
The Job Crisis for Emergency Physicians



Emergency physicians have always been guaranteed a good job after residency and have been able to find work wherever they wanted and whenever they wanted.

However, in recent years there has been a shift in the demand. According to data from the American College of Emergency Physicians (ACEP), in 2019, approximately 20% of emergency medicine residents reported that they had difficulty finding a job in their preferred geographic area or at their preferred salary. The situation has been even more affected by the COVID-19 pandemic as many hospitals have cut salaries and staff.

There has also been a change in the trends in the job market for emergency physicians. There is now an increased reliance on advanced practice providers and a proliferation of residency programmes. These developments are largely driven by financial considerations.

In 2021, ACEP developed a task force to further study this problem. The task force included representatives from ACEP, the Association of Academic Chairs of Emergency Medicine, and the Council of Residency Directors in Emergency Medicine. This task force discussed strategies to mitigate the problem, highlighting five tactics to improve job opportunities for emergency physicians in the future. These tactics include:

Raising the standard for emergency medicine residency programmes

One of the top proposals from the task force is to make procedural requirements more robust. Currently, emergency physicians are expected to do 35 intubations before board certification. However, studies suggest that 70 intubations are necessary to reach competency and more may be needed to achieve proficiency.

Making sure business interests do not eclipse education or patient care

The ACEP believes that education should be prioritised over profits. There should be a focus on other specialties and geographical locations that need emergency physicians, and existing programmes should be expanded in a responsible manner. Physician workforce trends should be monitored closely, and training programmes should be adjusted accordingly.

Protecting the role of board-certified emergency physicians

Nearly half of nurse practitioners and physician assistants who work in emergency departments work independently. ACEP does not support independent practice and believes that patients have the right to ask for the most adequately trained person leading the team in the ED. Findings from a survey show that 80% of adults trust physicians to deliver their medical care, only 9% trust nurse practitioners and 7% trust physician assistance.

Supporting emergency physicians in all communities

The ACEP also recommends encouraging emergency physicians to work in rural and low-density areas. The demand for emergency physicians in those areas is quite high. Hence, nudging emergency physicians to areas where they are needed can expand their presence and encourage residents to practice in resource-poor locations.

Expanding emergency physicians' skillset

The ACEP-led task force also recommends furthering the reach of emergency physicians. They should be looking at expanding into telemedicine, post-acute care, critical care medicine, proceduralists, hybrid delivery models and using their skills outside the four walls of a hospital.

Source: [Annals of Emergency Medicine](#)

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