

POLICY STATEMENT

Approved June 2022

Rural Emergency Medical Care

Revised June 2022 with current title

Originally approved June 2017 titled "Definition of Rural Emergency Medicine" Rural emergency medicine is urgent or emergent medicine practiced in geographic areas with low population densities and resource constraints, including ready access to more specialized care facilities. Rural emergency departments provide critical services for their communities, including facilitating earlier evaluation and entry into the healthcare system, stabilization and initiation of treatment, and coordinated transfer to a tertiary care facility. As rural emergency departments (EDs) provide a safety net for some of the country's most vulnerable and underserved communities, the American College of Emergency Physicians (ACEP) believes that all emergency care should be provided, directed, and/or supervised by a board-certified/board-eligible (BC/BE) emergency physician.

ACEP encourages endeavors to investigate volumes, clinician staffing patterns, and common barriers of care and staffing in rural settings and efforts to improve rural access to BC/BE emergency care. Avenues include, but are not limited to, creation of links between rural hospitals and larger health networks, rural medicine electives for students and residents, student loan forgiveness for physicians serving rural communities, and telemedicine.

ACEP encourages rural EDs to retain board certified emergency physicians (as defined by the ACEP policy statement "Definition of an Emergency Physician") to serve as ED medical directors and provide ACEP-led emergency medicine education so there will be physician-led teams in all United States EDs.