



*Trend scouting #2*

**TREND SCOUTING**  
UPDATE DECEMBER 2015

**From practice**  
**For the practice**

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MEDICAL ASSISTANT TRAINING: INTERNATIONAL

During our short stay in San Francisco, an upset stomach forced me to see a primary physician. The doctor was competent, but a man of few words. After the examination, he gave me a piece of paper and said a friendly good-bye. Once I reached the reception area, I took a look at the prescription. Not only could I not read the handwriting, but I also had no idea what kind of medication was prescribed. In my desperation, I asked a lady from the office staff about it. To my relief she could not only decipher what was written, but was equally knowledgeable and competent as she informed me about the prescribed medication. It seemed as if they always did things that way. That inspired us to take closer at look at the situation of medical assistants in Germany.

Dr. Gerd Wirtz  
was able afterwards to enjoy the rest of his stay in San Francisco and is happy to tell you more about it.

**OUT**

- Office staff without consultation skills
- Medical assistants burdened by time-consuming evening events
- High costs for location, catering and travel
- Effort to organize absence in the office

**IN**

- Transfer of knowledge at the office itself
  - Continued training for on the go and at home
  - Relief for the doctor in his daily work at the office
  - Efficient office organization
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## MEDICAL ASSISTANT TRAINING: NATIONAL

According to a study by the German Institute for Quality and Efficiency in Health Care, the practicing hours of German doctors are 30% lower than the European average. That has nothing to do with unwillingness on the part of the doctors to take time for their patients, but rather with the special circumstances of the German health system. That's why it seems absolutely necessary to transfer many topics discussed between physician and patient. Medical assistants at the doctor's office have the greatest connection with the patients and are thus predestined to successfully close this gap. For this, they need intensive and direct training that is adapted to the practice's daily work situation, and can keep the additional time required at a minimum. This way there is more time for patient and doctor, without experiencing a loss in quality.

Anett C. Coerper, pharmacist  
thinks that patients should be fully advised before they reach the pharmacy

## FUTURE FORMAT OF THE MONTH

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