



April 18, 2023

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401 North Michigan Avenue, Suite 2000

Chicago, IL 60611

cc: Felicia Davis, ACGME Executive Director, RCs for Radiology, Emergency Medicine, and Nuclear Medicine

Kathy Malloy, ACGME Vice President, Accreditation Standards

Re: Joint Statement on the Value of Peer Review and the Importance of Gathering Occurrence Data

Dear Dr. Nasca,

Scientific scholarship is the cornerstone of developing knowledge to inform safe, high quality medical care. The process of peer review is fundamentally important for the timely evaluation and dissemination of the knowledge obtained during scientific inquiry and the translation of that knowledge to progressive improvement of healthcare delivery. There has been much publicity over the need for increasing the number and quality of peer reviewers for medical journals and, therefore, the need to teach the skills needed to be an excellent peer-reviewer to our resident trainees.

Peer reviewers critically assess the methodologic quality and scientific merit of a potential publication. High quality peer-reviews can only come from reviewers who have a strong understanding of critical appraisal as the cornerstone of Evidence-Based Health Care. The principles of Evidence-Based Health Care as a tool for learning critical appraisal and becoming a life-long learner are now taught in virtually all medical schools and residency training programs in the US and around the world. These principles provide the tools for producing high quality scientific medical research and robust peer-reviews of that research. During any physician's professional career, even those not involved in research, these skills are also applied to real-time situations, such as critical assessment of the medical literature to inform patient care.

Peer reviewers perform this time-intensive critical evaluation of scholarship voluntarily with no expectation of academic reward. This is because we as a professional field believe this to be an obligation of a researcher and academician to participate in the process, somewhat because we know our own scholarship must be peer reviewed, but even more so because we understand it is a critical step in maintaining the integrity of science. As research studies proliferate and the public is deluged with medical misinformation or inaccurate research, it has become more important for more physicians to participate in the peer review process.

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While it is incumbent that qualified members of our profession participate in the process of being peer-reviewers, the leaders of our profession must also encourage, acknowledge, and reward quality peer-reviews. We urge the ACGME to recognize the value of peer review in the evaluation of residency scholarship for both faculty and residents.

The current tracking for Faculty Scholarly Activity for the ACGME through its web-based ADS (Accreditation Data System) program lists peer review as a qualitative (dichotomized to YES/NO) reporting category, lumped with leadership activities. As scholarly experts, we are suggesting that the ACGME create a separate quantitative category for peer review to emphasize the importance of this function in improving and advancing the science of medicine.

This specific action will benefit all medical specialties and the ACGME. Quantifying the amount of peer review being done in a residency program will highlight the importance of this specific activity, similar to quantifying peer-reviewed publications, conference presentations, or grant leadership. Our hope is that this valuation will trickle up from the individual and residency level to departmental and institutional levels, creating incentive and motivation for our peers to pursue this activity. Eventually, this could lead to more academic physicians using their skills in Evidence-Based Health Care to not only perform more peer review, but to also provide mentorship to others and even train residents to become quality peer-reviewers.

In summary, we are asking the ACGME to create a separate and quantitative category for Peer Review activities in the annual web-based ADS evaluation process. Increasing recognition for this critical service at the residency accreditation level is an important first step to valuing this activity at the institutional level, which will create incentive for individuals to contribute to the advancement of science by becoming a peer reviewer. Ideally, this will ultimately become an integral part of a robust and all-inclusive promotion and tenure process.

Thank you for your kind consideration of our modest proposal.

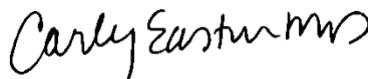
Sincerely,



Angela Mills, MD, President
Society for Academy Emergency Medicine (SAEM)



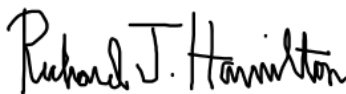
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