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Firearm Safety and Injury Prevention

Revised June 2024,
October 2019, April 2013 with
current title, replacing
rescinded policy statement
titled “Firearm Injury
Prevention,” October 2012,
January 2011

Reaffirmed October 2007

Originally approved February
2001 replacing: “Firearm
Dealers” (CR 1994), “Firearm
Legislation” (CR 1989),
“Firearm Possession” (CR
1994), “Firearms-Consumer
Product Safety” (CR 1994),
“Handgun Ownership” (CR
1993), “Handgun Purchase”
(CR 1994), “Handguns”
(CR 1985), “Handguns and
Handgun Ammunition-Federal
Taxes” (CR 1994),
“Handguns-Size and Safe
Design Requirements” (CR
1995), and Semiautomatic
Weapons” (CR 1989)

The American College of Emergency Physicians (ACEP) hereby declares that firearm injury is a public health crisis and condemns the current rates of injury and death from firearms in the United States. Firearm injury is a leading cause of death among young Americans, is the most common means of suicide death among all Americans, and has psychological and financial ramifications for victims, families, and the healthcare system. As emergency physicians, we witness the toll firearm injuries take on our patients each day across the United States. We support the need for policies, funding, and research to help address this critical issue.

ACEP supports legislative and regulatory efforts that:

- Actively support both private and public funding into firearm safety and injury prevention research¹⁻³;
- Protect the duty of physicians to discuss firearm safety with patients;
- Support universal background checks and mandatory waiting periods for all firearm transactions, including private sales and transfers⁴⁻⁵;
- Support adequate enforcement of existing laws and support new legislation that prevents high-risk and prohibited individuals from obtaining firearms;
- Restrict the sale and ownership of weapons, munitions, and large-capacity magazines that are designed for military or law enforcement use, and prohibit the sale of after-market modifications that increase the lethality of otherwise legal firearms;
- Support prohibitions on 3-D printing of firearms and their components (so-called “ghost guns” or other technologies that seek to bypass regulations).

ACEP supports public health and health care efforts that:

- Investigate the effect of social determinants of health and other cultural risk factors on patterns of firearm injury (eg, poverty, intimate partner violence, prior exposure to violence, the relationship between communities and law enforcement);
- Support a confidential national firearm injury research registry while encouraging states to establish a uniform approach to tracking and recording firearm-related injuries (eg, homicide, suicide, unintentional, self-defense, intimate partner violence, officer-involved, line-of-duty, etc.).

- Promote access to effective, affordable, and sustainable mental health services for emergency department patients with acute mental illness for whom access to a firearm poses a real risk to life for themselves or others;
- Provide health care providers with information on the most effective ways to counsel patients and families on proper firearm safety, emphasizing evidence-based methods that are shown to reduce intentional and unintentional injuries⁶⁻⁸;
- Support research into public policies that may reduce the risk of all types of firearm-related injuries, including risk characteristics that might make a person more likely to engage in violent and/or suicidal behavior^{2,7,8};
- Support community-based and hospital-based programs that would allow early intervention to prevent firearm related injuries and their long-term consequences.^{6,9}

References

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