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National Pandemic Readiness: Ethical Issues

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The American College of Emergency Physicians (ACEP) believes that because pandemics may occur at any time, advance planning for these events is essential to protecting the public health. Therefore, ACEP recommends the following principles of pandemic preparedness:

1. Health care institutions should develop policies and protocols to ensure the availability of adequate pandemic resources, including hospital surge capacity, staffing, personal protective equipment, medications, and equipment.
2. Health care institutions should develop policies regarding allocation of scarce resources, which may include medications, ventilators, ICU beds, and other resources. Allocation decisions should be guided by policy and not be made in an ad hoc fashion at the bedside by treating physicians.
3. Emergency physicians should continue to serve their communities and nation during pandemics. Health care institutions, government, and other stakeholders should, in turn enable emergency physicians to protect themselves, their families, their co-workers, and their patients from undue risks in the provision of pandemic care. Those emergency physicians in personal health high-risk groups may receive due consideration for opting out of treating patients during a pandemic.
4. Emergency physicians should work with institutional and community leaders to use proven risk-communication methods to transparently communicate public health and safety information to staff, colleagues, and the public.
5. Claims of efficacy or testimonials should be avoided unless backed by appropriate scientific evidence. Those addressing the public should have requisite expertise.
6. Health care institutions should ensure availability of mental and behavioral health resources to health care workers.
7. Timely research on diagnostic and therapeutic measures is essential, and emergency physicians should participate in those research efforts.
8. To promote national pandemic readiness, ACEP will disseminate current, scientifically based information.