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General Messaging Guidance

As emergency physicians rapidly adapt their efforts to manage outbreaks of COVID-19, ACEP’s official messaging may change as well. The following talking points provide guidance on our priority messages, but they are not a script—it’s best when put you these messages into your own words that reflect the particular conditions in your area.

The facts about COVID-19 are changing quickly but what’s steady during these challenging times, and what’s important for any reporter to come away with, is a sense of:

- Your commitment to treat anyone, anytime.
- Your perspective on the frontlines.
- Your challenge. You train for this, but you are insufficiently protected and equipped.
- Your efforts. What are you personally doing to address these hurdles head on?

As you read the talking points below, think about how they apply to your own experience and personalize the bullet points, putting whomever you speak with in your shoes. The most powerful tool you have as communicators is your own stories. Policymakers and the public need to hear what’s happening on the ground, and no one can share that story better than you.

Gather your thoughts in advance of any conversation and seek opportunities to weave in your own experience. In addition to talking about what you see on the ground and what your patients face, explain the toll this virus is taking on your physical and mental health, your family, and how it may be disrupting your life and your ability to care for the rest of your patients.

Be sure to check www.emergencyphysicians.org for the latest patient information and ACEP’s COVID-19 Hub for additional PR resources and our current federal advocacy priorities.

Conditions and concerns will vary by state and community, but your local media is eager to feature local health experts like yourself. ACEP’s PR Department can work with you to tailor letters-to-the editor, op-eds, press releases or preparing for media interviews to help advocate for emergency physicians and protect patients. Please email PR@acep.org if you have questions or need assistance.
ACEP COVID-19 Resources

The American College of Emergency Physicians (ACEP) is regularly updating information for patients at: www.emergencyphysicians.org/COVID19 and providing clinical and policy guidance at: www.acep.org/COVID-19. We also have the following patient education resources available in Spanish on our website. We encourage you to help share our message via social media by following and liking ACEP’s public accounts on Twitter and Facebook.

PATIENT EDUCATION RESOURCES

**ER Safe: How Emergency Departments Adapt to Keep Communities Safe**
A worrisome ACEP poll showed that nearly a third of patients avoided the emergency department out of concern they could contract COVID-19. Emergency physicians remind people not to ignore the symptoms of a medical emergency and reassure everyone that the ED is the safest place to be in an emergency.

**Stay Safe. Cover your Face.**
Emergency physicians urge everyone to cover their face in public.

**Stop the Spread: A Patient Guide to the Novel Coronavirus (COVID-19)**
A comprehensive patient guide that includes tips on how to minimize the risk of contracting the virus and when to go to the emergency department.

**COVID-19: Protect Your Family and Your Home**
A one-page tip sheet on how to reduce the risk of contracting the virus—including whether people should wear a face mask.

**COVID-19: Know When to Go**
A one-pager that outlines what to do if you think you’re sick with COVID-19, including information about getting tested, and how to know when to go to the emergency department.

FEDERAL ADVOCACY & CLINICAL GUIDANCE

**Clinical Guidance and ACEP Member Network**
The ACEP COVID-19 website is a virtual hub that provides the latest clinical guidance and peer network for emergency physicians to support and troubleshoot challenges with your peers.

**Federal Policy Guidance and Announcements**
ACEP is tracking the latest policy changes and guidance from the federal government, including changes to EMTALA, telehealth, and reimbursement.

**ACEP's Current Federal Policy Requests**
A concise overview of ACEP’s current federal policy requests and recommendations to ensure emergency physicians have the resources and support they need to address this pandemic.

Talking Points
The following are talking points to use in conversations, interviews and social media with the general public. Feel free to use #StaySafeCoverYourFace, #ERSafe and #GetUsPPE when sharing these messages on social media.

**Stay Safe. Cover Your Face.**

- Covering your face when you need to be in public is one of the most effective—and easy—ways to protect yourself and others from COVID-19.

- Even if you don’t think you’re sick, it’s still smart to cover your nose and mouth with a mask or cloth because you could be infected and contagious but not show any symptoms.
  - Recent Centers for Disease Control and Prevention (CDC) data shows that at least 40 percent of positive cases are asymptomatic.
  - Wearing a cloth or homemade mask during those infrequent times when you need to be out in public, like going to the grocery store, will help prevent sick individuals from infecting others and slow the spread of the virus.

- Covering your face protects you and those around you from infectious droplets emitted when someone talks, breathes, coughs, or sneezes. These particles can remain airborne for up to three hours.

- Currently, the CDC recommends that anyone above the age of two should wear a face covering to minimize the risk of contracting, and spreading, COVID-19 while in public.

- Until we have a vaccine widely available, personal choices and safe behaviors—including practicing social distancing, covering our face when we’re around others, and frequently washing our hands—are the best defense against COVID-19.

**Avoiding a Holiday COVID-19 “Super Spreader” Event**

- The American College of Emergency Physicians (ACEP) recommends that holiday hosts and guests prioritize efforts to prevent the spread of COVID-19 and take steps to protect the health and safety of friends and family.

- The safest way to celebrate is stay home and limit travel. Anyone with a weakened immune system or certain medical conditions, as well as elderly individuals, are at higher risk of severe illness from COVID-19. Before socializing in-person, anyone who recently tested positive should meet all of the CDC criteria for when it is safe to be around other people.

- Emergency physicians recommend everyone heed the Centers for Disease Control and Prevention (CDC)’s holiday safety recommendations this year.
  - **Remember anyone can get or spread COVID-19.** Close friends and family with whom you don’t live with can still contract and spread the virus to you the same way a stranger could.
  - **Trim the guest list.** Rather than a specified “safe” number of guests, public health experts suggest that hosts determine the size of a gathering by how many guests from different households can remain at least six feet apart. Note that a “household” is made
of people who live in the same house every day. Family members who are close but don’t live at home, such as college students visiting for the holiday, are considered a separate household in public health terms.

- **Cover your face and maintain your distance.** It may be difficult but try to avoid hugs and handshakes. People should also cover their face when they are not eating or drinking.
- **Stay outside and stay safer.** If it is possible, hosting a small event outside instead of inside is preferable.
- **Encourage good hygiene.** Hosts should make sure that bathrooms have plenty of soap so guests can frequently wash their hands and dry them with single-use towels.

**Staying Vigilant During the Current COVID-19 Surges**

- The current surge of COVID-19 cases and hospitalizations is extremely concerning for emergency physicians, patients, and health systems.

- With the U.S. surpassing 11 million cases, and 1 million new cases recorded in just six days, this wave is bigger than what we experienced in the spring and is shaping up to be more dangerous, according to the American College of Emergency Physicians (ACEP) and other experts.
  - This surge is hitting with flu season and potential holiday gatherings to create a lethal combination.

- Many parts of the country are experiencing record-breaking hospitalization rates while facing significant hospital capacity and resource issues.
  - Hospitalization rates are rising in 47 states, and for at least 24 states, they are higher than any previous point of the pandemic, according to the COVID Tracking Project.
  - Data from Johns Hopkins University and other sources show that currently no state is seeing a declining number of cases.

- Emergency physicians urge everyone—patients, clinical leaders, policymakers, and local officials—to stay vigilant and work together to curtail illness and limit the losses that this virus causes.

- We need to continue taking steps to protect ourselves and our loved ones, including staying home as much as possible, practicing social distancing and covering our face when we’re around others, and frequently washing our hands.

- Without an all-hands-on-deck approach, COVID-19 is going to keep spreading and we risk losing more people.
  - Efforts to manage these surges vary across state lines and many are complicated by hospital staffing and resource shortages, a continued lack of personal protective equipment, an insufficient national testing infrastructure, and the spread of misinformation.
  - Emergency physicians are meeting with local and national health officials and leaders in states hit hardest to discuss resource shortages and mitigation strategies that best protect patients, specifically mask wearing and testing capabilities.

**ER Safe: How Emergency Departments Adapt to Keep Communities Safe**
• Emergency care teams have noticed a worrying trend of people avoiding or delaying seeking medical treatment, which can have life or death implications.
  o An April 2020 ACEP poll showed that nearly a third of patients avoided the emergency department out of concern they could contract COVID-19.
  o Patient volumes in some areas dipped as low as 40 percent across the country in areas that were not yet surging.

• Despite the uncertainty, you can count on emergency physicians to be ready and able to care for you anytime.

• Whether you are concerned you have COVID-19 or are having another medical emergency, it is critical to know when to go to the emergency department.

• Emergency departments across the country are adapting their policies and procedures to keep everyone safe.
  o Emergency physicians are trained to prevent the spread of highly contagious illnesses.
  o Emergency departments have greatly intensified their cleaning and disinfecting efforts.
  o Hospitals are using enhanced treatments to decontaminate the air and prevent the spread of the virus.
  o Anyone who comes to the emergency department will be screened on arrival for COVID-19 symptoms, often even before they enter its doors.
  o Be prepared to come alone and connect with your loved ones virtually during your visit or if you get admitted.
  o Some emergency departments have created separate entrances and external waiting rooms for patients with known symptoms.
  o Individuals who test positive or have suspected symptoms are kept separated from non-COVID patients.

FEDERAL POLICY AND ADVOCACY

The following are talking points to use in conversations, interviews and social media about ACEP’s advocacy priorities around COVID-19. You can find the latest federal updates and ACEP’s current federal priorities here.

Get Us PPE

If you have a personal story about running low on PPE, concerns about your hospital response to you procuring and wearing your own PPE, or experiences adapting PPE to suit your needs (reusing masks designed for one-time use, for example), please contact PR@acep.org to share your story. These stories will help make ACEP’s advocacy more effective.

• We have been battling COVID-19 for nearly a year and many continue to face shortages of personal protective equipment (PPE)—like N95 masks, gowns, face shields and eye wear—leaving millions of health care workers at risk in the midst of this outbreak when we need them most.
  o This challenge is especially difficult for smaller practices in rural or underserved areas.

• We can’t afford for emergency physicians and other frontline health care practitioners to get sick due to PPE shortages.
Now more than ever, patients need full access to America’s emergency care safety net.

- While PPE production is ramping up, there are still dire shortages in many emergency departments across the country, and we don’t see significant relief in the near future.

- We continue to urge the federal government to exhaust every option available to rapidly increase PPE production and prioritize distribution to emergency physicians and other frontline health care practitioners.

- Now is the time to use every tool at our disposal as we try to manage and stop the spread of COVID-19.
  - We need to take action now to fill this gap with every resource we have available, including from the Strategic National Stockpile.

- The American College of Emergency Physicians (ACEP) is working with corporate and nonprofit partners to help expedite the production and delivery of PPE to America’s frontline health workers.

- Best practices for many types of PPE include instructions for taking gear on and off and using items once. Under current circumstances, these practices are being adapted or worked around in as safe a manner as possible, but more is needed.

- It is imperative that we not only make sure emergency physicians and other frontline workers get PPE, but they must have their rights protected to wear it.

- ACEP strongly opposes efforts to silence, penalize, or unjustly terminate health workers simply for wearing their own makeshift PPE or speaking out about their unsafe working conditions.
  - ACEP will continue to fight for its members and stand in full force behind its statements on PPE and physician protections.

**Physician Mental Health**

ACEP is working to ensure that frontline physicians can safely seek mental health care without fear of professional consequences. In October 2020, ACEP released the results of a joint poll with Morning Consult of emergency physicians to explore the impact of the pandemic on their mental health and the current barriers to seeking treatment. If you have a personal story about how you’ve been hindered from seeking mental health support due to concerns around licensure, credentialing, or other professional impacts, we encourage you to anonymously share your story (if desired) to inform our advocacy efforts. You can also contact pr@acep.org if you’d like to share your story publicly.

- Emergency medicine can be a turbulent and overwhelming field for the physicians, nurses and other health care providers who are faced with life and death consequences each day.
  - In the last year, as many as 6,000 emergency physicians have contemplated suicide and up to 400 have attempted to take their own life.
  - Emergency physicians have historically had higher rates of career burnout and post-traumatic stress disorder (PTSD) than other medical specialties. Upwards of 65 percent of emergency physicians and emergency medicine resident physicians report experiencing burnout during their career.
  - Approximately 15 to 17 percent of emergency physicians, and upwards of 20 percent of emergency medicine residents met the diagnostic criteria for PTSD in 2019.
• Fighting the COVID-19 pandemic is taking an additional toll on the mental health of emergency physicians, and we don’t yet know the true extent it will have on everyone working on the frontlines.
  o We are in the fight of our lives and when our day ends, many of us retreat to solitude in hotels away from our homes, in our own garages, or even a tent in our backyards for weeks at a time to protect our loved ones rather than being able to seek their support.
  o More than eight in 10 (87 percent) of emergency physicians report feeling more stress since the start of the pandemic. Additionally, 72 percent report experiencing more burnout on the job.

• Despite the prevalence of depression, feelings of burn out, and other mental health issues, there is a legitimate fear of consequences that deters physicians from seeking the care they need, leaving many people with no better option than to suffer in silence.
  o Physicians seeking mental health treatment in our current system are concerned about losing their medical licenses or facing other professional setbacks.

• Nearly half (45 percent) of the nation’s emergency physicians do not feel comfortable seeking mental health treatment.
  o When it comes to seeking mental health treatment, 73 percent of emergency physicians feel there is stigma in their workplace.
  o Nearly three in five emergency physicians (57 percent) report they would be concerned for their job if they were to seek mental health treatment.

• More than a quarter (27 percent) report they have avoided seeking mental health treatment in fear of professional repercussions.
  o Emergency physicians who reported not seeking mental health treatments in fear of professional repercussions cited job security, professional stigma, and future job opportunities as reasons why.

• Some state licensing boards continue to ask intrusive questions about physicians’ mental health histories or past treatment that appear to violate the intent of the Americans with Disabilities Act—which prohibits discrimination against people with disabilities, including psychiatric disorders.
  o These intrusive questions about whether physicians have any psychiatric history have discouraged many who need mental health treatment from seeking it because of fear of the questions down the road.
  o Practicing physicians with histories of psychiatric disorders or mental health counseling have at times also faced discrimination with respect to receiving hospital credentials and privileges.

• We must make sure that physicians and other health care providers can safely secure treatment for mental or other health issues that do not affect patient care without repercussions to licensing, credentialing, or future employment.
  o Seeking care and support should be strongly encouraged, not penalized.
  o Instead of asking a blanket question about any past mental health conditions, it would be more appropriate if state licensing boards and other entities asked clinicians whether they currently have “any conditions for which they are not being appropriately treated, that would impair their judgment or that would otherwise adversely affect their ability to practice medicine in a competent, ethical and professional manner.”
• The American College of Emergency Physicians (ACEP) is leading the way to dismantle the current barriers for physicians who seek mental health treatment and reduce the stigma of physicians’ mental illness.
  o ACEP developed a statement with over 40 leading medical organizations, including the American Medical Association and the American Psychiatric Association, that outlines recommendations for removing existing barriers to seeking treatment, including the fear of reprisal, and better encouraging professional support and non-clinical mental health initiatives, such as peer support, for physicians.
  o ACEP strongly supports the Joint Commission stance that a health professionals’ history of mental illness should not be used as any indication of their current or future ability to practice medicine.
  o In Congress, ACEP supports several bipartisan bills in various stages in the House and Senate, including H.R. 7255: The Coronavirus Health Care Worker Wellness Act, which establishes a grant program to ensure emergency physicians and other frontline health care providers have access to the mental health resources they need during the COVID-19 pandemic, and the Dr. Lorna Breen Health Care Provider Protection Act, which has been introduced in the House and Senate. ACEP helped inform and develop these bills and strongly support their inclusion in upcoming COVID-19 legislation.
  o For its 40,000 individual emergency physician members, ACEP offers free mental health counseling sessions, peer-to-peer support meditation guides, a 24-hour support line and other tools and resources.

Testing & Supply Chain

• The U.S. is behind in efforts to build and mobilize a nationwide testing apparatus.
  o With better data we can make more informed decisions that improve access to care and treatment.

• Congress should prioritize resources to improve testing and contact tracing to monitor and mitigate COVID-19.
  o This effort should include authorizing the Food and Drug Administration for emergency approval for COVID-19 test production by U.S. companies for tests that are already in use around the world.
  o Testing, diagnosis and treatment should be fully covered by insurance companies, without patient cost-sharing and with appropriate physician reimbursement.

• In addition to PPE, we must prioritize the production of medications and supplies relevant to treatment of COVID-19.
  o We must make sure that medication and materials are distributed directly to needed sites of care including taking steps to increase transparency of the supply chain for these products to better identify and proactively address potential shortages.

Financial Support

• Many hospitals and medical employers are grappling with devastating drops in patient volume resulting in pay cuts, furloughs, and even layoffs. These outcomes may immediately threaten patients’ access to high-quality emergency care and have long-term consequences for the emergency medicine workforce pipeline.
• Congress should target and distribute federal and state emergency funding beyond hospitals so that available resources reach Emergency Medical Services, emergency physicians, and other relevant hospital-based specialty physicians who are not hospital-employed.
• We should also strengthen available aid packages to ensure financial stability of critical medical practices so that emergency physicians can treat patients, maintain readiness, and be fully prepared for patient surges.

Social Media Resources

The following are sample media posts, videos and graphics to share on Twitter and Facebook. Feel free to use #StaySafeCoverYourFace, #ERSafe and other relevant hashtags when sharing these messages.

STAY SAFE. COVER YOUR FACE.

Digital PSA
The following is a digital PSA that ACEP developed for social media related to our Stay Safe. Cover your Face campaign: https://www.youtube.com/watch?v=LD2AVHqqEkY&feature=youtu.be.

Sample Facebook Posts

• Just because you don’t have symptoms, doesn’t mean you haven’t been exposed to COVID-19. In fact, experts report that as many as 40% of those who become infected show no signs or symptoms. Do your part to protect yourself and others around you. Stay safe. Cover your face. https://bit.ly/2P6bn9E

• Did you know that the CDC currently recommends that anyone over the age of 2 should cover their face in public to minimize the risk of contracting and spreading COVID-19? Stay safe. Cover your face. https://bit.ly/2P6bn9E

• Help protect yourself and the ones you love by continuing to cover your face when you need to be around others. Stay safe. Cover your face. https://bit.ly/2P6bn9E

• Until we have a vaccine, personal choices and safe behaviors, such as continuing to wear a mask or cloth covering while in public, remain our best defense against COVID-19. Do your part. Stay safe, cover your face. https://bit.ly/2P6bn9E

Sample Twitter Posts

• Covering your face protects you and those around you from infectious droplets emitted when someone talks, breathes, coughs, or sneezes. Help ER physicians stop the spread #StaySafeCoverYourFace https://bit.ly/2P6bn9E

• Until we have a vaccine, personal choices and safe behaviors remain our best defense against COVID-19. Do your part to help stop the spread. #StaySafeCoverYourFace https://bit.ly/2P6bn9E
• Did you know, @CDCgov currently recommends that anyone over 2 years old should wear a face covering to minimize the risk of contracting, and spreading COVID-19? #StaySafeCoverYourFace https://bit.ly/2P6bn9E

• Even if you don’t currently have symptoms of COVID-19, you could still be infected and contagious. Please cover your face when in public. #StaySafeCoverYourFace https://bit.ly/2P6bn9E

Sample Social Cards

Click here to download a ready-to-go version of these social cards or tailor a version in PowerPoint to include your chapter’s logo.

CDC data shows that at least 40 percent of positive COVID-19 cases are asymptomatic. Covering your face protects you from unknown dangers.

HOLIDAY COVID-19 “SUPER SPREADER” EVENTS

Sample Facebook Posts

• It’s the holiday season, and COVID-19 is surging in states across country. Even small household gatherings can become super spreader events if we don’t take precautions. Check
out these tips from emergency physicians to ensure you have a safe holiday and avoid a trip to the ER: https://bit.ly/32P6c5a

• This holiday season, it’s not just the turkey you’ll want to think about trimming. Limiting your holiday guest list is one way to prevent the spread of COVID-19: https://bit.ly/32P6c5a

• This year, responsible holiday hosts and guests are taking precautions to change the way they celebrate to avoid inviting COVID-19 into their homes. In addition to frequently washing your hands and maintaining your distance, emergency physicians and the CDC recommend these tips to have a safe holiday season: https://bit.ly/32P6c5a

• Disrupting holiday plans is never ideal. However, the choices made during this holiday season could be the difference between life and death. That may mean certain people should stay home or visit virtually rather than seeing friends and family in person. https://bit.ly/32P6c5a

Sample Twitter Posts

• It is not just the large crowds that cause concern among health professionals. Check out these tips from emergency physicians to prevent your holiday gathering from becoming a #COVID19 “super spreader” event: https://bit.ly/32P6c5a.

• This holiday season, it’s not just the turkey you’ll want to think about trimming. Limiting your holiday guest list is one way to prevent the spread of #COVID19: https://bit.ly/32P6c5a.

• This year, responsible holiday hosts and guests are taking precautions to avoid inviting #COVID19 into their homes. Emergency physicians and @CDCgov have tips for a safe holiday season: https://bit.ly/32P6c5a.

• Disrupting holiday plans is never ideal. However, the choices made during this holiday season could be the difference between life and death. Take care and follow these tips to stay safe this season: https://bit.ly/32P6c5a #COVID19

Sample Social Cards

Click here to download a ready-to-go version of these social cards or tailor a version in PowerPoint to include your chapter’s logo.
STAYING VIGILANT AMIDST A COVID-19 SURGE

Digital PSA
The following is a digital PSA that ACEP developed for social media related to maintain safe practices during a COVID-19 surge: https://www.youtube.com/watch?v=DaFKiDzyRU.

Sample Facebook Posts

- COVID-19 is spiking in our state and we cannot let our guard down now. Emergency physicians urge everyone to stay vigilant during these colder months. Practice social distancing, cover your face, and wash your hands regularly. https://bit.ly/36M6H1c

- Let’s all work together to prevent the spread of COVID-19. Emergency physicians continue to meet with our local and state officials to discuss ways to stop the spread and limit the losses that this virus causes. https://bit.ly/38Ro5nT
• We are experiencing record-breaking numbers of patients in our hospitals. Emergency physicians will be there to protect patients 24/7. We are doing our best, but a team effort is the only way we can limit the spread of COVID-19. Now is the time to trust the experts—everyone can do their part! https://bit.ly/36M6H1c

Sample Twitter Posts

• The nation’s frontline physicians urge everyone—patients, clinical leaders, policymakers, and local officials—to stay vigilant and work together to curtail #COVID19 and limit the losses that this virus causes. https://bit.ly/36M6H1c

• Emergency physicians are meeting with state and local leaders to discuss resource shortages and mitigation strategies to best protect patients. As #COVID19 surges, there are steps we can take now to strengthen the frontlines and keep people safe. https://bit.ly/38Ro5nT

• #COVID19 is spiking and we cannot let our guard down now. Practice social distancing, wash hands regularly and cover your face. Stay vigilant and save lives! https://bit.ly/36M6H1c

Sample Social Cards

Click here to download a ready-to-go version of these social cards or tailor a version in PowerPoint to include your chapter’s logo.
The mix of flu season and this current wave of COVID-19 could be a lethal combination.

Continue taking steps to protect yourselves and your loved ones.

FACT:

More than 11 million people in the U.S. have been diagnosed with COVID-19, and more than 250 thousand people have lost their lives.

Emergency physicians encourage you to stay safe and vigilant during this current surge.

ER SAFE

Digital PSA

The following is a digital PSA that ACEP developed for social media related to our ER Safe campaign: https://www.youtube.com/watch?v=OMVr3zVpV7A.

Sample Facebook Posts

- ER physicians are concerned by trends showing that those in need of potentially life-saving treatment have delayed or avoided trips to the ER out of fear of contracting COVID-19. Rest assured ERs across the country are taking measures to keep everyone healthy. https://bit.ly/3jUkEzK

- ERs across the country are adapting their procedures as more is discovered about the virus and how to treat it. Many are utilizing new telehealth technology for remote consultations or to even connect with loved ones while they are admitted. https://bit.ly/3jUkEzK
• Check with your local hospital or ER to see how they are adapting to COVID-19. https://bit.ly/3iUkEzK

• Despite the uncertainty, emergency physicians and their care teams are ready and able to care for you anytime. Whether you are concerned you have COVID-19 or are having another medical emergency, it is critical to know when to go the ER. https://bit.ly/3iUkEzK

Sample Twitter Posts

• Experts have noticed that people are delaying visits to the ER for potentially life-threatening emergencies due to fear of COVID-19. ACEP wants you to know that the ER is still the best place to get medical care in an emergency. https://bit.ly/3iUkEzK #ERSafe

• ERs across the country are adapting their policies and procedures to help protect those facing emergencies from contracting COVID-19. Here are a few things front line workers are doing to help protect you during a trip to the ER. https://bit.ly/3iUkEzK #ERSafe

• Did you know that some ERs have created separate entrances and external waiting rooms for patients with known symptoms? Find out the other ways ERs across the country are keeping everyone safe during COVID-19. https://bit.ly/3iUkEzK #ERSafe

Sample Social Cards

Click here to download a ready-to-go version of these social cards or tailor a version in PowerPoint to include your chapter’s logo.
COVID-19 Surge Press Release Template

The following is a template press release for ACEP chapters to tailor using local statistics and quotes from their leadership. This template is based off a recent press statement that ACEP put out. Contact PR@acep.org if you need help tailoring letters-to-the-editor, op-eds, press releases or preparing for media interviews to help advocate for emergency physicians and protect patients.

FOR IMMEDIATE RELEASE

DATE

Emergency Physicians Urge People to Stay Safe as COVID-19 Surges in [State]

CITY, STATE—The current surge of COVID-19 cases and hospitalizations is extremely concerning for emergency physicians, patients, and health systems. With [STATE] now surpassing [XXX NUMBER] cases, this wave is bigger than what we experienced in the spring and is shaping up to be more dangerous, according to the [STATE CHAPTER American College of Emergency Physicians].

[STATE]'s frontline physicians urge everyone—patients, clinical leaders, policymakers, and local officials—to stay vigilant and work together to curtail illness and limit the losses that this virus causes.

[Sample quote: “The combination of flu season and the potential for holiday gatherings can create a lethal combination in communities across STATE Everyone should listen to the public health experts and take steps to protect themselves and the people they care about. All signs point to the weeks ahead being the hardest yet,” said STATE CHAPTER PRESIDENT.]

[INSERT STATE SPECIFIC DATA: Hospitalization rates are rising in 47 states and, for at least 24 states they are higher than any previous point of the pandemic, according to the COVID Tracking... ]
Project. Data from Johns Hopkins University and other sources show that currently no state is seeing a declining number of cases.

Efforts to manage these surges vary across the state and many are complicated by hospital staffing and resource shortages, a continued lack of personal protective equipment, an insufficient national testing infrastructure, and the spread of misinformation.

Emergency physicians are meeting with our local and national health officials and leaders to discuss resource shortages and mitigation strategies that best protect patients, specifically mask wearing and testing capabilities.

The best way for STATIANS to beat this virus is work together and continue to keep our guards up. We can all do our part to limit the spread of COVID-19 by continuing to stay home as much as possible, social distancing and covering our face when we’re around others, and frequently washing our hands.

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[INSERT CHAPTER BOILERPLATE INFORMATION]

Contact: [NAME, PHONE, EMAIL, SOCIAL MEDIA]