Statement of Principles

We, the undersigned emergency medicine organizations, recognize the promise and risks of artificial intelligence (AI) in emergency care. We affirm our shared commitment to advocate for the deployment of AI safely and equitably. We commit to working collaboratively to establish and maintain principles that protect patients and support clinicians to the highest ethical standards. We specifically endorse the following principles:

1. AI integration must be human-centered, in which emergency physicians retain authority for patient care decisions (Human-in-the-loop). AI must enhance, not replace, clinical judgment, and must preserve the physician-patient relationship.
2. AI implementation must occur under a physician-led governance framework, ensuring emergency physicians maintain primary input in the selection, design, validation, and use of AI tools in emergency care.
3. AI adoption must prioritize patient safety, care quality, and clinical outcomes.
4. Standards for AI transparency must promote equitable and safe clinical use. We further endorse shared accountability among clinicians, vendors, and institutions for patient outcomes influenced by AI.
5. Competency-based educational frameworks for AI encourage that emergency medicine trainees first demonstrate clinical reasoning and clinical skills with progressive, supervised integration of AI tools into their practice as their clinical competency develops.
6. When AI is used to support scholarly activity advancing the specialty of emergency medicine, its use must be clearly disclosed to maintain transparency and academic integrity.
7. Training emergency physicians on the safe and effective use of AI is a prerequisite to deployment and is essential to responsible use of AI in practice.
8. There must be proactive design, deployment, and monitoring of AI applications across diverse patient populations and practice settings to mitigate bias and ensure equitable patient care outcomes.
9. Policies, regulations, and organizational practices must ensure data privacy, obtain consent for data use, and promote the responsible utilization of acquired data by AI systems linking this transparency to informed consent, disclosure, and shared decision-making for patients and clinicians.
10. AI tools must be developed and validated for emergency medicine’s unique environment, such as time-critical workflows, diagnostic challenges, and patient complexity. Emergency medicine organizations believe that evidence-based deployment of AI requires independent validation, real-world performance monitoring, and continuous quality improvement.