



## **PROGRAMME OF CANDIDATURE TO THE POSITION OF DEAN OF THE FACULTY OF MEDICINE OF THE UNIVERSITY OF LISBON**

The term of office of the Dean of the Faculty of Medicine of the University of Lisbon (FMUL), from 2009 to 2012, will correspond to a decisive period in the development of this medical school.

It takes place within the context of renewal of the statutes of the university, with the election of the General Council and its Chancellor, followed by the drawing up of the new FMUL Statutes, elections to the Assembly of the Faculty, the Scientific and Pedagogical Councils and also for the Dean.

Reform of the university, in which I participated actively as a member of its Statutory Assembly, the project to set up the Lisbon Centre for Academic Medicine, the re-structuring of medical teaching and the administrative modernization of the Faculty of Medicine are ongoing projects to which I have fully contributed.

It is an imperative of academic responsibility and duty to contribute towards their *continuity* and *implementation*.

These are essential for the development of scientific research, the modernization of teaching, the incorporation of innovation and qualification in the Clinical Medicine we provide for the community, and these are the pillars upon which the FMUL rests in the Portuguese and European context.

The candidature programme I am presenting states a set of *aims* and a *strategy* for action in order to bring it about which I consider to be indispensable for the progress of the Faculty of Medicine.

The aims are the following:

- Promotion of a modern view of medical education in an integrated perspective between under- and post-graduate training, with special attention to bringing our students into the programmes of internship and advanced training and into the development of continued medical education.

Modernisation of Teaching-Learning in undergraduate studies through the development of the teaching reform initiated in 2007 and the programmatic principles of which were widely debated and accepted by the School.

- Progress of knowledge through the development of science and research in medicine, in biomedical sciences and in health.
- Development of Advanced Training Programmes – FMUL Masters and PhDs – and committed contribution to the qualification of post-graduate professional training.

- Creative and interested contribution to the renewing of the UL through the development of the Strategic Area of Health Sciences.

The **strategy** I am proposing in order to achieve these aims includes the following points:

### **1. Structuring of the Lisbon Centre for Academic Medicine (CAML):**

This innovating concept in the organization of medical teaching and research centres was started in Holland in the nineteen-eighties and nineties, and has been implemented throughout Europe. In our Portuguese reality it intends to bring into a single structure the FMUL, the Institute of Molecular Medicine (IMM) and the Santa Maria Hospital (HSM), a component part of the North Lisbon Hospital Centre (CHLN).

The logic presiding over this project is based on the vitality and dynamism of the institutions involved, and institutionalising it will mark a qualitative leap in the evolution of our reality, in the renewing of the concept of the *University Hospital*, adapting the situation that marked the golden age of Portuguese medicine in the last century to a different time and to different needs: a medical school devoted to teaching and research, intimately linked to its university hospital.

The creation of the CAML was a determining initiative in the previous term of office, and, on the 8th of December 2008, the Protocol for Action and Understanding between the FMUL, the IMM and the HSM was signed in the presence of the Ministers of Health and of Science and Technology and Higher Education in order to officialise the Lisbon Centre for Academic Medicine.

The juridical model to be adopted should bring together the autonomy of the institutions involved and the defining of common aims, empowering the respective competences, stimulating cooperation between institutions and greater profitability of available human resources and materials.

When this is brought about the following projects will be made easier:

- a- Increase of scientific and research translation activity among the biomedical sciences and clinical medicine, in order to consolidate our leading position in Portugal and guarantee relevance in the European context.
- b- Introduction of technological innovation at the service of scientific research and service-providing through the concerted use of human and financial resources.
- c- Development of advanced training through a common PhD programme in Clinical Medicine during post-graduate trainings (internships), interdisciplinary Masters in the areas of Biomedical Sciences and Health, and the reinforcing of the academic dimension in the Post-graduate and Continued Education programmes for doctors and other health professionals.

- d- Technological differentiation and innovation in the HSM services, integrated within the CHLN and the National Health Service network, reinforcing the quality and modernity of the services of clinical action provided to the community.
- e- Creation of
- **Advanced Bio-Imaging Institute**, *from the cell to the organism*, empowering the work of the research institutes and the clinical action services
  - **Simulation and Robotics Centre**, involving a fundamental area for learning in surgery, medical emergency and other clinical approaches
- f - Adoption of new models of integrated management of human resources in the chosen clinical units for teaching, in order to take advantage of clinical teaching during undergraduate training and clinical research.

## **2. Reinforcing of the Network of Affiliated Institutions for Teaching:**

Over recent years the FMUL has consolidated a vast network of affiliated teaching institutions with hospitals and health centres. Their collaboration is indispensable for the success of undergraduate clinical teaching in the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> years and for the final 6<sup>th</sup> professional training year.

The policy followed set up the concept of *Partnership for Clinical Teaching*, which should be officially recognised and supported by the Ministries of Health and of Science, Technology and Higher Education.

Their continuity is fundamental, and for this reason I have proposed, and this was accepted in the new Statutes of the Faculty, the participation of a representative of these institutions on the management organs of the FMUL.

In order to reinforce this collaboration I am proposing the following two projects:

- Annual scientific encounter on issues to be defined involving all the FMUL teaching staff and those from these institutions, with the active participation of students
- System for divulging training activities to be held in the different institutions on the FMUL/HSM intranet

The continuity and reinforcing of this policy of institutional affiliation is fundamental to the success of our pedagogical mission, for a more diversified learning by the students and also as an opportunity for the dynamising of common programmes of Clinical Research and Permanent Education.

## **3. Consolidation of the Curricular Reform extended to the Clinical Cycle:**

The FMUL's pedagogical mission has been clearly announced on several occasions:

*"To train doctors with a solid scientific training, capable of self-learning and a capacity for lifelong learning, with skills in communication with patients, among their peers and with society, able to work in multi-disciplinary professional teams, attentive to contemporary health challenges and to ethics in medicine and life sciences, fit for useful and creative integration in the current health systems in society and capable of an informed choice of their professional career".*

The teaching reform begun with the curricular review is an instrument that is indispensable for carrying out this mission.

It was set off after evaluation of our teaching by an international committee of experts we requested in 2006 and took place in October 2007.

It marked a turning point in the FMUL teaching strategy, bringing it close to the models of interdisciplinary integration that are practiced in quality teaching institutions in Europe and the USA, reinforcing the interrelation between Fundamental Science and Clinical Medicine and early exposition to medical practice by students.

Its aims have been clearly stated:

- Reinforcing of the scientific dimension and of the integration of knowledge during the medical course (*Scientific-based Medicine*)
- Development of skills in communication with patients, colleagues and other health professionals
- Early exposing of students to clinical, ambulatory (health centres) and hospital medicine, and their integration in multi-disciplinary professional teams
- Providing of teaching in ethics in medicine and in life sciences, and awareness of the social and economic challenges in health
- Knowledge of and interest in the major contemporary problems of public health
- Perception of the need for permanent updating as an expression of the indisputable duty for professional skills by doctors
- Promoting of values: culture, personal availability, spirit of duty and dedication.

The reform process was reassessed by the same committee in February 2009, always with the active participation of the students.

There were clear recommendations for us to keep to the course drawn out, for the deepening of integration in certain areas where it was less successfully achieved, for the implementation of models of evaluation that are better suited to the methodology of integrated teaching, and pointed out a primary aim: ***the need for restructuring the teaching in the 4<sup>th</sup> and 5<sup>th</sup> years.***

This recommendation, which is a part of the initial plan for the reform, will be the major *challenge* for the modernisation of clinical teaching in our institution, and will require the mobilisation and

commitment of everyone, teachers, students and auxiliary staff, will need better use of human resources in the university clinics and will demand a reinforcing of the network of institutions affiliated for teaching, in an effective *Partnership for Clinical Teaching*.

The need for a **Department of Medical Education** that can contribute to the development and monitoring of the reform process of the teaching was pointed out by this committee, and in this sense there will be a reorganising of the current unit.

#### **4. Restructuring of the Advanced Training**

##### **Advanced Training Institute (IFA):**

There has been great development in the qualified supply of advanced training, namely in post-graduation courses and masters, which have mobilised several hundred teachers over the last two biennials and have contributed towards the significant reinforcing of the FMUL's own income.

The IFA has two fundamental missions: first to guarantee the administrative management of the previously mentioned advanced training programmes, and secondly to stimulate new initiatives, both within the scope of the future work of the CAML and in collaboration with other institutions, consubstantiating the FMUL's commitment and recognition of its responsibility in post-graduate medical teaching and in the continued education of doctors and other health professionals.

In conformity with these aims, there has been a reorganization of the IFA, with the main aims being administrative simplification, simplification of the financial management and the reinforcing of the capacity for academic intervention, maintaining its functional dependence on the Dean of FMUL.

#### **5. Cooperation with the Students and their Representatives:**

Continuing the action carried out in previous terms of office, my priority aim will be to reinforce the active involvement of the students and their participation towards a commitment of *demand* and devotion by all in the improving of the teaching and in the development of initiatives already under way:

Introduction course for new students to take place in the first week in order to facilitate their insertion into the university and the FMUL.

Tutorial programme for new students and reinforcing of the role of the Student Support Office (GAPAE).

Improving of the conditions for studying and research by students at the FMUL.

Participation of the President of the Academic Association in the governing of the FMUL, in order to reinforce the students' capacity for intervention in the life of the faculty.

Setting up of practical training periods in Clinical Medicine of FMUL students.

Diversification of the optional programme with creative participation by students.

Development of joint initiatives with the Alumni Association, which may contribute towards a better professional collocation of our students.

Support for the GAPIC programme for development and qualification of scientific research initiatives by undergraduates.

Rules and procedures were proposed, approved in the Scientific Council, for the most expedite and easiest manner of carrying out the work of the end of the Integrated Masters in Medicine in order to be analysed.

Collocation of FMUL students in the Internal Medicine programmes is an aim I consider to be very important, particularly in a situation of necessary change in the format of its entrance exam.

Thus I promoted a meeting of the students' representatives with the director of the *National Board Examination* of the USA, who recently visited the Portuguese medical schools in the context of preparing a new national exam for selecting the candidates for the internal training period.

I suggested the possibility of our participating *experimentally* in two evaluation exercises to be defined with the *National Board*: the first for training the entrance exam for the internal training period, and the second, to be held at the end of the third year, to assess the learning that has been undertaken.

This will be an innovating project, which will also have the participation of the medical schools of the Catholic University of Leuven and the University of Milan.

These proposals represent an opportunity for our students to *individually* test their learning process in an international context and to be able to identify with greater acuity the areas of the teaching/learning programme which have less success.

This exercise, which I hope will mobilise student interest, will only has a value as an indication and for training for those who participate in it, and will no impact on the normal process of evaluation at the faculty.

I consider it important to guarantee the participation of the 2nd and 3rd cycle students (Masters and PhD) in academic life, so I am manifesting my support for the forming of a representative association. That reality will be increasingly relevant, and corresponds to a strategic aim of the FMUL: to develop the supply of programmes of Advanced Training in Medicine and Biomedical and Health Sciences.

In order to improve the services provided for students, measures for qualification of Level 01 have been adopted so as to make it more functional, comfortable and attractive, and which will start after the end of the school year and will continue the restoration and modernization of the amphitheatres.

In the same way, the construction of the planned building is essential for improving the structural conditions for our students' teaching and learning.

## 6. Carrying out the Contract-Programme for the Development of the FMUL:

The contract-programme between the Government and the FMUL was established in the nineteen-nineties. Its aim was to guarantee the structural renewal of the faculty as a result of the increase in the number of students. It is indispensable to fully effect it for the consolidation of this academic campus as an advanced scientific pole in the field of Biomedical and Health Sciences and as a quality nucleus of Clinical Medicine.

The projects approved and awaiting implementation are:

**Anatomy Theatre:** modern theatre for dissection, essential for teaching anatomy and for education and training in surgery (works finally planned to start in August 2009).

**Bioterium**, practically concluded, located in the Egas Moniz building, at the service of the scientific community of the laboratories and institutes, of the IMM, the Faculty and of the UL.

**Building** which will be on land adjacent to the Egas Moniz building, the project for which was approved and granted financing in the PIDDAC plan for this year. It will have laboratories for research and teaching, modern classrooms and an amphitheatre for 300 people.

Structural recovery work on the spaces on Level 01 and of some amphitheatres and classrooms.

Support for the creation of a **BioBank** in collaboration with the IMM, to be set up in the Egas Moniz building.

## 7. Inter-university Strategic Cooperation:

The Faculty of Medicine must adopt an active and committed role in the restructuring of teaching and research and in the development of cooperation between the academic health institutions in the city of Lisbon.

Firstly in the UL itself, through committed participation in the development of the Strategic Area of Health Sciences, in which the FMUL must carry out a crucial role for its achievement and organisation.

Then in the maintaining of our participation in the new degree course (1<sup>st</sup> Cycle) in Health Sciences, the management of which belongs to our Medical School, in order to take advantage of the pedagogical performance and as an opportunity for the advanced training of professionals through 2<sup>nd</sup> Cycle Masters programmes, as well as in Clinical Microbiology, Nutrition and Molecular Biology, which will be organized by the FMUL and other UL faculties.

A maximum number of five students from that degree course can apply to the FMUL through a process of accreditation and in the legal context of opening up places for other graduates, with it having been made clear that this does not constitute an alternative path for access to the medicine degree.

The FMUL must reinforce its collaboration with the Higher Technical Institute, which was begun with the Integrated Masters in Biomedical Engineering, which has been a success and the continuity of which is a priority. To this aim a protocol was signed for the setting up of an inter-institutional consortium to facilitate the promoting of joint ventures in the area of Biomedical Engineering and contribute to technological innovation in biomedical research and clinical medicine.

The creation of the ***Institute of Advanced Bioluminescence*** may represent an opportunity to reinforce this collaboration and take advantage qualified human resources in the field of biomedical engineering.

In the field of collaboration with other academic health institutions I would like to stress that which is taking place with the Higher School of Health Technologies, at the Lisbon Higher Polytechnic Institute, in order to carry out programmes of advanced training, with special relevance for the common Masters in Cardiovascular Diagnosis Technologies, which will begin in 2009.

## **8. Administrative Modernisation:**

This area has been one of the dominant concerns of my activity as Dean of the FMUL in previous terms of office.

In that sense there has been an administrative reorganization in order to take advantage of human resources and concentrate capacities and responsibilities, training actions have been carried out to qualify the Administrative Staff through a more diversified providing of training, technological platforms have been set up to simplify the management of the Faculty and to stimulate electronic dialogue with teachers and students, facilitating administrative procedures and contributing to a more rational and efficient management of the Faculty's human and material resources.

New rules have also been implemented for the classification of the administrative staff, guaranteeing equity and justice throughout the whole process.

The continuity of these initiatives is fundamental in order to guarantee a better interface among the FMUL services and all their users, highlighting the following initiatives as priorities:

- a- Consolidation of the virtual office for academic management in the Medicine course in order to facilitate circulation of the scientific and pedagogical



- information indispensable to the process of learning, electronic publishing of marks and availability of information on-line 24 hours, seven days a week.
- b- Implementation of the electronic platform for organising the *Portfolio of the Student*, of the files of the Masters and PhD students and availability of services.
  - c- De-materialization of files referring to the Faculty Human Resources in order to reduce redundancies in the services and to facilitate individual management of the administrative process.
  - d- Rationalization and consequent optimization of the administrative processes in terms of human resources, making commonly-used services available on-line.
  - e- Adopting of a process for the certification of quality of the Faculty administrative services.
  - f- Incentive to participation in technical-administrative development groups within the University of Lisbon as a guarantee of quality and of technical excellence and contributing to the rationalization of the UL's process of administrative management.
  - g- Policy of differentiated training for the promoting of excellence in the service provided, adopting innovation and creativity, indispensable to the strategic development of the FMUL.
  - h- Improvement of the *Newsletter* begun in February 2009 as a vehicle for communicating the activities carried out in the Faculty, IMM and HSM.

## **9. International Cooperation:**

The **internationalization** of the Faculty of Medicine will be a decisive process for the modernisation of teaching, for the development of scientific research and for the qualification of the services we provide to the community.

To this end I have supported the reinforcing of the integration of the FMUL research units in transnational scientific projects and their active participation in international research networks.

The FMUL will actively participate in the initiatives that are implemented in the context of cooperation protocols with the University of Harvard, and will seek to stimulate scientific and technological partnerships with other Portuguese and foreign institutions, as already takes place with the involvement of the sectors of Neurosciences and of Sleep Medicine in European Advanced Training networks.

I am particularly interested in the tightening of our academic cooperation in the cultural and political space of the Portuguese-speaking countries, through the development of research projects in fundamental sciences and in clinical medicine, involving FMUL teachers and students, through the increase in training actions for our students with training periods of varying lengths in those countries.

I will support the initiatives ongoing with the Brazilian Medical Association for the mutual recognition of undergraduate training programmes and of the faculties of medicine in these two brother-countries. I also consider as a fundamental aim, and towards which I will commit myself, to be the creation of a *Lusophone Academic Space* that may contribute towards the reinforcing of the scientific and cultural links between the Portuguese-speaking countries.

I will maintain all the support for the development of the *Socrates/Erasmus* programmes, for the cooperation protocols for student mobility carried out by the FMUL Students' Association and for the participation of our students in Portuguese and foreign scientific encounters.

These are the aims and the strategy of the action I am submitting for debate in the School and as a Programme of Candidature to the position of Dean for assessment and vote by the Assembly of the Faculty of Medicine of the University of Lisbon.

FMUL, 28 of April 2009

Professor José Fernandes e Fernandes

## **JOSÉ FERNANDES E FERNANDES, 62 YEARS OLD**

**Born in Ponte de Sor, District of Portalegre**

### **PROFESSIONAL CAREER:**

**1963:** Finishes secondary school at the Portalegre National High School.

**1969:** Degree in Medicine at the Faculty of Medicine of the University of Lisbon, with a final mark of 17.48 on 20.

**1970-1975:** Training Internship in General Surgery at the Santa Maria University Hospital, Lisbon, with a final mark of Very Good with Praise and Distinction.

**1975 - 1978:** Fellowship at the Cardiovascular Unit of St. Mary's Hospital, London, orientated by Mr. H. H. G. Eastcott.

**1978 - 2009:** Hospital practice as specialist in General Surgery and subsequently in Vascular Surgery at the Santa Maria Hospital, Lisbon, having completed all the official competitions until reaching the position of Head of Vascular Surgery, which he has occupied since 1989.

Head of the Staff Surgery Team from 1980 to 1984, after which becoming exclusively emergency Vascular Surgeon.

**1979 - 1980:** Military service at the Estrela Military Hospital as General and Vascular Surgeon, with responsibility for a ward and for general and vascular emergencies.

**1986- 2009:** Founder and director of the Lisbon Vascular Institute, a private institution for the treatment of cardiovascular patients. Transferred to new premises in 1999 with the new name of the **Lisbon Cardiovascular Institute (ICVL)**.

Pioneer activity in Portugal in non-invasive diagnosis in vascular pathology, in the implementation of endovascular techniques for the treatment of the aneurismatic disease of the abdominal and thoracic aorta, and contribution towards the development of this therapeutic approach in occlusive aorto-iliac, renal and visceral disease.

First cases of endovascular treatment carried out in Portugal at the ICVL, for the treatment of Aneurism of the Abdominal Aorta and of the Descending Thoracic Aorta (1999 and 2000, respectively).

### **ACADEMIC CAREER**

**1974 – 1975:** Volunteer assistant in Clinical Surgery at the invitation of Prof. João Cid dos Santos, with responsibility for classes of students for practical teaching on the ward.

**1980 – 1986:** Invited assistant professor in Clinical Surgery and Vascular Surgery, with responsibility for theoretical classes in the two subjects and practical teaching in Vascular Surgery.

**1985:** PhD in Surgery, with the thesis “Disease in the Extra-cranial Carotid Artery – Importance of the Doppler Ultrasound Exam for Diagnosis and Evaluation in Carotid Surgery”.

**1986 – 2009:** Auxiliary Professor in Vascular Surgery, Aggregation Exams at the Faculty of Medicine in 1993, Associate Professor in 1995 and Full Professor in Surgery in 2002, a position he has held since then.

**1997 - 2009:** Coordinating Professor of the subject of Introduction to Clinical Practice at the Faculty of Medicine: new area of teaching created in the third year of the course.

Organization of the **Clinical Learning Laboratory**, for the practical teaching of clinical signs and training of practices of clinical diagnosis using simulators and mechanical models.

This was a pioneering initiative in Portuguese faculties of medicine.

**2005 – 2009:** Functions as Dean of the Faculty of Medicine of the University of Lisbon

## *ACADEMIC AND PROFESSIONAL ACTIVITY*

### **1. UNDERGRADUATION:**

Teaching General Surgery until 1984 and then Vascular Surgery since the autonomy of the respective university clinical teaching, involving the respective teaching staff.

Since 1997, Coordinating Professor in Introduction to Clinical Practice, position he holds to this day.

### **2. SCIENTIFIC RESEARCH:**

#### **Development of Areas of Scientific Research in**

- Cerebro-vascular disease and carotid surgery and of the supra-aortic trunks
- Arterial wall and identification of active atero-sclerotic injury
- Non-invasive methodology for diagnosis of peripheral vascular diseases.
- Critical ischemia of lower limbs
- Aneurismatic Disease
- Diagnosis and treatment of venous insufficiency

Publications in Portuguese and international magazines with peer-review, oral communications, talks through invitation and posters in Portuguese and international meetings on issues of vascular pathology.

Participation on editorial committees for the following international documents on scientific consensus on vascular issues:

**European Consensus Document on Critical Limb Ischemia**

**Consensus Document on Investigations for Chronic Venous Insufficiency**

**Consensus on the Prevention and Treatment of Venous Thromboembolism**

**TASC: Transatlantic inter-Societies Consensus on Peripheral Arterial Occlusive Disease (representative of the ESVS: European Society for Vascular Surgery)**

**Guidelines for Management of Carotid Artery Disease, document drawn up under the guidance of the ESVS (co-editor)**

**Guidelines for Vascular Centres: joint document drawn up under the guidance of the ESVS, UEMS and the IUA (International Union of Angiology) during period as president of this scientific society**

Co-editor and author of two chapters of the book "*Manual of Vascular Surgery*" as a part of the *European Manuals* collection published by Springer-Verlag.

Orientation of PhD theses held in Portugal and in collaboration with the University of Lund, in Sweden, and of the research "A Window on Atero-sclerosis", awarded the Pfizer Prize for young researchers, granted in 1998 to Dr. Luís Mendes Pedro.

Member of the *Editorial Board* of international scientific journals: *European Journal of Vascular and Endovascular Surgery* until 2000, *Vascular*, *Journal of Cardiovascular Surgery* and *International Angiology*.

Member of the editorial board of Portuguese scientific journals: *Arquivos Portugueses de Cirurgia*, Magazine of the Portuguese Society of Cardiothoracic and Vascular Surgery (until 1999).

Founder and first editor of the magazine *Angiologia e Cirurgia Vascular* until 2007, official organ of the Portuguese Society of Angiology and Vascular Surgery.

### **3. POST-GRADUATION**

#### **3.1 PROFESSIONAL AREA:**

Participation in post-graduate programmes and continuous medical education for specialists and interns in General and Vascular Surgery and for General Practitioners, with talks, video presentations and surgical demonstrations.

Guest lecturer at international courses and symposia on Angiology and Vascular Surgery in Europe, the USA, Brazil, Argentina, Russia, Japan, South Korea and China, with talks, “*meet the Professor*” seminars, work sessions, etc.

Visiting Professor at the medical school of the US Armed Forces University in Bethesda, Washington, at the University of Milan-Bicocca and in Leicester, UK.

Organiser of the International Encounters of Angiology and Vascular Surgery that were held annually from 1989 to 2003.

Participation in post-graduate and continuous medical education programmes for specialists and interns in General and Vascular Surgery and for General Practitioners, with talks, video presentations and surgical demonstrations.

Practical courses in “Initiation to Surgery” in collaboration with the Royal College of Surgeons, dedicated to new Interns in Surgery (18 courses held since 2004), an initiative which has achieved national status.

“Workshops” for practical training in Vascular Surgery (8 held until now).

#### **3.2 MEDICAL EDUCATION AND ORGANIZATION:**

Committed participation in meetings on medical education, both in Portugal and abroad, with presentation of oral communications and posters.

Conferences on “Medical Education”, “Certification and Re-certification in Surgery”, “The Teaching of Medicine in Portugal from 1808 to 2008” and “Post-Graduate Training in Portugal” held at the Society of Medical Sciences of Lisbon, at the Portuguese academy of Medicine and at the National Academy of Medicine of Brazil, in a joint symposium as a part of *Brazil - Portugal 200 years Health Encounter*.

Conference on “Universities and Scientific Research” held firstly in Milan and then in Athens, as a part of academic events.

Opinion articles in the press about the organization of medical teaching, about the University and the Faculty of Medicine, with particular note for the problematic of the Lisbon Centre of Academic Medicine.

Member of the Statutory Assembly of the University of Lisbon, with active intervention in its works.

#### **4. SCIENTIFIC SOCIETIES and FUNCTIONS CARRIED OUT**

Member of many Portuguese scientific societies, as well as the following international ones:

- Society for Vascular Surgery (USA) as *distinguished fellow* Vascular Society of Great Britain and Ireland
- Royal Society of Medicine (*fellow*)
- Société de Chirurgie Vasculaire de Langue Française
- Hellenic Society for Angiology and Vascular Surgery (*Honorary Member*)
- European Society for Vascular Surgery (ESVS)
- European Venous Forum
  - International Union of Angiology (IUA)
  - International Society of Endovascular Surgery (ISES)
  - International Cardiovascular Society
  - Mediterranean League of Angiology and Vascular Surgery
  - Spanish Society of Angiology and Vascular Surgery
  - Sociedade Brasileira de Angiologia e Cirurgia Vascular (Honorary foreign member)

**1991 - 1997:** Member of the *Council* of the *European Society for Vascular Surgery*

**1995 - 1996:** President of the *European Society for Vascular Surgery* (ESVS)

**1995 - 2000:** Secretary-General of the *International Union of Angiology* (IUA).

**2000 - 2004:** Vice-President for Europe of the *International Union of Angiology*

**2004 -** Titular Academic of the Portuguese Academy of Medicine

**2003 – 2004:** President of the *European Venous Forum*

**2006 – 2008:** President of the IUA - *International Union of Angiology*.

**2000 - :** Founding member of the Portuguese Society of Angiology and Vascular Surgery (SPACV)

**2006 – 2008:** President of the Portuguese Society of Angiology and Vascular Surgery

**2006 – 2009:** Secretary-General of the Portuguese Academy of Medicine

**2008 - :** Honorary Titular Member of the National Academy of Medicine of Brazil

#### **5. INTERNATIONAL PROFESSIONAL ORGANIZATIONS:**

**1996 - :** Fellow of the *American College of Surgeons* (FACS)

**2001 - :** Fellow of the *Royal College of Surgeons of England* (FRCS)

**1999 – 2005:** Representative of Portugal on the UEMS Board and Division of Vascular Surgery.

#### **6. AWARDS AND DISTINCTIONS:**

**Infante D. Henrique Prize** for best students at Portuguese High Schools

**Wander Prize for best student of Infectious Diseases**

**Cid dos Santos – Boehringer National Award** for the work “Non-bloody Methodology in the Study of Venous Insufficiency”, in 1980

**Bial Clinical Medicine Prize:** co-author of the monograph “Arterial Hypertension in Senior Citizens”, in 1994

**Pfizer Prize Honourable Mention** with the work “Critical Ischemia of the Lower Limbs”, in 1998

**René Fontaine Medal of Honour** at the highest degree granted by the Brazilian Society of Angiology and Vascular Surgery, in 2007.



