SAEM Position Statement on COVID-19

The current COVID-19 pandemic has significantly impacted emergency care in locations around the world. Emergency Medicine physicians, advanced practice providers, nurses, and staff are on the front lines of care for individuals at risk of COVID-19 infection and often evaluate and treat these patients prior to the availability of any diagnostic testing results. Due to the extent of the pandemic and limited available evidence, COVID-19 has resulted in significant disruption in both emergency care education and research, and more importantly, disruption of usual Emergency Department operations. SAEM deeply sympathizes, not only with our physicians, learners, and staff on the front lines, but also with our patients, their families, and our communities. We have all been affected by this pandemic.

The Society for Academic Emergency Medicine’s (SAEM) mission is “to lead the advancement of academic emergency medicine through education and research, advocacy and professional development.” In this rapidly changing environment, SAEM has the following positions with regards to COVID-19:

**Clinical Care**

During the current pandemic SAEM’s members are dedicated to the care of those infected with COVID-19 while also supporting the public health mission to limit the contagion’s spread and maintain high quality care of all patients with any emergency condition. Due to the novel nature of this disease and rapidly evolving clinical data, substantial uncertainty in many aspects of patient care exist. This uncertainty may lead to confusion in the prehospital setting, Emergency Department, and post-acute phases of care. SAEM recognizes that COVID-19 rapidly impacts the clinical environment, and that subsequent changes in the structure and processes of emergency care will occur with time, especially in those areas most impacted by COVID-19. Thus, SAEM believes that all aspects of COVID-19 care (including patient evaluation, diagnostic testing, treatment, prognostic assessment, disposition decisions, alternative pathways including telehealth, and use of personal protective equipment, etc.) should be based on the best available evidence at the time, taking into account local conditions.

**Education and Training**

Emergency Medicine education and training are core to the SAEM mission. At many training sites, COVID-19 has already impacted resident physicians’ experiences, not only in the Emergency Department, but also during off-service rotations. SAEM supports the Accreditation Council for Graduate Medical Education’s (ACGME) suspension of accreditation-related activities and position that work hour restrictions remain unchanged during the COVID-19 pandemic in order to protect vulnerable physicians in training. Furthermore, due to the widespread implementation of social distancing, COVID-19 has limited didactic education and simulation training for resident physicians and medical students. SAEM believes interventions that minimize the impact of COVID-19 on Emergency Medicine education should be sought and implemented for resident physicians and medical students, including the use of remote learning methods, as possible in light of local resources and disease patterns.
Finally, although learning about patient care during a pandemic is important, SAEM supports the position of the Association of American Medical Colleges (AAMC) that at this time, unless a locally critical health care workforce need exists, medical students should not be involved in any direct patient care activities in the Emergency Department during the COVID-19 pandemic. This action not only limits the medical student exposure risk but also serves to conserve the limited supply of personal protective equipment. We acknowledge that medical students may currently contribute to the pandemic response through tasks outside the clinical work environment.

Research

Emergency care research is also central to the SAEM mission. Although unfortunate, to protect physicians, learners, and research staff, SAEM currently supports the temporary suspension of human subjects recruitment in the clinical work environment except for in exceptional circumstances. SAEM does, however, support and strongly encourage discovery on the transmission, diagnosis, treatment, and prevention of COVID-19 through both prehospital and Emergency Department studies, to the extent that such work is done in a way to minimize risk to staff and researchers. To minimize the time from discovery to translation, both of the Society’s journals, Academic Emergency Medicine and Academic Emergency Medicine Education and Training, have created fast tracks for publications of articles related to COVID-19.

Professional Development

The impact of COVID-19 is wide ranging and impairs many of the scholarly and teaching activities performed by academic emergency physicians. Normal academic activities (e.g., research, academic presentations, lectures, mentorship, etc.) are now either delayed or entirely canceled. These activities are essential and required for faculty advancement. SAEM encourages institutions’ promotions and tenure committees to strongly consider the impacts of the COVID-19 pandemic when evaluating faculty dossiers. As the impact of COVID-19 is not yet fully known, SAEM implores these committees to have substantial flexibility and empathy when evaluating Emergency Medicine faculty scholarly and teaching activities during the COVID-19 pandemic.