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May 21, 2018

Ruth W. Leslie, Director
Division of Hospitals and Diagnostic & Treatment Centers
New York State Department of Health
Empire State Plaza, Corning Tower
Albany, NY 12237

Dear Ms. Leslie,

The American Academy of Emergency Medicine (AAEM) is a professional democratic organization committed to quality emergency care. The New York Chapter Division of AAEM (NYAAEM) has approximately 400 members in New York dedicated to promoting and protecting excellence and integrity in the practice and management of emergency medicine within our state. On behalf of NYAAEM, I am writing in response to DHDC DAL 18-09: Clarification Regarding the Training Requirements of Physicians Working in the Emergency Department.

Board certified emergency physicians have completed a much more extensive and complex training in pediatric critical care and resuscitation than an "algorithm course" such as PALS. This requirement adds no benefit to patient care and will deter qualified physicians from practicing in New York.

The American College of Graduate Medical Education (ACGME) Program Requirements for Graduate Medical Education in Emergency Medicine require resident physicians to demonstrate proficiency in pediatric medical resuscitation, pediatric trauma resuscitation, and pediatric procedures in order to complete training. The curriculum of resident physicians encompasses a minimum of four months of critical care that includes infants and children and a minimum of five (FTE) months, or 20% of all emergency patient encounters, dedicated to the care of pediatric patients.

In order to maintain board certification, emergency physicians are required to participate in the "Maintenance of Certification" program (for ABEM) or "Osteopathic Continuous Certification" program (AOBEM). These programs establish high standards of patient care and include frequent testing of scientific articles relevant to the clinical practice of emergency medicine; practice-based learning and improvement in patient care and communication; and a recertification exam every ten years that assesses knowledge, judgment, and skills of emergency medicine physicians. Each aspect of the program includes pediatric emergency care.

In 2017, ten professional organizations joined to establish the Coalition to Oppose Medical Merit Badges (COMMB). COMMB consists of the American Academy of Emergency Medicine (AAEM), American Academy of Emergency Medicine/Resident and Student Association (AAEM/RSA), American Board of Emergency Medicine (ABEM), American College of Emergency Physicians (ACEP), American College of Osteopathic Emergency Physicians (ACOEP), Association of Academic Chairs of Emergency Medicine (AACEM), Council of Emergency Medicine Residency Directors (CORD), Emergency Medicine Residents' Association (EMRA), Society for Academic Emergency Medicine (SAEM). COMMB finds no rational justification to require medical merit badges for board certified emergency physicians who maintain their board certification. Merit badges devalue the board certification process by setting a lower bar than a board certified emergency physician's education, training, and ongoing learning.

Physicians who are board certified in emergency medicine should be considered as having current training and experience to ACLS, ATLS, and PALS. I hope you reconsider the guidance statement.

Sincerely,

Kristen Kent, MD, FAAEM

Kristen Kent, MD FAAAM
President, New York Chapter Division American Academy of Emergency Medicine



David A. Farcy, MD FAAEM FCCM
President, American Academy of Emergency Medicine