation in controlling and maintaining equipment functional (monitoring, artificial respiration, catheters and related infusions systems), taking blood from catheters in place, e.g. arterial catheters, placing gastric and duodenal tubes as well as temperature probes, performing and monitoring elimination procedures with catheters in place, co-operation in implementing and monitoring extracorporeal circulation, co-operation in pain therapy, in particular during renal replacement therapy and detoxication, excluding placing the required catheters, etc.

- **Anaesthetic nursing:**
  Observation, care, monitoring and nursing of patients before, during and after anaesthesia as well as co-operation in anaesthesia; co-operation in reanimation and shock therapy, co-operation in all anaesthetic procedures, monitoring and care of seriously ill and respiratory insufficient patients using invasive and non-invasive methods, co-operation in controlling and maintaining equipment functional (monitoring, artificial respiration, catheters and related infusions systems), taking blood from catheters in place, e.g. arterial catheters, placing gastric and duodenal tubes as well as temperature probes, performing and monitoring elimination procedures with catheters in place, co-operation in implementing and monitoring extracorporeal circulation, co-operation in pain therapy, in particular during renal replacement therapy and detoxication, excluding placing the required catheters, etc.
• **Renal nursing:**
  Observation, care, monitoring, nursing, counselling and training of patients with chronic renal insufficiency before, during and after renal replacement therapy as well as preparation and follow-up care for kidney transplantation; co-operation in reanimation and shock therapy, co-operation in all anaesthetic procedures, monitoring and care of seriously ill and respiratory insufficient patients using invasive and non-invasive methods, co-operation in controlling and maintaining equipment functional (monitoring, artificial respiration, catheters and related infusions systems), taking blood from catheters in place, e.g. arterial catheters, placing gastric and duodenal tubes as well as temperature probes, performing and monitoring elimination procedures with catheters in place, co-operation in implementing and monitoring extracorporeal circulation, co-operation in pain therapy, in particular during renal replacement therapy and detoxication, excluding placing the required catheters, etc.

• **Surgical nursing:**
  Preparation of, co-operation in and follow-up of surgical interventions; instrumentation in all surgical disciplines, co-operation in planning and organising surgical procedures, disinfection, sterilisation and maintenance of the instruments needed during surgery, pre- and post-surgery care of patients in the surgery ward, etc.

• **Hospital hygiene:**
  Co-operation in all measures taken to detect, prevent and combat nosocomial infections and to maintain health; identification of the hygiene status in nursing, diagnostic, therapeutic and supply-related areas, co-operation in drawing up hygiene plans, hygiene standards and hygiene guidelines, co-operation in the procurement of disinfectants as well as in the procurement and preparation of products as far as these may give rise to infection risks, provision of advice to staff in all matters that are important for maintaining hygiene, co-operation in planning new buildings, annexes and modifications to existing buildings, etc.

• **Wound management and stoma care:**
  Wound management: all the assigned medical and originally nursing measures and interventions that serve to prevent the formation of chronic wounds, recognise a wound, speed up the wound healing process, avoid relapses and improve the quality of living as well as the self-competence and health competence of patients.
  Stoma care and counselling: in addition to wound management, the provision of individual care of patients with stoma, incontinence conditions, fistulas and secondary healing wounds.

• **Hospice and palliative care:**
  Nursing and support of people with progressive, incurable and/or life-threatening diseases and dying people as well as their family members and other close persons against the background of a comprehensive biopsychosocial understanding of disease while respecting the right of self-determination and taking account of the patients' volition with the aim of improving the quality of living.
Psychogeriatric nursing:
Nursing of elderly and very old persons suffering, in particular, from dementia, delirium, depression, anxiety, addiction and suicidality with the aim of preserving and promoting the mental and physical capabilities, the personality and identity of the patients and their social relations as long as possible with nursing family members and other close persons having to be involved and strengthened in their care competence.

Field of activities in teaching and management:

Teaching tasks:
- Teaching in the field of nursing care: Planning, implementing and evaluating theoretical and practical instruction at schools for nurses, auxiliary nurses, other courses providing training on health and nursing care as well as within the framework of further and specialised education and training; definition of the curriculum and syllabus, planning, preparation, follow-up and evaluation of training in technical, methodological and didactic terms, teaching of relevant subjects, preparation, implementation and evaluation of exams, provision of pedagogical support to the students, etc.
- Management of schools for nurses, specialised training courses and courses for assistant nurses: technical, pedagogical and organisational management and supervision within the framework of theoretical and practical training; planning, organisation, co-ordination and supervision of theoretical and practical training in its entirety, quality assurance for training in the individual subjects with regard to contents and pedagogical aspects, selection of institutions where practical instruction takes place, quality control and assurance of practical training, selection of teachers and experts, organisation, co-ordination and co-operation in the admission of students to a school for nurses, recognition of exams and traineeships, organisation, co-ordination and co-operation in exams to be taken before an examination commission, etc.

Managerial tasks:
Management of the nursing service at a hospital and management of the nursing service at a nursing care institution; responsibility for the quality of care and for the organisation of nursing activities throughout the institution; supervision, assurance and improvement of the quality of nursing care and the organisation of nursing care, management and deployment of nursing staff, organisation of material resources and supervision of their use in the field of nursing care, co-operation with other institutions, organisational units and professions, etc.

Professional title:

Diplomierte Gesundheits- und Krankenpflegerin/Diplomierter Gesundheits- und Krankenpfleger (nurse)
(Kinder- und Jugendlichenpflege) (paediatric nursing)
(Psychiatrische Gesundheits- und Krankenpflege) (psychiatric nursing)
(Intensivpflege) (intensive care)
(Kinderintensivpflege) (intensive paediatric care)
(Anästhesiepflege) (anaesthetic nursing)
Education:

Mandatory specialised training and specialisation courses have to be completed to have the right to work in specialties of nursing:

- Specialised training/specialisation in paediatric nursing: 1 year/1,600 hours
- Specialised training/specialisation in psychiatric nursing: 1 year/1,600 hours
- Specialised training/specialisation in intensive care: 8 months/1200 hours
- Specialised training/specialisation in intensive paediatric care: 7 months/1000 hours
- Specialised training/specialisation in anaesthetic nursing: 7 months/1000 hours
- Specialised training/specialisation in renal nursing: 7 months/1,000 hours
- Specialised training/specialisation in surgical nursing: 7 months/1000 hours
- Specialised training/specialisation in hospital hygiene: 6 months/800 hours
- Specialised training/specialisation in teaching tasks: 1 year/1,600 hours
- Specialised training/specialisation in managerial tasks: 1 year/1,600 hours
- Specialisation in wound management and stoma care: 90 ECTS credits
- Specialisation in hospice and palliative care: 90 ECTS credits
- Specialisation in psychogeriatric nursing: 90 ECTS credits
- Recognised tertiary education for teaching tasks
- Recognised tertiary education for managerial tasks

Requirements for admission to specialised training courses/specialities:

- Qualification in nursing care/as nurse

Completion of specialised education/speciality:
Written thesis, final exam before an examination commission/diploma

Up to 31 Dec. 2017 education in paediatric nursing and psychiatric nursing may also be obtained in a 3-year special basic training course at a school for paediatric nursing and a school for psychiatric nursing, respectively.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.
Legal basis:

*Bundesgesetz über Gesundheits- und Krankenpflegeberufe (Gesundheits- und Krankenpflegegesetz – Health Care and Nursing Act), Federal Law Gazette I No. 108/1997*

*Verordnung über Sonderausbildungen für Spezialaufgaben in der Gesundheits- und Krankenpflege (Gesundheits- und Krankenpflege-Spezialaufgaben-Verordnung – Ordinance on Special Tasks in Health Care and Nursing), Federal Law Gazette II No. 452/2005*

*Verordnung über Sonderausbildungen für Lehraufgaben und für Führungsaufgaben in der Gesundheits- und Krankenpflege (Gesundheits- und Krankenpflege-Lehr- und Führungsaufgaben-Verordnung – Ordinance on Teaching and Managerial Tasks in Health Care and Nursing), Federal Law Gazette II No. 453/2005*
12.1.3 Further training

To deepen and broaden the knowledge and skills acquired in training courses, nurses may take part in the following optional further training courses (minimum duration: 4 weeks / 160 hours):

- Apheresis nursing
- Basal stimulation in nursing
- Cardiac nursing
- Caregiver counselling
- Case and care management
- Complementary care – aromatic treatments
- Complementary care – ayurveda
- Complementary care – paediatric tuina
- Complementary care – therapeutic touch
- Continence and stoma counselling
- Culture- and gender-sensitive nursing
- Diabetes counselling
- Ethics in nursing
- Family health nursing
- Forensics in nursing
- Gerontological nursing
- Handling of sterile supplies
- Home nursing
- Home nursing of children and adolescents
- Kinaesthetics
- Lower and middle management in nursing
- Nursing and upbringing in paediatric psychiatry
- Nursing in crisis situations
- Nursing in the context of endoscopic interventions
- Nursing in the context of medically assisted reproduction
- Nursing in the context of special paediatric diseases
- Nursing in the context of substance and non-substance based dependence syndrome
- Nursing of mechanically ventilated patients
- Nursing of chronically ill patients
- Nursing of disabled persons
- Nursing of patients in a vegetative state
- Nursing of patients with dementia
- Occupational medicine assistance
- Oncology nursing
- Pain management
- Palliative nursing
- Preventive health care
- Practice guidance
- Public health
- Quality management
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- Rehabilitative nursing
- Transitional care
- Validation
- Workplace health promotion
- Wound management
- etc.

Recommendations of the Federal Minister for Health and Women's Affairs on the contents and scope of further training in the fields listed below are published on the website of the Federal Ministry of Health and Women's Affairs at www.bmgf.gv.at:

- Apheresis nursing
- Complementary care – aromatic treatments
- Complementary care – ayurveda
- Complementary care – paediatric tuina
- Continence and stoma counselling
- Lower and middle management in nursing
- Nursing and upbringing in paediatric psychiatry
- Nursing of children and adolescents
- Oncology nursing
- Workplace health promotion

Requirements for admission to further training courses:
Qualifications in nursing care

Completion of further training:
Final exam/certificate

Legal basis:

Verordnung über Weiterbildungen für Gesundheits- und Krankenpflegeberufe (Gesundheits- und Krankenpflege-Weiterbildungsverordnung – Ordinance on Further Training in Health Care and Nursing), Federal Law Gazette I No. 453/2006*
12.2. Nursing assistance professions

Nursing assistance professions:

- Nursing assistance (level 1)
- Nursing assistance (level 2)

Professional profile:

Nursing assistance professionals are responsible for performing the tasks and activities that are assigned to them for people of all age groups in mobile, out-patient, boarding-out and in-patient settings and in diverse nursing and treatment situations at all care levels after an evaluation by nurses. Within the framework of medical diagnostics and therapy, nursing assistance professionals take the measures assigned to them by doctors or nurses.

Professional qualifications:

Nursing assistant professions may only be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming qualifications in the relevant nursing assistant profession,
- From 1 January 2018: registration on the healthcare profession register.

Career:

As an employee of:

- a hospital,
- other establishments under medical or nursing management or supervision that specialise in the prevention, diagnosis or treatment of diseases or in follow-up care, care of disabled persons, nursing of persons needing care or in collecting blood or blood components or that offer other health and social services,
- doctors of medicine,
- group practices,
- nurses working on a self-employed basis,
- institutions or authorities offering home nursing.

Members of nursing assistance professions may also work as temporary agency workers in line with the provisions of the Arbeitskräfteüberlassungsgesetz (Temporary Agency Work Act) if no more than 15 percent of the nursing staff are temporary agency workers and if the quality and continuity of care is ensured with a view to the structure of the institution and the nursing and care needs of its patients, clients or people needing care.
Legal basis:

*Bundesgesetz über Gesundheits- und Krankenpflegeberufe (Gesundheits- und Krankenpflegegesetz – Health Care and Nursing Act), Federal Law Gazette I No. 108/1997*

*Bundesgesetz über die Registrierung von Gesundheitsberufen (Gesundheitsberuferegistergesetz – Federal Act on the Registration of Health Care Professions), Federal Law Gazette I No. 87/2016*

*Verordnung über Ausbildung und Qualifikationsprofile der Pflegeassistenzberufe (Pflegeassistenzberufe-Ausbildungsverordnung – Ordinance on Education and Training for Nursing Assistance Professions), Federal Law Gazette II No. 301/2016*
12.2.1 Nursing assistance (level 1) – nursing assistant (level 1)

**Field of activities:**

**Nursing measures:**
- Co-operation in nursing assessments,
- monitoring of the health status,
- performance of nursing tasks assigned to nursing assistants in line with their qualification profile by nurses,
- information, communication and assistance,
- co-operation in practical nursing assistance training.

Nursing measures may only be performed on the orders of and supervision by nurses.

**Activities in emergencies:**
- Recognition and assessment of emergencies and taking of appropriate measures and
- autonomous performance of life-saving emergency procedures if and as long as there is no doctor available, in particular
  - heart compressions and ventilation using simple respiration devices,
  - defibrillation by means of semi-automatic devices or devices in the semi-automatic mode,
  - administration of oxygen.

A doctor of medicine has to be called immediately.

**Co-operation in diagnostics and therapy:**
- Administration of medicines to be administered locally, transdermally as well as via the gastrointestinal and/or respiratory tract,
- administration of subcutaneous injections of insulin and anti-coagulants,
- standardised testing of blood, urine and stools as well as taking of blood from capillaries for point-of-care testing and performance of such tests,
- taking of blood from veins, excluding on children,
- administration of micro and single enemas,
- performance of simple wound care, including the application of dressings, compresses and bandages,
- tube feeding through an existing gastric tube,
- suctioning from the upper airways and the tracheostoma in stable situations of care,
- recording and monitoring of basic medical data (pulse rate, blood pressure, respiration, temperature, consciousness level, weight, height, excrements),
- simple measures of thermotherapy, cryotherapy and light therapy.

The tasks may only be performed on a case-by-case basis under a written order by a doctor of medicine and under the supervision of doctors or nurses or doctors.

**Qualification profile:**

Within the framework of their education, nursing assistants have to acquire the following competences:
**Principles of professional nursing:**

- acts in line with nursing and/or medical instructions and under supervision in all competence areas and is aware of the responsibility for accepting and taking over tasks,
- takes responsibility for his/her actions assigned by nurses or doctors,
- realises the limits of his/her own ability to act and is ready to reflect on them and consult relevant competent persons,
- is familiar with the legal framework, in particular professional legislation and organisational requirements, acts accordingly and is aware of the consequences of non-compliance,
- is familiar with the ICN Code of Ethics for Nurses, respects fundamental ethical principles/rules and integrates them into day-to-day work,
- recognises, supports and promotes the right to self-determination of persons needing care, their family members and other close persons,
- recognises ethical dilemmas and conflict situations and discusses them with superiors,
- recognises fundamental principles of health promotion and prevention as guidance for action,
- is aware of the importance of his/her own psychosocial health with a view to related burdens and resources and acts accordingly,
- recognises the need for co-operation across teams and professions and acts accordingly,
- recognises the need for co-operation across teams and professions and acts accordingly,
- treats people without prejudice, with empathy and appreciation and respects their fundamental rights.

**Nursing process:**

- co-operates in the collection of defined data of relevance to nursing (e.g. pressure ulcers, falls, pain, nutrition) within the framework of the application of standardised tools for assessing nursing care and/or risk scales,
- passes on (nursing-)relevant information on life activities, habits, sensory perceptions, participation, family situation, biography and pharmaceutical reactions to the persons in charge,
- supports nurses in the planning of nursing care by providing information and assessments on the persons to be nursed and their social environment,
- co-operates in continuous observation and monitoring,
- recognises changes in the course of nursing.

**Relationship management and communication:**

- responds to people and reaches out to them with empathy, appreciation and congruence, in particular in line with their age, development, social and cultural background,
- applies general basic principles of communication in a reflected manner,
- initiates and ends relationships and communication by applying general rules of communication,
- is familiar with theory- and concept-driven ways of communication,
- provides information in a target group-specific way and checks the information contents registered by the recipient,
- manages the closeness/distance relationship in a professionally adequate way,
- recognises changes in the care situation perceived as a crisis,
• realises the need of relief, de-escalation, conflict and complaint discussions, takes
  initial measures, informs superiors and requests support from competent persons.

**Nursing interventions:**
• monitors the health status in line with instructions,
• recognises environment-related hazards to health (e.g. domestic violence, violence
  against women and children, dangerous environment),
• performs assigned nursing measures in the field of life activities as well as
  psychosocial support in everyday life and in arranging the environment and is able to
  recognise needs (influencing factors, situational sensitivities),
• supports and promotes the physical, mental, psychological and social resources of
  different target groups and recognises changes,
• applies defined principles, techniques, concepts (e.g. kinaesthetics, basal stimulation)
  and mobilisation aids within the framework of mobilisation,
• brings patients into preventive positions by means of subject-specific standardised
  techniques, concepts and aids and monitors their effect,
• carries out assigned complementary nursing measures,
• carries out standardised nursing measures within the framework of preoperative
  preparation,
• performs standardised nursing tasks, including nose care in case of existing nasal
  gastric tubes and nasal cannulas in line with instructions and recognises changes,
• carries out standardised preventive measures and recognises the need for
  adjustments,
• co-operates in strengthening the health competence of different target groups by
  providing adequate information,
• instructs patients as well as nursing family members and other close persons on how
  to perform autonomously nursing tasks in the field of life activities (basic
  techniques),
• integrates nursing family members and other close persons into the nursing
  measures assigned in a situational manner and recognises the need for support and
  relief as well as changes,
• implements the principles of defined concepts related to self-care
  requirements/skills for coping in everyday life (e.g. concepts related to perception
  and the body, behavioural concepts, concepts for improving self-competence) and
  observes influencing factors and reactions.

**Co-operation in medical-diagnostic and medical-therapeutic tasks (including emergencies):**
• recognises emergencies and life-threatening conditions and takes appropriate
  emergency measures,
• performs standardised tests of blood, urine and stools and takes blood from
  capillaries for point-of-care testing and carries out such tests,
• prepares medicines to be administered locally, transdermally as well as via the
  gastrointestinal and/or respiratory tract, dispenses and administers them in stable
  situations of care, recognises and reports observable effects and reactions,
• prepares subcutaneous injections of insulin and anti-coagulants and administers
  them according to instructions,
• prepares and performs the taking of blood from peripheral veins, excluding on
  children,
• records and monitors basic medical data, in particular pulse rate, blood pressure, respiration, temperature, consciousness level, weight, height, excrements, recognises deviations from normal values and acts adequately,
• performs simple wound care, applies support dressings/stockings, compresses as well as bandages and recognises changes requiring consultations,
• administers micro and single enemas and ensures the monitoring of success,
• checks the correct positioning of gastric tubes and performs tube feeding through existing gastric tubes,
• suctions secretions from the upper airways and the tracheostoma in stable situations of care and, if necessary, takes required immediate measures,
• performs simple measures of thermotherapy, cryotherapy and light therapy (e.g. wraps, poultices, light, cool packs) and monitors their effectiveness,
• instructs patients and nursing family members and other close persons on how to use selected medical products that are easy to handle,
• brings patients into therapeutic positions and monitors their effect.

Co-operation, co-ordination and organisation:
• accepts orders for assigned medical and nursing measures and rejects those going beyond his/her own training level and competences,
• takes responsibility for the performance of tasks in line with the responsibility for accepting and taking over tasks,
• provides appropriate feedback on tasks taken over and performed,
• works in the interprofessional/multiprofessional team in line with the job profile and role definition as well as in compliance with formal and informal standards,
• aligns the perception and performance of his/her professional role with the purpose and objective of the organisation,
• co-operates in interface management to the extent defined,
• inputs the practical clinical know-how acquired into the interprofessional discourse,
• interacts in regard of the different competence areas of various health and social (care) professions,
• addresses evident problems/conflicts/potentials for improvements in interprofessional co-operation,
• recognises and minimises hazard potentials in the immediate working environment and applies measures to protect himself/herself and others,
• is aware of the consequences, in particular health implications, of non-compliance with legal and organisational requirements (Medizinproduktgesetz – Medical Device Act, fire protection, radiation protection, etc.),
• minimises physical, mental and social stress by applying the basic principles of relevant concepts (e.g. kinaesthetics, validation, stress management) and strategies,
• integrates hygiene measures into everyday work in line with the setting in question, being aware of their importance and consequences,
• is familiar with routines and standards for handling physical and psychological attacks or violence, takes adequate measures in line with the situation in questions and informs the superior,
• co-operates in the organisation of necessary medical and nursing consumables as well as medicines.
Development and assurance of quality:
- is able to critically reflect and raises questions,
- works in line with instructions and is aware of the importance of co-operation in quality and risk management,
- is aware of the impact of professional activities on the direct environment and aligns them accordingly,
- is aware of the social significance of nursing care and addresses issues of relevance for the profession as far as possible,
- takes responsibility for his/her own professional and personal development through further and continuing training to improve the quality of nursing.

Professional title:

Pflegeassistentin/Pflegeassistent (nursing assistant level 1)

Education:

Education institution:
School for nurses or nursing assistance course

Duration of education:
- 1 year / 1,600 hours
- short training course for persons who successfully completed studies of human medicine or dental medicine: 680 hours

Requirements for admission to training:
- medical fitness,
- trustworthiness,
- command of the German language,
- successful completion of the ninth school grade or passed basic education exam,
- admission interview and standardised admission procedure.

The headmaster/headmistress or course supervisor decides on admission.

Completion of education:
Final exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
12.2.2 Nursing assistance (level 2) – nursing assistant (level 2)

Field of activities:

Nursing measures:
Autonomous performance of the nursing tasks of nursing assistance (level 1, see 12.2.1) as well as the provision of guidance and instructions to trainees in nursing assistance professions in line with the orders of nurses

Activities in emergencies:
See “Nursing assistance (level 1)” (12.2.1)

Co-operation in diagnostics and therapy:
Autonomous performance of the tasks of nursing assistance (level 1, see registered 12.2.1) as well as the following further activities within the framework of co-operation in diagnostics and therapy ordered by a doctor in writing on a case-by-case basis:

- performance of standardised diagnostic programmes, such as ECG, EEG, BIA, pulmonary function test,
- placing and removal of transnasal and transoral gastric tubes,
- placing and removal of transurethral catheters for female patients, excluding children,
- disconnection and reconnection of ongoing infusions, excluding cytostatic agents and transfusions of whole blood and/or blood components, via an existing peripheral venous access device, maintenance of a free passage and, if appropriate, removal of the peripheral venous device,
- application of corsets, orthoses and motorised continuous passive motion devices with predefined settings.

Qualification profile:
Within the framework of their education, nursing assistants (level 2) have to acquire the following competences:

Principles of professional nursing:
- acts in line with nursing and/or medical instructions in all competence areas and is aware of the responsibility for accepting and taking over tasks,
- takes responsibility for the implementation, assessment and conclusions of tasks assigned by nurses or doctors,
- realises the limits of his/her own ability to act and is ready to reflect on them and consult relevant competent persons,
- is familiar with the legal framework, in particular professional legislation and organisational requirements, acts accordingly and is aware of the consequences of non-compliance,
- is familiar with the ICN Code of Ethics for Nurses, respects fundamental ethical principles/rules and integrates them into day-to-day work,
- reflects on his/her own values and standards against the background of the ICN Code of Ethics for Nurses,
recognises, supports and promotes the right to self-determination of persons needing care, their family members and other close persons,
recognises ethical dilemmas and conflict situations, discusses them with superiors and provides input to ethical advisory processes,
takes a systemic view of health and disease and recognises health-promoting and/or health-inhibiting factors,
integrates fundamental principles of health promotion and prevention into day-to-day work (e.g. empowerment, salutogenesis, orientation to living conditions, behavioural measures, measures related to the social context, participation),
is aware of the importance of his/her own psychosocial health with a view to related burdens and resources and acts accordingly,
recognises the need for co-operation across teams and professions and acts accordingly,
treats people without prejudice, with empathy and appreciation and respects their fundamental rights,
critically reflects on his/her own culture, values and prejudices and respects other attitudes,
recognises the importance of spiritual, emotional, religious, social and cultural needs, appropriately responds to them and, if necessary, informs persons needing care, their family members and other close persons about rights and obligations directly related to professional activities,
shows sensitivity for members in the interprofessional/multiprofessional team, in particular in case of personal crises/ruptures in life or existential experiences,
sees the family as the key reference system of patients, clients and residents.

Nursing process:
co-operates in the application of subject-specific standardised assessments and risk scales for certain indicators (e.g. pressure ulcers, falls, pain, nutrition, mobility) and takes part in planning,
continuously collects information on the general and health status as well as on the family and life situation, interprets it with a view to the need for immediate action and takes part in planning,
supports nurses in the planning of nursing care by providing information and assessments on the persons to be nursed and their social environment,
carries out selected and standardised interdisciplinary surveys and ensures the flow of information in the nursing process (social environment, housing, work, leisure and, if appropriate, physical aspects and life assessment for the disabled persons/ICF, geriatric assessment, biography),
differentiates between nursing interventions to be planned and hotel or basic services in an organisation or department,
performs nursing interventions ordered and recognises the need for adapting them,
co-operates in continuous observation and monitoring,
recognises changes in the course of nursing,
determines the status of the nursing outcome defined in the nursing process, identifies possible causes in case of deviations and, if necessary, proposes adjustments to the nursing plan.
Relationship management and communication:

- responds to people and reaches out to them with empathy, appreciation and congruence, in particular in line with their age, development, social and cultural background,
- applies general basic principles and basic skills of communication in a reflected manner,
- initiates and ends relationships and communication by applying general rules of communication,
- applies theory- and concept-driven communication methods (e.g. validation, supported and assisted communication, basic communication) in line with target groups (e.g. children, critically ill and dying persons as well as their family members and other close persons, people with dementing and/or psychiatric diseases),
- provides information that is adequate and structured in a target group-specific way and checks the information contents registered by the recipient,
- manages the closeness/distance relationship in a professionally adequate way,
- assesses crisis situations, supports persons in their crises and/or initiates appropriate measures (e.g. informing superiors) and/or requests support from competent persons,
- realises the need of relief, de-escalation, conflict and complaint discussions, takes initial measures, informs superiors and requests support from competent persons.

Nursing interventions:

- monitors the health status in line with instructions,
- supports and promotes the physical, mental, psychological and social resources of different target groups taking account of their social environment and recognises changes,
- recognises potential hazards to health and acts in line with the target group and in a way adequate to the situation (e.g. domestic violence, violence against women and children, dangerous environment),
- performs assigned nursing measures in the field of life activities as well as psychosocial support in everyday life and in arranging the environment and is able to recognise needs (influencing factors, situational sensitivities),
- applies defined principles, techniques, concepts (e.g. kinaesthetics, basal stimulation) and mobilisation aids within the framework of mobilising different target groups,
- brings patients into preventive positions by means of subject-specific standardised techniques, concepts and aids, recognises and assesses the effect and adjusts the positions to situational requirements in line with the existing scope for action,
- carries out assigned complementary nursing measures and monitors their effect,
- carries out standardised nursing measures within the framework of preoperative preparation,
- performs standardised nursing tasks, including nose care in case of existing nasal gastric tubes and nasal cannulas in line with instructions and recognises changes,
- carries out standardised preventive measures, recognises and assesses their effect and, after consultation, makes modifications in stable situations of care,
- co-operates in strengthening the health competence of different target groups by providing adequate information,
instructs patients as well as nursing family members and other close persons on how to perform autonomously nursing tasks in the field of life activities in line with their age and development to meet their personal needs,

assesses the nursing resources of family members and other close persons and appropriately involves them in nursing care,

recognises the need for support or relief as well as changes in the nursing resources of family members and other close persons and proposes services providing support and relief,

implements standardised concepts related to self-care requirements/skills for coping in everyday life (e.g., concepts related to perception and the body, behavioural concepts, concepts for improving self-competence), observes influencing factors and reactions and passes on relevant information.

Co-operation in medical-diagnostic and medical-therapeutic tasks (including emergencies):

- recognises emergencies and life-threatening conditions and takes appropriate emergency measures,
- performs standardised tests of blood, urine and stools and takes blood from capillaries for point-of-care testing and carries out such tests,
- prepares medicines to be administered locally, transdermally as well as via the gastrointestinal and/or respiratory tract, dispenses and administers them in stable situations of care, recognises and reports observable effects and reactions,
- prepares subcutaneous injections of insulin and anti-coagulants and administers them according to instructions,
- prepares and performs the taking of blood from veins, excluding on children,
- records and monitors basic medical data, in particular pulse rate, blood pressure, respiration, temperature, consciousness level, weight, height, excrements, recognises deviations from normal values and acts adequately,
- disconnects and reconnects ongoing infusions (excluding cytostatic agents and transfusions of whole blood and/or blood components) via an existing peripheral venous access device, maintains a free passage and, if appropriate, removes the peripheral venous access device,
- recognises anomalies in the administration of (pump-controlled) parenteral medicinal products or fluids and takes immediately required patient- and/or device-side measures,
- monitors the health status selectively with a view to potential therapy-induced side effects and complications, recognises them and acts in line with instructions,
- performs simple wound care, applies support dressings/stockings, compresses as well as bandages and recognises changes requiring consultations,
- places (and removes) transnasal and transoral gastric tubes and provides follow-up care in line with instructions,
- checks the correct positioning of gastric tubes and performs tube feeding through existing gastric tubes,
- places (and removes) transurethral catheters for female patients (excluding children), performs catheter care and recognises potential complications,
- administers micro and single enemas and ensures the monitoring of success,
- suctions secretions from the upper airways and the tracheostoma in stable situations of care and, if necessary, takes required immediate measures,
performs simple measures of thermotherapy, cryotherapy and light therapy (e.g. wraps, poultries, light, cool packs) and monitors their effectiveness,

applies fitted corsets, orthoses as well as motorised and non-motorised continuous passive motion devices with predefined settings and identifies device-side functional deviations and patient-side changes,

instructs patients as well as nursing family members and other close persons on how to use selected medical products in line with their age and development to meet their personal needs,

brings patients into therapeutic positions and monitors their effect.

Co-operation, co-ordination and organisation:

accepts orders for assigned medical and nursing measures and rejects those going beyond his/her own training level and competences,

takes responsibility for the performance of tasks in line with the responsibility for accepting and taking over tasks,

provides appropriate feedback on tasks taken over and performed,

works in the interprofessional/multiprofessional team in line with the job profile and role definition as well as in compliance with formal and informal standards,

aligns the perception and performance of his/her professional role with the purpose and objective of the organisation,

is aware of the connecting elements (technical, organisational, communicative) at interfaces, co-operates in interface management to the extent defined and supports the implementation of strategies and concepts on co-operation and case management,

inputs the practical clinical know-how acquired into the interprofessional discourse,

interacts in regard of the different competence areas of various health and social (care) professions as well as their tasks, roles and competences within the operational structure of the organisation in question,

communicates effectively in the interprofessional and multiprofessional discourse, informs about the positions and views of the patients and contributes to decision-making,

addresses evident problems/conflicts/potentials for improvements in interprofessional co-operation,

recognises and minimises hazard potentials in the immediate working environment and applies measures to protect himself/herself and others,

is aware of the consequences, in particular health implications, of non-compliance with legal and organisational requirements (e.g. Medizinproduktegesetz – Medical Device Act, fire protection, radiation protection),

minimises physical, mental and social stress by applying the basic principles of relevant concepts (e.g. kinaesthetics, validation, stress management) and strategies,

integrates hygiene measures into everyday work in line with the setting in question, being aware of their importance and consequences,

is familiar with routines and standards for handling physical and psychological attacks or violence, takes adequate measures in line with the situation in questions and informs the superior,

co-operates in the organisation of necessary medical and nursing consumables as well as medicines.
Development and assurance of quality:
- is able to critically reflect and raises questions,
- recognises new/changed requirements in his/her own work environment and proposes appropriate adjustments,
- works in line with instructions in a reflected way,
- is aware of the importance of co-operation in quality and risk management and fulfils tasks within the quality and risk management system,
- is aware of the impact of professional activities on the direct environment and aligns them accordingly,
- is aware of the social significance of nursing care and addresses issues of relevance for the profession as far as possible,
- takes responsibility for his/her own professional and personal development through further and continuing training to improve the quality of nursing,
- recognises the need to use research results,
- recognises that the implementation of the nursing process and quality standards forms part of evidence-based actions,
- recognises that research results contribute to ensuring and developing the quality of nursing and takes part in practice development and research projects.

Professional title:

_Pflegefachassistentin/Pflegefachassistent_ (nursing assistant level 2)

Education:

School for nurses

Duration of education:
2 years / 3,200 hours

Requirements for admission to training:
- medical fitness,
- trustworthiness,
- command of the German language,
- successful completion of the tenth school grade or nursing assistant qualifications,
- admission interview and standardised admission procedure.
A board decides on admission.

Completion of education:
Exam before an examination commission/diploma

Holders of medical-technical certificates have access to the _VET diploma examination_ according to the _Bundesgesetz über die Berufsreifeprüfung_ (Federal Act on the VET Diploma Examination), Federal Law Gazette I No. 68/1997.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
12.2.3 Further training

To broaden the knowledge and skills acquired in training courses, nursing assistants and nursing assistants (level 2) may take part in the following optional further training courses (minimum duration: 4 weeks / 160 hours):

- Basal stimulation in nursing
- Culture- and gender-sensitive nursing
- Ethics in nursing
- Forensics in nursing
- Gerontological nursing
- Home nursing
- Kinaesthetics
- Nursing of children and adolescents
- Nursing of chronically ill patients
- Nursing of disabled persons
- Nursing of patients with dementia
- Nursing of patients with psychiatric diseases
- Palliative nursing
- Validation

Requirements for admission to further training courses:
Qualifications for a nursing assistance profession

Completion of further training:
Final exam/certificate

Legal basis:

12.2.4 Excursus: Social care professions

Regulations on social care professions fall under the competence of the Laender (Federal States). Related training programmes and professional profiles, however, were harmonised within the framework of an agreement on social care professions made between the Federal Government and the Laender pursuant to Art. 15a of the Bundes-Verfassungsgesetz (Federal Constitutional Law).

Social care professionals are:
- **Social care workers (level 2)**
  - specialised in services for elderly persons
  - specialised in services for families
  - specialised in services for disabled persons
  - specialised in counselling disabled persons
- **Social care workers (level 1)**
  - specialised in services for elderly persons
  - specialised in services for disabled persons
  - specialised in counselling disabled persons
- **Home helps**

**Job description/field of activities:**

**Home helps:**

Home helpers support persons needing assistance (i.e. persons of all age groups who are not able to fend for themselves because of their age, health conditions or difficult social circumstances) in performing housekeeping tasks and activities of everyday life with a view to promoting own activities and helping them to help themselves. These activities also include assistance in basic care under the guidance and supervision of healthcare professionals.

**Social care workers:**

Social care workers are skilled professionals helping to shape the living conditions of people who are disadvantaged in the way they lead their lives because of their age, disability or other difficult circumstances. They have comprehensive knowledge of the diverse aspects of living with disadvantages and can provide a broad range of counselling, support and assistance services related to all issues of life from coping with everyday life to finding a meaning to life. They provide support in basic care under the guidance and supervision of healthcare professionals (social care workers specialised in counselling disabled persons) or tasks of auxiliary nursing (social care workers specialised in services for families, elderly and disabled persons).

**Social care workers (level 2):**

Social care workers (level 2) perform all the activities that are also carried out by social care workers. Owing to their advanced, scientifically based education and the competences acquired during the preparation of their diploma thesis, they are able to fulfil their tasks
with a higher level of autonomy and own responsibility. In addition to direct care work, social care workers (level 2) perform conceptual and planning tasks related to the organisation of care work. They provide support in basic care under the guidance and supervision of healthcare professionals (social care workers level 2 specialised in counselling disabled persons) or tasks of nursing assistance (social care workers level 2 specialised in services for families, elderly and disabled persons).

**Education:**

- Home helps: 400 hours
- Social care workers: 2,400 hours
- Social care workers (level 2): 3,600 hours

**Nursing assistant** training (see 11.2.1) forms an integral part of education for the following professions:

- Social care workers (level 2) specialised in
  - services for elderly persons
  - services for families
  - services for disabled persons
- Social care workers (level 1) specialised in
  - services for elderly persons
  - services for disabled persons
- Social care workers (level 2) specialised in counselling disabled persons
- Social care workers specialised in counselling disabled persons
- Home helps

has to include a training module on **assistance in basic care** (140 hours).

The recognition of EU/EEA qualifications is performed by the *Laender*.

Persons who successfully completed the training module on **assistance in basic care** are entitled to perform the following tasks:

**Support in personal hygiene**

- Assistance with getting up from bed
- Assistance with washing
- Assistance with taking a shower
- Assistance with taking a bath
- Assistance with dental care
- Assistance with hair care
- Assistance with shaving
- Recognition of changes in the general health status or skin and immediate information of the doctor or nurses in charge

**Assistance with dressing and undressing**

- Assistance with selecting clothing
- Laying out clothes
- Assistance with putting on and taking off:
- garments
- stockings, tights, socks, etc.
- compression stockings

**Support with food and fluid intake**

- Cooking and preparing meals, e.g.
  - Heating frozen food
  - Portioning and, if necessary, cutting food
  - Preparing snacks, etc.
- Compliance with dietary requirements
- Assistance with eating
- Assistance with drinking
- Ensuring sufficient fluid intake
- Recognition of eating disorders, difficulties in swallowing, insufficient fluid intake and immediate information of the doctor or member of nurses in charge.

**Support related to excretions**

- Assistance with toileting
- Assistance with intimate hygiene after toileting
- Assistance with incontinence products, e.g.
  - Changing protective pants
  - Assisting with pads
- Recognition of changes in excretions and immediate information of the doctor or member of nurses in charge.

**Support with and promotion of mobility**

- Assistance with getting up or lying down
- Assistance with sitting down
- Assistance with walking

**Support with positioning**

- Use of aids to prevent decubitus in wheelchair users
- Use of aids to facilitate daily activities for people suffering from rheumatic changes

**Support with taking and applying medicinal products**

- Assistance with oral medication, which also includes reminding the client to take medicines or taking medicines out of a one-week dispenser
- Assistance with the application of prescribed ointments, creams and lotions, etc., or of skin care products ordered by nurses.

**Legal basis:**

_Vereinbarung gemäß Art. 15a B-VG zwischen dem Bund und den Ländern über Sozialbetreuungsberufe (Agreement on Social Care Professions made between the Federal Government and the Länder pursuant to Art. 15a of the Federal Constitutional Law), Federal Law Gazette I No. 55/2005
_Verordnung über Ausbildung und Qualifikationsprofile der Pflegeassistentenberufe (Pflegeassistentenberufe-Ausbildungsverordnung – Ordinance on Training for Nursing Assistance Professions), Federal Law Gazette II No. 301/2016
_Verordnung über die Durchführung des Ausbildungsmoduls betreffend Unterstützung bei der Basisversorgung (Gesundheits- und Krankenpflege-Basisversorgungs-Ausbildungsverordnung
– Ordinance on Training in Basic Health Care and Nursing), Federal Law Gazette II No. 281/2006
Regional acts and ordinances
13. CARDIO-TECHNICAL PROFESSION

Job description/field of activities:

Autonomous implementation of extracorporeal circulation for cardiovascular support as well as perfusions and related activities:
- organising, preparing and implementing extracorporeal circulation,
- organising, preparing and implementing perfusions,
- autonomous care of equipment specific to the profession,
- documentation,
- co-operation in research,
- instruction of trainees,
- etc.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:
- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming cardio-technical qualifications,
- registration on the list of cardio-technicians.

Career:

Cardio-technicians must only exercise their profession within the framework of employment with a hospital.

Professional title:

*Diplomierte Kardiotechnikerin/Diplomierter Kardiotechniker* (cardio-technician)

Education:

Training for the cardio-technical profession is organised as in-service training within the framework of employment with a hospital. Theoretical knowledge is mainly acquired through self-study supervised by a tutor.

Duration of education:
18 months within the framework of full-time employment and proportionally longer in case of part-time employment.
Requirements for admission to training:

- medical fitness,
- trustworthiness,
- prior professional qualifications:
  - diploma for radiological technologists or
  - diploma for laboratory technologists or
  - diploma for nursing and either successfully completed special training in intensive care or anaesthetic nursing or at least two years of practical work in intensive care or anaesthetic nursing or
  - certificate confirming equivalent qualifications recognised in Austria,
- entry interview or test.

The training provider decides on admission.

Completion of education:
Diploma examination before an examination commission/ diploma

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:


Verordnung über die Ausbildung im kardiotechnischen Dienst (Kardiotechniker-Ausbildungsverordnung – Ordinance on Training for Cardio-Technicians), Federal Law Gazette II No. 335/2001
14. MEDICAL ASSISTANT PROFESSIONS

Medical assistant professions:

- Disinfection assistant
- Plastering assistant
- Laboratory assistant
- Mortuary assistant
- Operating theatre assistant
- Doctor's assistant
- Radiology assistant
- Health care assistant

Professional qualifications:

Medical assistant professions may only be exercised by persons who meet the following requirements:

- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming qualifications in the relevant medical assistant profession.

Career:

In line with the relevant professional profile, employment with:

- a hospital,
- other establishments under medical or nursing management or supervision that specialise in the prevention, diagnosis or treatment of diseases or in follow-up care, nursing of persons needing care or in collecting blood or blood components,
- doctors of medicine and group practices,
- self-employed biomedical analysts or radiological technologists,
- public health authorities,
- research, science, industry and veterinary services

in line with the relevant professional profile.

Medical assistants may also work as temporary agency workers in line with the provisions of the Arbeitskräfteüberlassungsgesetz (Temporary Agency Work Act) subject to quantitative limits and provided the quality of services rendered is ensured.
Legal basis:

*Bundesgesetz über medizinische Assistenzberufe und die Ausübung der Trainingstherapie (Medizinische Assistenzberufe-Gesetz – Act on Medical Assistant Professions), Federal Law Gazette I No. 89/2012*

*Verordnung des Bundesministers für Gesundheit über Ausbildung und Qualifikationsprofile der medizinischen Assistenzberufe (MAB-Ausbildungsverordnung – Ordinance on Education and Training for Medical Assistant Professions), Federal Law Gazette II No. 282/2013*
14.1. Disinfection assistant

Job description/field of activities:

Reduction and elimination of micro-organisms and macroscopic parasitic organisms in health care institutions on a doctor's order and supervised by a doctor. In line with the doctor's instructions, supervision may be effected by a nurse or the nurse may delegate the activities requested to disinfection assistants on a case-by-case basis and supervise implementation.

In particular, disinfection assistants perform the following activities:

- taking over contaminated instruments as well as preparing and performing further manual and mechanical cleaning,
- carrying out visual and functional checks on the instruments cleaned,
- preparing the instruments cleaned for and performing disinfection and sterilisation by means of steam sterilisers,
- cleaning, maintaining and preparing the equipment used during disinfection, sterilisation and disinfestation as well as eliminating simple faults,
- monitoring, controlling and documenting the disinfection and sterilisation process,
- storing sterile supplies and checking their use-by date as well as processing and disposing of consumable and durable goods,
- disinfecting medical devices and surfaces,
- reducing and eliminating (disinfestation, delousing) macroscopic parasitic organisms from persons, objects and rooms by means of chemical substances,
- complying with safety and quality standards within the framework of disinfection, sterilisation and disinfestation.

Qualification profile:

Competences of a disinfection assistant:

- is able to integrate into a line organisation/hospital or an institution in charge of relevant public health tasks,
- is familiar with typical structural and process organisations with regard to cleaning, disinfection, sterilisation, disinfestation (rooms and persons), etc. as well as the role and function of disinfection assistants in them,
- has the relevant basic knowledge of hygiene, microbiology, parasitology, virology, zoonoses and pest control and in handling chemical substances (toxicology) that is required for performing tasks,
- is familiar with the basic outline of legal and technical requirements (legislation, standards, guidelines, procedures) and knows where to access them,
- is familiar with the medicinal product cycle as well as the basis for its validation,
- is able to perform, control and document cleaning, disinfection and sterilisation processes, recognises simple disturbances in these processes and is able to eliminate them or arrange for their elimination; this means, for example, that he/she can carry out the process steps of the medicinal product cycle for commonly used medicinal products that have to be cleaned (including visual and functional checks),
has knowledge on the decontamination of medicinal products, rooms, objects, vehicles and living beings and can properly perform typical decontamination measures,

- is able to properly perform the appropriate procedure for the disinfection and disinfestation of objects, rooms, vehicles and buildings as well as the disinfestation and delousing of persons (including quality assurance and documentation) within the framework of the tasks stipulated by a public health authority (final disinfection, decontamination, disinfestation, etc.), and, in particular, is able to ensure:
  - the correct handling of necessary protective clothing and devices,
  - the safe and efficient use of the disinfectants and pesticides to be applied (also ensuring the required concentration and duration of exposure as well as safety measures),
  - the storage and disposal of protective clothing, disinfectants and disinfection devices,
  - the performance of head and body delousing for patients (including handling, cleaning and disinfection of devices needed for these task),
  - necessary documentation,

- acts in line with the provisions on sterility and hygiene,

- recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,

- applies basic communication skills in contact with patients and in the team.

Professional title:

Desinfektionsassistentin/Desinfektionsassistent (disinfection assistant)

Education:

School for medical assistant professions or course on disinfection assistance

Duration of education:
minimum of 650 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

Requirements for admission to education and training:

- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
14.2. Plastering assistant

Job description/field of activities:

Assistance during the application of stabilising and inflexible dressings, in particular made of plaster, synthetic resin and thermoplastic bandages as well as application of simple casting techniques for therapeutic reasons on a doctor's order and under a doctor's supervision.

In particular, plastering assistants perform the following activities:

- assisting in the application of plaster, synthetic resin and thermoplastic casts during the primary care of fractures as well as muscle and ligament lesions and during follow-up,
- assisting in fracture reductions and subsequent immobilisation,
- applying simple casting techniques, in particular in case of stable fractures in correct axial alignment as well as muscle and ligament lesions,
- correcting rigid casts of impaired stability,
- removing rigid casts,
- preparing and clearing up the treatment or cast room,
- organising and administering the materials required.

Qualification profile:

Competences of a plastering assistant:

- has basic knowledge of anatomy and (patho)physiology and understands the relevant medical terminology:
- is able to integrate into a line organisation/hospital,
- is familiar with typical structural and process organisations in and around the plaster room (including cleaning and waste disposal plan) and the role and function of plastering assistants in this area,
- is familiar with the different types of inflexible and stabilising dressings (e.g. made of plaster, synthetic resin and thermoplastics) as well as their provisioning, storage and disposal requirements,
- is able to assist in the preparation of patients, fracture reduction and subsequent immobilisation in regular cases,
- is able to carry out the non-patient related preparation and maintenance of inflexible and stabilising dressings, materials, equipment and instruments,
- is able to apply simple casting techniques (e.g. in case of stable fractures in correct axial alignment, muscle and ligament lesions),
- is able to repair and remove inflexible and stabilising dressings,
- recognises unwanted effects and complications (e.g. malposition, swelling, inflammation, eczema, redness) of inflexible and stabilising dressings and knows when action needs to be taken,
- acts in line with the provisions on sterility and hygiene,
- recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,
- applies basic communication skills in contact with patients and in the team.
Professional title:

*Gipsassistentin/Gipsassistent* (plastering assistant)

**Education:**

School for medical assistant professions or course on plastering assistance

Duration of education: minimum of 650 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

Requirements for admission to training:
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
14.3. Laboratory assistant

Job description/field of activities:

Performance of automated and simple manual analyses of routine parameters within the framework of standardised laboratory tests on a doctor’s orders and under supervision. In line with the doctor’s instructions, supervision may be effected by a biomedical analyst or the biomedical analyst may delegate the activities requested to laboratory assistants on a case-by-case basis and supervise implementation.

Laboratory assistants perform the following activities:
- pre-analytical phase: in particular, co-operating in taking samples, including blood from veins and capillaries, preparing equipment, reagents and specimens as well as checking equipment for proper functioning, including their quality control,
- analytical phase: performing simple automated and simple manual analyses of routine parameters,
- post-analytical phase: in particular, checking the proper functioning of equipment with regard to the specimen in question, documenting analytical results, filing or disposing samples.

Qualification profile:

Competences of a laboratory assistant:
- has basic knowledge of anatomy and (patho)physiology, clinical chemistry, immunology, haematology and haemostaseology and understands the relevant biomedical/medical terminology,
- is able to integrate into a line organisation/hospital,
- is familiar with typical structural and process organisations in and around the laboratory (including cleaning and waste disposal plan) and the role and function of laboratory assistants in the laboratory area,
- is familiar with the work steps of pre-analytics, analytics and post-analytics within the framework of metabolic and organ diagnostics and is able to distinguish and differentiate the related tasks and activities of doctors, biomedical analysts and laboratory assistants,
- is able to take blood from veins or capillaries,
- properly handles samples (including handling of highly infectious samples as well as archiving and disposal),
- is familiar with the basic principles of sample shipment and the shipment methods required for specific types of samples,
- is able to prepare reagents, calibrators as well as test and control materials and to perform manual and automated analyses of routine parameters based on his/her knowledge of laboratory methods and the learnt operation of (frequently used) equipment,
- is familiar with reference/control values used in quality control as well as the measures to be taken in case of deviating control values,
- acts in line with the provisions on sterility and hygiene,
- acts within the legal and technical limits of his/her profession,
recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,

applies basic communication skills in contact with patients and in the team.

**Professional title:**

*Laborassistentin/Laborassistent* (laboratory assistant)

**Education:**

School for medical assistant professions or course on laboratory assistance

Duration of education:
minimum of 1300 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

Requirements for admission to education:
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.
14.4. Assistant prosector

Job description/field of activities:

Assistance during postmortem examinations with regard to anatomy, histopathology, cytopathology as well as forensics on a doctor's orders and under a doctor's supervision.

In particular, assistant prosectors perform the following activities:

- maintaining and preparing the instruments required for autopsies and the autopsy table,
- assisting during postmortem examinations, organ removal or sample taking,
- co-operating in the preparation of anatomical specimens,
- carrying out of preservation procedures,
- assisting in the implementation of hygiene guidelines with regard to the autopsy room, equipment and instruments,
- assisting in the documentation of postmortem examinations, in particular by photographic means,
- reconstituting and preparing the deceased for their funeral.

Qualification profile:

Competences of an assistant prosector:

- has basic knowledge of anatomy and (patho)physiology and understands the relevant medical terminology:
- is able to integrate into a line organisation/hospital,
- is familiar with typical structural and process organisations (including hygiene and waste disposal plan) in and around pathological departments at hospitals as well as the role and function of mortuary assistants during autopsies,
- is able to prepare the deceased for autopsy,
- knows which documents are required for a deceased person and which approvals are necessary for autopsy,
- is familiar with the procedures of common examinations/autopsies and the support activities to be performed by mortuary assistants,
- knows which devices, instruments and consumables are required for the planned examination/autopsy in question, is able to check their functioning, if necessary, and supply them in compliance with the hygiene standards required,
- is able to position a deceased person correctly in line with the planned examination/autopsy (on the autopsy table),
- is familiar with the requirements for preparing samples for cytological and histological analyses and for the long-term storage of bodies/conservation of bodies, organs and samples and is able to comply with them,
- is able to carry out preparatory measures for coffining/burying of the body, including activities related to the collection and transport of the body,
- is aware that it is necessary to create an appropriate framework for respectful farewells by surviving family members,
- knows the further steps to be taken by family members (formalities, funeral),
is able to properly handle bodies to be examined on orders of public health authorities,
acts in line with the provisions on sterility and hygiene,
acts within the legal and technical limits of his/her profession,
recognises the importance of a culturally sensitive attitude in action situations,
applies basic communication skills in contact with surviving family members and in the team.

**Professional title:**

*Obduktionsassistentin/Obduktionsassistent* (assistant prosector)

**Education:**

School for medical assistant professions or course on assistant prosection

Duration of education:
minimum of 650 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

Requirements for admission to education:
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.
14.5. Operating theatre assistant

Job description/field of activities:

Assistance in the performance of surgical procedures according to instructions and under supervision. In line with the doctor’s instructions, supervision may be effected by a nurse or the nurse may delegate the activities requested to operating theatre assistants on a case-by-case basis and supervise implementation.

In particular, operating theatre assistants perform the following activities:
- receiving, identifying and preparing patients requiring surgery, including transfer to and from the operating theatre,
- preparing the operating theatre with regard to the non-sterile equipment and patient positioning devices, including checks of proper functioning and maintenance,
- assisting in the positioning of patients,
- operating non-sterile equipment in the perioperative phase,
- assisting in the sterilisation of equipment and instruments,
- preparing and checking the proper functioning of non-sterile equipment,
- assisting in the implementation of hygiene guidelines with regard to the operating theatre, equipment and instruments.

Qualification profile:

Competences of an operating theatre assistant:
- has basic knowledge of anatomy and (patho)physiology and understands the relevant medical terminology:
- is able to integrate into a line organisation/hospital,
- is familiar with typical structural and process organisations in and around the operating theatre (including hygiene and waste disposal plan) and the role and function of operating theatre assistants during surgery,
- is able to recognize potential infection risks and take appropriate preventive action in line with hygiene guidelines,
- is familiar with different types of surgery, their procedures, the non-sterile devices, materials and consumables used as well as the related preoperative, intraoperative and postoperative activities of operating theatre assistants,
- complies with applicable standards, in particular for:
  - sterility and proper conduct in sterile environments,
  - checking and, if necessary, restoring the functioning of selected devices,
  - patient identification,
  - bringing patients into the operating theatre,
  - positioning and transferring patients as well as fixation techniques in line with safety requirements,
  - diverse hair removal methods,
  - handling of the neutral electrode,
  - providing assistance in applying and removing inflexible and stabilising dressings,
- has knowledge of the storage, conservation, handling and disposal of specimens, sample material and organs and is aware of the consequences of improper actions,
• acts in line with the legal and professional requirements for hygiene and sterility within the framework of his/her activities,
• acts within the legal and technical limits of his/her profession,
• recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,
• applies basic communication skills in contact with patients and in the team.

Professional title:

Operationsassistentin/Operationsassistent (operating theatre assistant)

Education:

School for medical assistant professions or course on operating theatre assistance

Duration of education:
minimum of 1100 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

Requirements for admission to education:
• successful completion of the ninth school grade or passed basic education exam,
• medical fitness necessary for exercising the profession,
• trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
14.6. Doctor's surgery assistant

Job description/field of activities:

Assistance in medical measures carried out on a doctor's orders and under supervision at doctor's surgeries, group practices, independent outpatient clinics, non-inpatient organisational units of a hospital and public health authorities. In line with the doctor's instructions, supervision may be effected by a nurse may delegate the activities requested to doctor's assistants on a case-by-case basis and supervise implementation.

Doctor's assistants perform the following activities:
- carrying out simple support activities during medical procedures,
- carrying out standardised diagnostic programmes and standardised point-of-care blood, urine and stool tests, including the taking of blood from capillaries for such tests,
- taking of blood from veins, excluding on children,
- attending to patients, and
- ensuring surgery hygiene, cleaning, disinfecting, sterilising and maintaining medical devices and other equipment and tools, disposing of waste including the performance of the organisational and administrative tasks required for operating a doctor’s surgery.

Qualification profile:

Competences of a doctor's surgery assistant:

Medical sector
- has basic knowledge of anatomy and (patho)physiology and understands the relevant medical terminology:
- is familiar with typical structural and process organisations (including hygiene and waste disposal plan) in doctor's surgeries, group practices, outpatient clinics and public health authorities as well as the role and function of doctor’s surgery assistants in those facilities,
- has an understanding of the regulations required for direct patient care in the doctor’s surgery (social insurance, patient transport, healthcare professions, including medical specialisations and their focal areas),
- is familiar with diseases and infection risks frequently occurring in primary healthcare as well as with the necessary self-protection measures at work,
- is able to perform the tasks assigned to him/her in line with the hygiene and waste disposal plan,
- has basic knowledge of the handling and prescription of medicinal products and medical devices,
- has basic knowledge of standardised diagnostic and therapeutic measures (e.g. EEG, ECG, audiometry), is familiar with the devices, materials and utensils used in those examinations/interventions and is able to operate or use them properly in his/her own field of tasks,
• is able to prepare, perform and follow up on the frequently occurring examinations/interventions listed below and is familiar with the procedures with regard to error sources and complications (e.g. first aid):
  - recording of basic medical data,
  - taking of blood from capillaries and veins (excluding children),
  - point-of-care testing of blood, urine and stools,
• is able to prepare tissue and test specimens (e.g. blood samples, tissue) for transport and dispatch them,
• acts in line with the provisions on sterility and hygiene,
• acts within the legal and technical limits of his/her profession,
• recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,
• applies basic communication skills in contact with patients and in the team.

Administration:
• is able to use common office equipment (e.g. telephone, scanner, copying machine),
• is able to use IT systems specific to doctor's surgeries,
• is familiar with the principles of electronic patient and medicinal product management, e.g. e-card — health insurance card, ABS — approbation service for prescriptions of expensive drugs, EKO — reimbursement code),
• is familiar with the principles of rendering accounts to social insurance organisations and private patients, including dunning,
• is able to write typical business letters and to handle correspondence,
• is familiar with basic accounting for managing cash in hand,
• is able to assist patients in completing common forms or applications.

Professional title:

Ordinationsassistentin/Ordinationsassistent (doctor's surgery assistant)

Education:

School for medicel assistant professions or course on doctor's surgery assistance

Practical training may also be provided within the framework of employment with a doctor of medicine, group practice, independent outpatient clinic or a public health authority.

Duration of education:
minimum of 650 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.
Requirements for admission to education:
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession,
- in case of in-service training, existence of an employment contract and declaration of consent by the employer.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
14.7. Radiology assistant

Job description/field of activities:

Performance of simple standardised X-ray examinations as well as assistance in radiological examinations on a doctor's orders and under supervision. In line with the doctor's instructions, supervision may be effected by a radiology technologist or the radiology technologist may delegate the activities requested to radiology assistants on a case-by-case basis and supervise implementation.

Radiology assistants perform the following activities:
- performing standardised chest radiographies
- performing standardised x-ray examinations of the skeletal system,
- performing standardised bone density scans,
- performing standardised mammographies,
- carrying out simple standardised tasks during tomographic examinations based on computed tomography within the framework of assistance in radiological examinations,
- carrying out simple standardised tasks during tomographic examinations based on magnetic resonance tomography within the framework of assistance in radiological examinations,
- assisting with x-ray examinations of the respiratory, gastrointestinal and urogenital tract,
- transferring patients and assisting in positioning patients for x-ray and radiological examinations,
- preparing and clearing up the equipment and examination rooms,
- organising, administering and passing materials required.

Qualification profile:

Competences of a radiology assistant:
- has basic knowledge of anatomy and (patho)physiology and understands the relevant medical terminology:
- is able to integrate into a line organisation/hospital,
- is familiar with typical structural and process organisations (including hygiene and waste disposal plan) in and around radiological departments, in particular, in hospitals, outpatient clinics, specialist surgeries and group practices as well as the role and function of radiology assistants in those facilities,
- has basic technical and radiological knowledge (e.g. physics, in particular electricity, thermodynamics, magnetic field, radiation physics and MR physics, devices and equipment, examination procedures, current standards of imaging and positioning techniques, radiation protection during x-ray examinations, safety aspects during MRT),
- is able to prepare, handle and take care of frequently used or operated devices, storage media and tools (especially within the framework of standardised chest radiographies, x-ray examinations of the skeletal system, bone density scans and
mammographies) and implementing current standards of imaging and positioning techniques in a patient-oriented way,

- is familiar with the applications, procedure and standardisation level of computed tomography and magnetic resonance tomography as well as the materials needed in preparing and following up on examinations and is able to perform simple, standardised activities in these fields,
- is familiar with the special administrative and documentation requirements in radiology and is able to comply with them with the support of a radiological information system,
- acts in line with the provisions on sterility and hygiene,
- acts within the legal and technical limits of his/her profession,
- recognises the importance of a culturally sensitive and patient-oriented attitude in action situations,
- applies basic communication skills in contact with patients and in the team.

**Professional title:**

*Röntgenassistentin/Röntgenassistent* (radiology assistant)

**Education:**

School for medical assistant professions or course on radiology assistance

**Duration of education:**
 minimum of 1300 hours, with practical training accounting for at least half the duration and theoretical instruction for at least one-third.

**Requirements for admission to education:**
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession,
- age of 18 years for access to the advanced module on radiology assistance.

**Completion of education:**
 Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.
### 14.8. Medical assistant

**Job description/field of activities:**

Medical assistants combine:
- a minimum of three medical assistance professions (14.1 to 14.7) or
- the profession of nursing assistance (12.2.1) or medical masseur (lower level, 15.1) and at least one medical assistance profession (14.1 to 14.7).

The professional profile of medical assistance covers those professional profiles for which qualifications have been acquired within the framework of education.

**Professional title:**

- *Diplomierter medizinischer Fachassistent (MFA)/Diplomierte medizinische Fachassistentin (MFA)* (medical assistant (QMA)) or
- Professional title of the medical assistant profession (14.1 to 14.7) in which they predominantly work with the addition of “(MFA)” (QMA) or
- *Pflegeassistentin (MFA)/Pflegeassistent (MFA)* (nursing assistant (QMA)) or
- *Medizinischer Masseur (MFA)/Medizinischer Masseur (MFA)* (medical masseur (lower level) (QMA))

**Education:**

School for medical assistance professions

Education in medical assistance comprises:
- education in at least three medical assistance professions (14.1 to 14.7) or education for nursing assistance (12.2.1)/medical masseurs (lower level) (15.1) plus education in at least one medical assistance profession, and
- a thesis.

Duration of education:
A minimum of 2,500 hours in total

Requirements for admission to education:
- successful completion of the ninth school grade or passed basic education exam,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

An admission board decides on admission.

Completion of education:
Exam before an examination commission/diploma

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.
Note:
The following professions subject to the Bundesgesetz über die Regelung des medizinisch-technischen Fachdienstes und der Sanitätshilfsdienste (MTF-SHD-G — Federal Act Regulating Clinical-Technical and Auxiliary Healthcare Professions), Federal Law Gazette No. 102/1961 are being phased out, i.e. education must not be provided for them anymore, whereas the professionals continue to work within the framework of their professional profiles using their existing professional titles.

Clinical-technical professions

Job description/field of activities:
Application of simple medical-technical laboratory methods, implementation of simple physiotherapeutic treatments and assistance in the use of X-rays for diagnostic and therapeutic purposes on a doctor’s orders and under a doctor’s supervision.

Professional title: Diplomierte medizinisch-technische Fachkraft (clinical-technical assistant)

Clinical-technical assistants are also entitled to exercise the professions of
- laboratory assistance (14.2.),
- radiology assistance (14.7.),
- medical masseurs (15.1), including specialisation in electrotherapy, hydrotherapy and balneotherapy as well as basic mobilisation (15.3).

Holders of clinical-technical certificates have access to the VET diploma examination according to the Bundesgesetz über die Berufsreifeprüfung (Federal Act on the VET Diploma Examination), Federal Law Gazette I No. 68/1997.

Occupational therapy assistant

Field of activities:
Simple support services in the treatment of persons for curative and rehabilitation purposes by using manual skills and performing craft activities according to instructions and under a doctor’s supervision.

Professional title: Ergotherapiegehilfin/Ergotherapiegehilfe (occupational therapy helper)

Spa assistant

Field of activities:
Simple medical support services in the application of hydrotherapy and balneotherapy on a doctor's orders and under a doctor's supervision.

Professional title: Heilbadegehilfin/Heilbadegehilfe (spa helper)
Laboratory helper

Field of activities:
Simple medical support services in medical laboratories according to instructions and under supervision

Professional title: Laborgehilfin/Laborgehilfe (laboratory helper)
14.9. Excursus: Exercise therapy provided by sports scientists

Field of activities:

Structural improvement of motions and organ systems aimed at increasing co-ordination, strength, endurance and balance through systematic exercise based on the stabilisation of a primary disease and to provide complementary treatment of secondary conditions. The overall objective is to prevent the recurrence of diseases and the emergence of secondary diseases, maladaption and chronification.

Exercise therapy provided by sports scientists has to be carried out on a doctor's orders and under supervision. In line with the doctor's instructions, supervision may be effected by a physiotherapist or the physiotherapist may delegate the activities requested to sports scientists on a case-by-case basis and supervise implementation.

Qualification profile:

Competences of an exercise therapist:

- has qualified knowledge of commonly used medical terminology based on his/her anatomical, physiological and pathological knowledge,
- is familiar with typical organisational structures and processes of institutions where exercise therapy is provided as well as with the possible role and function of sports scientists at such institutions,
- is able to properly perform exercise therapy, including taking blood from capillaries for measuring lactate and is aware of the limits of his/her own tasks and responsibilities as well as the responsibilities of other healthcare professions in the field of exercise therapy,
- properly applies the indications for the performance of exercise therapy,
- realises when exercise therapy is contraindicated and is able to refer the patient to a doctor in case of suspected contraindications,
- is able to perform the medically prescribed exercise stress tests that are required for exercise therapy,
- is able to draw up an exercise therapy plan (selection/definition of suitable exercise methods/types, exercise intensity, duration, frequency, etc.) adjusted to the needs and resources of the patient concerned within the framework of medical instructions and in line with the therapeutic objective in question and, if necessary, can adapt this plan according to situational requirements,
- is able to handle the equipment required for the exercise therapy in question (including adjustment to patient-specific requirements) and to instruct the patient to use it correctly,
- is able to provide guidance to patients for adequate exercise,
- can recognise life-threatening conditions and take appropriate first-aid measures,
- knows his/her documentation obligations and needs as well as selected documentation systems,
- is able to act in line with the legal and professional requirements for hygiene and sterility within the framework of his/her activities,
• is aware of the importance of a respectful attitude, friendliness, empathy, the need to ensure privacy, confidentiality, principles of professional ethics as well as sensitivity for different cultures especially in contacts with patients and persons accompanying them and has basic communication skills to promote patient compliance,
• can contribute to interdisciplinary treatment teams based on his/her technical and social communication competence and self-competence,
• knows the legal foundations of exercise therapy and healthcare professions active in the field of exercise therapy.

Qualifications for providing exercise therapy:

Exercise therapy may be provided by persons who meet the following requirements:
• medical fitness necessary for exercising the profession,
• trustworthiness necessary for exercising the profession,
• required German language skills for exercising the profession,
• recognised certificate confirming exercise therapy qualifications,
• registration on the list of sports scientists entitled to provide exercise therapy.

Provision of exercise therapy:

As an employee of:
• a hospital,
• other establishments under medical management or supervision that specialise in the prevention, diagnosis or treatment of diseases,
• doctors of medicine or group practices,
• self-employed physiotherapists.

Professional title:

Trainingstherapeut/Trainingstherapeutin (exercise therapist)

Education:

University studies of sports sciences that were accredited:
• in general by an ordinance of the Federal Minister of Health and Women's Affairs or
• individually by a decision of the Federal Minister of Health and Women's Affairs.

Legal basis:

Bundesgesetz über medizinische Assistenzerufe und die Ausübung der Trainingstherapie (Medizinische Assistenzerufe-Gesetz – Act on Medical Assistant Professions), Federal Law Gazette I No. 89/2012
Verordnung über generell akkreditierte Ausbildungen in der Trainingstherapie (TT-Akkreditierungsverordnung – Ordinance on Accreditation for Exercise Therapy Education), Federal Law Gazette II No. 32/2014
15. MEDICAL MASSEUR

15.1. Medical masseur (level 1)

Job description/field of activities:

- Classic massage (manual and mechanical therapeutic massages),
- pack applications (in particular, poultices, hot and cold packs),
- thermotherapy (applying heat or coldness for therapeutic purposes, in particular by heat conduction, thermal radiation, energy transformation, heat removal),
- ultrasound therapy (applying sound waves at a frequency of 20 kHz to 10 GHz for therapeutic purposes),
- special massages (in particular, lymphatic drainage, reflex massage, acupoint massage)

for therapeutic purposes on a doctor’s orders and under instructions and supervision by a doctor of medicine or a physiotherapist.

Field of activities for blind masseurs (level 1):

- Classic massage (manual and mechanical therapeutic massages),
- special massages (in particular, lymphatic drainage, reflex massage, acupoint massage)

for therapeutic purposes on a doctor’s orders and under instructions and supervision by a doctor of medicine or a physiotherapist.

Professional qualifications:

The profession may only be exercised by persons who meet the following requirements:

- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming their qualifications as medical masseurs (level 1).

The profession of medical masseur (level 1) may also be exercised by physiotherapists and medical masseurs (level 2).

Career:

As an employee of:

- hospitals or sanatoria,
- other establishments under medical management or supervision that specialise in the prevention, diagnosis or treatment of diseases or in the nursing of persons needing care,
- doctors of medicine and group practices,
- self-employed physiotherapists.
Professional title:

*Medizinische Masseurin/Medizinischer Masseur* (medical masseur (level 1))

Education:

Training for medical masseurs (level 1) is made up of two modules (modules A and B).

Duration of education:
- Module A and module B: 1,690 hours
- Short training course for masseurs (level 1) (recognised qualification for the regulated trade of masseur): 580 hours

Requirements for admission to training:
- Age of not less than 17 years,
- Medical fitness (blindness is not an obstacle to entry),
- Trustworthiness,
- Successful completion of the ninth school grade.

Completion of education:

Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

Legal basis:

*Bundesgesetz über die Berufe und die Ausbildungen zum medizinischen Masseur und zum Heilmasseur (Medizinischer Masseur- und Heilmasseurgesetz – Medical Masseur Act)*,

Federal Law Gazette I No. 169/2002

*Verordnung über die Ausbildung zum medizinischen Masseur/zur medizinischen Masseurin und zum Heilmasseur/zur Heilmasseurin (Medizinischer Masseur- und Heilmasseur-Ausbildungsverordnung – Ordinance on Education and Training for Medical Masseurs)*,

Federal Law Gazette II No. 250/2003

15.2. Medical masseur (level 2)

Job description/field of activities:

Autonomous performance of
- classic massage (manual and mechanical therapeutic massages),
- pack applications (in particular, poultries, hot and cold packs),
- thermotherapy (applying heat or coldness for therapeutic purposes, in particular by heat conduction, thermal radiation, energy transformation, heat removal),
- ultrasound therapy (applying sound waves at a frequency of 20 kHz to 10 GHz for therapeutic purposes),
- special massages (in particular, lymphatic drainage, reflex massage, acupoint massage)
for therapeutic purposes on a doctor's orders.

Field of activities for blind masseurs (level 2):

Autonomous performance of
- classic massage (manual and mechanical therapeutic massages),
- special massages (in particular, lymphatic drainage, reflex massage, acupoint massage)
for therapeutic purposes on a doctor's orders.

Professional qualifications:

The profession may only be exercised by persons who meet the following requirements:
- legal capacity,
- medical fitness necessary for fulfilling the duties of the profession,
- trustworthiness necessary for fulfilling the duties of the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming their level 2 masseur qualifications or qualifications for exercising the physiotherapeutical profession.

Career:

- On a self-employed basis,
- as an employee of hospitals or sanatoria,
- as an employee of other establishments under medical management or supervision that specialise in the prevention, diagnosis or treatment of diseases or in the nursing of persons needing care,
- as an employee of doctors of medicine and group practices,
- as an employee of self-employed physiotherapists,

Upon notification of the district administration authority, medical masseurs (level 2) are entitled to work on a self-employed basis.
Professional title:

Heilmasseurin/Heilmasseur (medical masseur (level 2))

Education:

Advanced training module for medical masseurs (level 2)

Duration of education (advanced training module): 800 hours

Requirements for admission to education:
Qualification to work as a medical masseur (level 1).

Completion of education:
Final exam before an examination commission/certificate

Holders of certificates for medical masseurs (level 2) have access to the VET diploma examination according to the Bundesgesetz über die Berufsreifeprüfung (Federal Act on the VET Diploma Examination), Federal Law Gazette I No. 68/1997.

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:

Bundesgesetz über die Berufe und die Ausbildungen zum medizinischen Masseur und zum Heilmasseur (Medizinischer Masseur- und Heilmasseurgesetz – Medical Masseur Act), Federal Law Gazette I No. 169/2002


Verordnung über Form und Inhalt der Zeugnisse und Ausbildungsbestätigungen für die Ausbildung zum medizinischen Masseur/zur medizinischen Masseurin und zum Heilmasseur/zur Heilmasseurin (Medizinischer Masseur- und Heilmasseur-Zeugnisverordnung – Ordinance on Medical Masseur Certificates), Federal Law Gazette II No. 458/2006
15.3. Special qualifications for electrotherapy, hydrotherapy and balneotherapy as well as basic mobilisation

Medical masseurs may acquire the professional qualifications for providing the following specialised therapies on a doctor's orders:

- Electrotherapy
- Hydrotherapy and balneotherapy
- Basic mobilisation

Field of activities:

- **Electrotherapy**: Application of electricity for therapeutic purposes, in particular through low-, medium- and high-frequency therapy
- **Hydrotherapy and balneotherapy**: Application of natural medicinal resources, in particular medicinal waters and peloids, medicinal baths, underwater massages and underwater jet massages
- **Basic mobilisation**: Support of patients in improving their mobility and in safely using walking aids

Professional title:

- **Medizinische Masseurin/Medizinischer Masseur** (medical masseur (level 1))
  - (Elektrotherapie) (electrotherapy)
  - (medizinische Bademeisterin)/(medizinischer Bademeister) (medical bath attendant)
  - (Basismobilisation) (Basic mobilisation)
- **Heilmasseurin/Heilmasseur** (medical masseur (level 2))
  - (Elektrotherapie) (electrotherapy)
  - (medizinische Bademeisterin)/(medizinischer Bademeister) (medical bath attendant)
  - (Basismobilisation) (Basic mobilisation)

Education:

- Specialised training in electrotherapy: 140 hours
- Specialised training in hydrotherapy and balneotherapy: 120 hours
- Specialised training in basic mobilisation: 80 hours

Requirements for admission to education:
Completion of module A of the training course for medical masseurs (level 1)

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.
Legal basis:

*Bundesgesetz über die Berufe und die Ausbildungen zum medizinischen Masseur und zum Heilmasseur (Medizinischer Masseur- und Heilmasseurgesetz – Medical Masseur Act), Federal Law Gazette I No. 169/2002*

*Verordnung über die Ausbildung zum medizinischen Masseur/zur medizinischen Masseurin und zum Heilmasseur/zur Heilmasseurin (Medizinischer Masseur- und Heilmasseur-Ausbildungsverordnung – Ordinance on Education and Training for Medical Masseurs), Federal Law Gazette II No. 250/2003*

*Verordnung über Form und Inhalt der Zeugnisse und Ausbildungsbestätigungen für die Ausbildung zum medizinischen Masseur/zur medizinischen Masseurin und zum Heilmasseur/zur Heilmasseurin (Medizinischer Masseur- und Heilmasseur-Zeugnisverordnung – Ordinance on Medical Masseur Certificates), Federal Law Gazette II No. 458/2006*
15.4. Teaching tasks

Medical masseurs (level 2) may obtain qualifications for teaching tasks.

Field of activities:

- Teaching in training courses for medical masseurs (level 1), advanced training modules for medical masseurs (level 2), specialised training courses and training courses for teaching tasks (planning, carrying out and evaluating theoretical and practical instruction)
- Management of training courses for medical masseurs (level 1), advanced training modules for medical masseurs (level 2), specialised training courses and training courses for teaching tasks (technical, pedagogical and organisational management and supervision within the framework of theoretical and practical training)

Professional title:

Lehrberechtigte Heilmasseurin/Lehrberechtigter Heilmasseur (medical masseur teacher)

Education:

Training for teaching tasks: 120 hours

Requirements for admission to training:
Successfully completed education and training for medical masseurs (level 2)

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

Legal basis:

Bundesgesetz über die Berufe und die Ausbildungen zum medizinischen Masseur und zum Heilmasseur (Medizinischer Masseur- und Heilmasseurgesetz – Medical Masseur Act), Federal Law Gazette I No. 169/2002
Verordnung über Form und Inhalt der Zeugnisse und Ausbildungsbestätigungen für die Ausbildung zum medizinischen Masseur/zur medizinischen Masseurin und zum Heilmasseur/zur Heilmasseurin (Medizinischer Masseur- und Heilmasseur-Zeugnisverordnung – Ordinance on Medical Masseur Certificates), Federal Law Gazette II No. 458/2006
16. EMERGENCY MEDICAL TECHNICIAN

Professional qualifications and authorisations:

Emergency medical technicians may perform their tasks:
  • as volunteers,
  • as employees,
  • as soldiers in the Federal Armed Forces, as officers of the public security service, customs officials, law enforcement officials, members of other security services or persons doing community service in lieu of military service.

The qualifications and the right to exercise the profession are limited to two years. Their extension requires participation in training courses and re-certification.

Professional activities of emergency medical technicians may only be pursued after successful completion of the training course for first-level or second-level emergency medical technicians and the professional module.

The profession may only be exercised by persons who meet the following requirements:
  • legal capacity,
  • have the medical fitness necessary for fulfilling the duties of emergency medical technicians,
  • have the trustworthiness necessary for fulfilling the duties of emergency medical technicians,
  • German language skills required for exercising the profession,
  • recognised certificate confirming the qualifications as emergency medical technicians,
  • successful re-certifications.

Career:

The profession and activities of emergency medical technicians may only be exercised within the framework of employment by the following institutions:
  • Workers’ Samaritan Federation,
  • St. John Ambulance in Austria,
  • Hospitaller Service of the Order of Malta in Austria,
  • Austrian Red Cross,
  • medical corps of the Federal Armed Forces,
  • institutions of regional or local authorities,
  • other organisations

provided that supervision is ensured by an emergency physician or otherwise appropriately qualified doctor of medicine having at least five years of relevant professional experience.
16.1. First-level emergency medical technicians

Job description/field of activities:

Independent and autonomous provision of care and assistance to the ill, the injured and other persons in distress who need medical attention before and after transportation, including proper maintenance and termination of existing infusions as well as the taking of blood from capillaries for emergency diagnostics on a doctor’s orders; taking and handing over the patient or person attended to in the context of transportation; assistance in crisis situations, including administration of oxygen; competent performance of life-saving measures (assessing, restoring and maintaining vital body functions, defibrillating by means of semi-automatic devices and establishing transportability as well as transporting the patient if and as long as a doctor of medicine entitled to exercise the profession independently is not available, with an emergency physician having to be called immediately); performing special medical transports.

Professional title:

Rettungssanitäterin/Rettungssanitäter (first-level emergency medical technician)

Education:

Duration of education:
- Module 1: 260 hours
- Short training course for doctors of medicine: 225 hours
- Short training course for nursing assistants: 232 hours
- Short training course for nurses: 226 hours

Requirements for admission to education:
- Age of not less than 17 years,
- medical fitness,
- trustworthiness,
- successful completion of compulsory schooling or passed basic education exam.

Completion of education:
Final exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

Legal basis:

Bundesgesetz über Ausbildung, Tätigkeiten und Beruf der Sanitäter (Sanitätergesetz – Act on Emergency Medical Technicians), Federal Law Gazette I No. 30/2002
16.2. Second-level emergency medical technician

Job description/field of activities:

Activities of first-level emergency medical technicians; supporting doctors of medicine in all measures of emergency and disaster medicine, including care and transportation of emergency patients; administering the medicines required during activities of second-level emergency medical technicians if their administration has been approved in writing by the official in charge of medical care at the institution in question; autonomous care of the equipment, materials and medicines of relevance for the profession; co-operation in research.

Professional title:

Notfallsanitäterin/Notfallsanitäter (second-level emergency medical technician)

Education:

Duration of education: Module 2: 480 hours

Requirements for admission to education:

- Qualifications and the right to exercise the profession of a first-level emergency medical technician,
- proof of a minimum of 160 hours of work in the ambulance and patient transport system certifying the student’s aptitude for the training course for second-level emergency medical technicians,
- successful completion of an entry test.

Completion of education:

Final exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:

Bundesgesetz über Ausbildung, Tätigkeiten und Beruf der Sanitäter (Sanitätergesetz – Act on Emergency Medical Technicians), Federal Law Gazette I No. 30/2002

16.3. Emergency qualifications in pharmacology, venous access and infusion as well as artificial respiration and intubation

General emergency qualifications

Second-level emergency medical technicians can acquire the following general emergency qualifications:
- **Pharmacology**: Administering special medicines if their administration has been approved in writing by the official in charge of medical care at the institution in question,
- **Venous access and infusion**: Puncturing peripheral veins and infusing crystalloid solutions within the framework of measures taken to directly prevent hazards to the life or health of emergency patients if the same goal cannot be reached by less invasive measures.

Conditions for applying general emergency competences:
- Qualification of second-level emergency medical technicians for these tasks based on the relevant training course successfully completed,
- instructions given by a doctor of medicine present or, if no doctor of medicine is present, prior notification of an emergency physician or orders given by him/her.

Special emergency qualifications

Second-level emergency medical technicians may acquire qualifications for further tasks in line with the state of the medical art:
- **Artificial respiration and intubation**: Performing endotracheal intubation without premedication and endotracheal vasoconstrictor application.

Conditions for applying special emergency competences:
- Qualification for general emergency tasks and successful completion of training,
- written authorisation by the official in charge of medical care at the institution in question,
- appropriate instructions given by a doctor of medicine present or, if no doctor of medicine is present, prior notification of an emergency physician or orders given by him/her.

This authorisation has a limited term of two years from the successful completion of training on and may only be renewed after examination of the knowledge required (re-certification).

Professional titles:

- *Notfallsanitäterin/Notfallsanitäter mit allgemeiner Notfallkompetenz Arzneimittellehre (NKA)* (second-level emergency medical technician with general emergency qualifications regarding pharmacology)
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- **Notfallsanitäterin/Notfallsanitäter mit allgemeiner Notfallkompetenz Venenzugang und Infusion (NKV)** (second-level emergency medical technician with general emergency qualifications regarding venous access and infusion)
- **Notfallsanitäterin/Notfallsanitäter mit besonderer Notfallkompetenz Beatmung und Intubation (NKI)** (second-level emergency medical technician with special emergency qualifications regarding artificial respiration and intubation)

**Education:**

- **General emergency qualifications regarding pharmacology**: 40 hours
  Requirements for admission to training:
  - successful completion of module 2 (training course for second-level emergency medical technicians)
- **General emergency qualifications regarding venous access and infusion**: 50 hours
  Requirements for admission to training:
  - successful completion of module 2 (training course for second-level emergency medical technicians)
  - authorisation for performing the tasks requiring general emergency qualifications regarding pharmacology
- **Special emergency qualifications regarding artificial respiration and intubation**: 110 hours
  Requirements for admission to training:
  - authorisation for performing the tasks requiring general emergency qualifications regarding pharmacology as well as venous access and infusion
  - evidence of 500 hours of work within the emergency medical service

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women’s Affairs.

**Legal basis:**

*Bundesgesetz über Ausbildung, Tätigkeiten und Beruf der Sanitäter (Sanitätergesetz – Act on Emergency Medical Technicians)*, Federal Law Gazette I No. 30/2002
16.4. Professional module

The pursuit of professional activities of emergency medical technicians requires either training for first-level emergency medical technicians or training for second-level emergency medical technicians.

Education:

Professional module: 40 hours

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:

Bundesgesetz über Ausbildung, Tätigkeiten und Beruf der Sanitäter (Sanitätergesetz – Act on Emergency Medical Technicians), Federal Law Gazette I No. 30/2002
17. DENTAL ASSISTANCE

Job description/field of activities:

Provision of support to dental practitioners and dentists as well as specialised doctors in oral and maxillo-facial surgery in the treatment and care of patients as well as performance of organisational and administrative tasks in dental surgeries.

In particular, the dental assistance activities related to the treatment and care of patients are:

- assisting with conservative treatment including the polishing of fillings and desensitisation of tooth necks,
- assisting with surgical treatment,
- assisting with prosthodontic treatment, including simple laboratory activities,
- assisting with periodontal treatment,
- assisting with orthodontic treatment,
- assisting with preventive measures, including identification of dental status, informing on and demonstrating oral hygiene, staining, brushing exercises, providing dietary advice and fluoridation,
- making, developing and filing X-ray images,
- ensuring surgery hygiene, cleaning, disinfecting, sterilising and maintaining medical devices and other equipment and tools, disposing of waste on the orders and under the supervision of dental practitioners, dentists or specialised doctors in oral and maxillo-facial surgery.

Qualification profile:

Competences of a dental assistant:

Administration:

Administrative work:

- recording and processing patient data,
- setting up filing systems, performing registration and archiving tasks in compliance with storage periods (patient documentation),
- managing case histories,
- processing incoming and outgoing mail,
- handling correspondence, completing forms,
- complying with documentation obligations under various legislation (e.g. radiation protection, medicinal products, waste management),
- preparing dental certificates.

Procurement and management of material:

- identifying the need for purchasing goods, medicinal products and materials and placing orders,
- handling incoming and outgoing goods,
- checking orthodontic material and laboratory invoices,
- properly storing and monitoring materials and medicinal products.
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Accountancy:
- processing payments,
- recording and checking incoming and outgoing payments,
- dunning.

Invoicing:
- applying fee scales and contract provisions,
- explaining therapy and cost plans and informing about cost elements,
- recording services rendered for insurers and contributing to the rendering of accounts,
- applying fundamental provisions of social insurance legislation,
- knowing the functioning of and handling e-cards.

Co-operating in the organisation of the dental emergency service in the surgery.

Work organisation and quality management

Organisation of the training surgery:
- explaining the structure, tasks and functional areas of the surgery,
- handling, servicing and maintaining the devices and instruments of the training surgery,
- identifying malfunctions of devices and deficiencies in instruments and taking measures to eliminate them.

Working in the dental surgery team:
- integrating into the dental surgery team, cooperating with colleagues and working autonomously,
- systematically planning the performance of work steps.

Quality and time management:
- cooperating in quality improving measures,
- planning patient appointments,
- organising follow-up appointments,
- coordinating needs-oriented time schedules with dental laboratories.

Data protection and security:
- taking account of data protection and security in line with legislation.

Patient management:

Providing telephone support to patients and arranging appointments.

Communicating in consideration of different patient groups:
- conducting conversations oriented to persons and situations,
- informing patients and accompanying persons about surgery processes for diagnosis, treatment, follow-up appointments, administration and settlement of accounts and motivating them to cooperate,
- providing explanations and help in drawing up the case history,
- adjusting to specific situations and behaviours of patients,
- supporting patients before, during and after treatment taking account of their expectations and wishes,
- contributing to building patient loyalty in a responsible manner,
- taking account of special aspects in relations with different patient groups, especially with anxious, handicapped and dependent persons, patients at risks and children.
Behaviour in conflict situations:
- avoiding conflicts by preventive actions,
- recognising and assessing conflicts,
- contributing to resolving conflict situations.

Assistance in all specialties in consideration of different patient groups
- preparing the work place, instruments and materials,
- preparing patients for dental treatment,
- properly applying ejection and holding techniques,
- assisting in all treatment measures,
- preparing and processing medicinal products and materials,
- knowing common dental tools, their use and maintenance,
- documenting treatment processes,
- taking account of the effects of materials,
- preparing the prescription of medicinal products,
- helping in case of incidents and accidents,
  - recognizing symptoms of dangerous conditions, in particular shock, cardio-respiratory arrest, loss of consciousness, strong bleeding and allergies, as well as taking measures,
  - calling the ambulance service,
  - cooperating in measures taken by the dental practitioner in case of incidents,
  - initiating and providing first aid in case of accidents, especially when there are infection potentials.

Assistance in conservative dentistry
- removing oral fluids,
- draining the work field,
- assisting in placing fillings,
- polishing fillings,
- preparing temporary fillings,
- assisting in root canal treatments.

Assistance in prosthetic dentistry:
- Assisting in prosthetic work,
- assisting in making impressions,
- planning and situation models,
- preparing means for impressions and bite registration,
- removing excessive cement,
- assisting in cord placement,
- preparing temporary restorations and cooperating in repairs of plastic dentures,
- assisting in repairs,
- archiving and making models and working materials and archiving them.

Assistance in dental surgery:
- Assisting in preparing surgical interventions,
- knowing commonly used surgical instruments,
- assisting in all surgical treatments,
- knowing the procedures used in different surgical interventions,
Prophylaxis:
- explaining the causes and development of caries and periodontal diseases,
- explaining patients the possibilities of caries and periodontal prophylaxis, in particular oral hygiene, tooth-friendly diet and fluoridation and motivating them for oral hygiene,
- instructing patients on teeth cleaning techniques and informing them about suitable tools for oral hygiene,
- assisting in local fluoridation measures,
- dyeing plaque,
- documenting prophylaxis measures.

Assistance in orthodontics:
- assisting with all orthodontic treatment procedures,
- assisting in preventive and therapeutic measures for tooth malpositions and malocclusions,
- photographic documentation.

X-ray and radiation protection:
- explaining the functioning of radiography equipment,
- explaining the principles of x-ray generation and the biological effects of ionising radiation,
- taking measures of radiation protection for patients and staff,
- applying intra-oral and extra-oral imaging techniques,
- observing inquiry, recording, information, control and documentation obligations, taking appropriate measures,
- processing films and images,
- assisting in measures of error analysis and quality assurance.

Hygiene and the environment:
- pointing out measures to prevent infections,
- knowing the importance of hygiene for the surgery,
- implementing measures of the hygiene chain based on the surgery's hygiene plan,
- hygienic and technical maintenance at the workplace,
- cleaning, disinfecting and sterilising treatment instruments and devices,
- identifying risks for occupational safety and health, taking measures to prevent them and informing the persons responsible under labour legislation,
- waste disposal and environmental protection,
- avoiding environmental impacts of the training surgery (waste disposal and separation),
- using possibilities of environmental-friendly energy and material use,
- avoiding waste.

Professional qualifications:

The profession may be exercised by persons who meet the following requirements:
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession,
- German language skills required for exercising the profession,
- recognised certificate confirming dental assistance qualifications.
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Career:

As an employee of:
- self-employed dental practitioners, dentists or specialised doctors in oral and maxillo-facial surgery,
- dental group practices or medical group practices in which at least one of the partners is a specialised doctors in oral and maxillo-facial surgery,
- university clinics of dentistry or university clinics of oral and maxillo-facial surgery,
- outpatient dental clinics or other hospitals within the framework of a department or other organisational unit of dentistry or oral and maxillo-facial surgery.

Professional title:

Zahnärztliche Assistentin/Zahnärztlicher Assistent (dental assistant)

Education:

Dental assistance education is provided within the framework of employment with:
- dental practitioners, dentists or specialised doctors in oral and maxillo-facial surgery,
- dental group practices or medical group practices in which at least one of the partners is a specialised doctor in oral and maxillo-facial surgery,
- university clinics of dentistry or university clinics of oral and maxillo-facial surgery,
- outpatient dental clinics or other hospitals within the framework of a department or other organisational unit of dentistry or oral and maxillo-facial surgery.

Theoretical instruction has to be provided in a course on dental assistance.

Duration of education: 3 years
- min. 600 hours of theoretical instruction, and
- min. 3,000 hours of practical training.

Requirements for admission to training:
- successful completion of the ninth school grade or passed basic education exam,
- existence of an employment contract and declaration of consent by the employer,
- medical fitness necessary for exercising the profession,
- trustworthiness necessary for exercising the profession.

Completion of education:
Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:

Verordnung über die Ausbildung und das Qualifikationsprofil der Zahnärztlichen Assistenz und über die Weiterbildung und das Qualifikationsprofil der Prophylaxeassistenz (ZASS-Ausbildungsverordnung – Ordinance on Dental Assistance Education and Training), Federal Law Gazette II No. 283/2013
17.1. Specialisation in prophylaxis assistance

Field of activities:

Performance of prophylactic measures to prevent diseases of the teeth, mouth, jaw and associated tissues on the orders and under the supervision of a dental practitioner or dentist.

Qualification profile:

Competences of a prophylaxis assistant:

Obtaining and taking over medical reports:
  • identifying plaque and calculus status,
  • plaque indices, bleeding indices,
  • assessing and documenting gingival inflammation,
  • performing saliva tests,
  • identifying BPE or, if necessary, periodontal status,
  • oral and facial photography,
  • documenting the level of periodontal inflammation,
  • sensitivity testing in recall (only after consultation with the dental practitioner),
  • accepting and performing microbiological and risk tests,
  • recording changes in hard tooth substances and periodontal tissues, assessing and reporting to the dental practitioner,
  • communicating abnormal changes in the oral mucosa to the dental practitioner.

Providing motivation for behavioural change through education, guidance and monitoring:
  • explanations on causes, development and consequences of caries, gingivitis and periodontal diseases,
  • patient-specific motivation for behavioural change,
  • needs-oriented instruction about measures of caries and periodontal prophylaxis,
  • providing dietary advice with a view to oral prophylaxis,
  • implementing and checking the needs-oriented, personal prophylaxis programme,
  • providing detailed information on local dental soft-chemo and chemo prevention as well as on preventive possibilities of dental medicine.

Performing preventive and therapeutic measures
  • professional cleaning of teeth (needs-oriented work system),
  • creating clean conditions in the oral cavity,
  • prophylactic measures (i.e. diet issues, guidance on interdental cleaning),
  • local application of desensitisers to tooth necks,

Ensuring work processes in the surgery team and at his/her own workplace:
  • other assignments in the surgery team,
  • proper maintenance and disposal of devices and materials,
  • organising and implementing the individual recall system,
  • correspondence,
  • procuring and keeping an inventory of prophylaxis supplies.
Professional qualifications:

The profession may be exercised by persons who meet the following requirements:

- authorisation to work as dental assistants, and
- recognised certificate confirming dental assistance qualifications.

Professional title:

Prophylaxeassistentin/Prophylaxeassistent (prophylaxis assistant)

Education:

Further training is to be implemented in parallel to employment.

Duration of further training: 144 hours

- min. 64 hours of theoretical instruction, and
- min 80 hours of practical training, including 30 evaluations

Requirements for admission to further training courses:

- Certificate and a minimum of two years of work as a dental assistant,
- existence of an employment contract and declaration of consent by the employer,

Completion of further training:

Exam before an examination commission/certificate

The recognition of EU/EEA qualifications is performed by the Federal Ministry of Health and Women's Affairs.

Legal basis:


Verordnung über die Ausbildung und das Qualifikationsprofil der Zahnärztlichen Assistenz und über die Weiterbildung und das Qualifikationsprofil der Prophylaxeassistenz (ZASS-Ausbildungsverordnung – Ordinance on Dental Assistance Education and Training), Federal Law Gazette II No. 283/2013
The present brochure gives an overview of regulated healthcare professions in Austria providing explanations on job descriptions and fields of activities, qualifications, exercise of the profession, professional titles, education, further training and legal bases.