

Beyond the Crisis: How Emergency Medicine Specialist Wellness can Transform Emergency Care in India: A Position Statement from the Society for Emergency Medicine India

Sowjanya Patibandla¹, TS Srinath Kumar², Imron Subhan³, Saravana Kumar⁴, Rajadurai Meenakshisundaram⁵, Sudip Chakraborty⁶, Rajani Adepu⁷

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INTRODUCTION

Emergency medicine (EM) is a medical specialty focused on the immediate decision-making and action necessary to prevent death or any further disability. This discipline involves the rapid diagnosis and treatment of patients with acute illnesses or injuries that require immediate medical attention. It is an integral part of any healthcare system, serving as the frontline for patient care during emergencies.

The Staggering Prevalence of Emergency Medical Conditions

The need for EM care is significant. In the United States alone, Emergency Departments manage over 136 million patient visits annually.¹ Globally, according to a World Health Organization (WHO) report, injuries are the leading cause of death for young people aged 15–29 years, and account for over 1.35 million deaths annually.² These statistics highlight the critical role of EM in saving lives and preventing long-term complications.

The Indispensable Role of Emergency Medicine

Emergency Medicine is critical because of the following salient features:

- **Immediate care:** It ensures timely intervention, which can be life-saving for patients suffering from critical conditions such as heart attacks, strokes, trauma, and severe infections. Studies have shown that hospitals with dedicated Emergency Departments experience a 15% reduction in mortality rates for patients with acute myocardial infarction (AMI) compared to hospitals without.³
- **24/7 Availability:** Emergency medicine departments operate around the clock, offering continuous access to healthcare services for all patients, regardless of the time or day.
- **Comprehensive Care:** Emergency medicine specialists are trained to handle a broad spectrum of medical emergencies, making it a versatile field that can manage diverse patient needs.
- **Public Health Role:** Emergency departments play a vital role in public health surveillance, identifying and responding to outbreaks of infectious diseases and other public health threats. A 2019 study by the Centers for Disease Control and Prevention

¹Department of Emergency Medicine, Yashoda Hospitals, Hitech City, Hyderabad, Telangana, India

²Department of Emergency Medicine, Sparsh Group of Hospitals, Bengaluru, Karnataka, India

³Department of Emergency Medicine, Apollo Hospitals, Hyderabad, India

⁴Department of Emergency Medicine, Dr. Mehta's Multispecialty Hospitals, Chennai, Tamil Nadu, India

⁵Department of Emergency Medicine and Critical Care, Apollo KH Hospital, Ranipet, Tamil Nadu, India

⁶Department of Emergency Medicine, Narayan Memorial Hospital, Kolkata, West Bengal, India

⁷Department of Pharmacy Practice, Sri Venkateswara College of Pharmacy, Tirupati, Chittoor, Andhra Pradesh, India

Corresponding Author: Sowjanya Patibandla, Department of Emergency Medicine, Yashoda Hospitals, Hitech City, Hyderabad, Telangana, India, Phone: +91 9494414911, e-mail: miraculousdoc@gmail.com

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(CDC) highlighted the role of Emergency Departments in detecting opioid overdose outbreaks.⁴

- **Comprehensive Training:** Emergency medicine provides a unique training ground for medical students to develop crucial skills in rapid assessment, diagnosis, and treatment of acute conditions. This training is indispensable for producing well-rounded physicians capable of handling a wide array of medical emergencies.

Standardisation and System Efficiency

A dedicated EM workforce fosters standardisation of care across healthcare facilities. This ensures consistent application of

best practices, regardless of location or resource limitations. Furthermore, emergency physicians streamline patient flow within hospitals, reducing overcrowding and wait times in Emergency Departments. A study published in the *Annals of EM* found that hospitals with dedicated EM departments experienced a 20% decrease in patient wait times compared to those without.⁵

Making Emergency Medicine Mandatory

Enhancing Patient Outcomes: Studies have consistently shown that hospitals with dedicated EM departments experience improved patient outcomes due to the specialised and prompt care provided.³

A 2017 study in *EM Journal* found a 15% reduction in mortality rates for patients with AMI at hospitals with dedicated emergency departments compared to those without.³

Efficient Healthcare Delivery: Emergency medicine specialists are skilled in triage and acute care, optimising resource utilisation and reducing wait times and hospital overcrowding.⁵

A study published in the *Annals of EM* showed a 20% decrease in patient wait times in hospitals with dedicated EM Departments.⁵

Preparedness for Disasters: Specialised training in EM prepares physicians to respond effectively to mass casualties and disasters, ensuring better preparedness and response.⁶

Training Future Physicians: Medical colleges with mandatory EM training produce well-rounded physicians who are adept at handling emergencies, thus improving the overall quality of healthcare. A 2018 study in the *Journal of Postgraduate Medicine* found that medical graduates with exposure to EM training demonstrated significantly better scores on EM knowledge assessments compared to those without such training.⁷

Addressing Counter-arguments

While some may argue that making EM a mandatory speciality could increase training costs for medical institutions, the long-term benefits outweigh these initial investments. Improved patient outcomes, reduced hospital overcrowding, and a more resilient physician workforce ultimately translate to cost savings within the healthcare system. Additionally, exploring alternative training models, such as online modules or simulation training, can help optimise resource allocation.

The Roles and Realities of Emergency Physicians

Emergency physicians fulfil a multifaceted role within the healthcare system:

- **Resuscitation and Stabilisation:** Emergency physicians are the first responders in critical situations, performing life-saving procedures and stabilising patients before definitive treatment.
- **Diagnosis and Management:** Emergency Medicine training enables doctors to diagnose a broad spectrum of illnesses and injuries efficiently, initiating appropriate treatment plans.
- **Collaboration and Coordination:** Emergency Physicians work seamlessly with nurses, paramedics, specialists, and other healthcare professionals to ensure comprehensive patient care.

However, the demanding nature of EM comes at a cost.

- **High-stress Environment:** Emergency physicians face constant pressure, working long hours in unpredictable and often chaotic situations.
- **Burnout and Compassion Fatigue:** These factors contribute to high rates of burnout and compassion fatigue among emergency physicians, potentially impacting patient care and physician well-being.

The Silent Threat: Physician Burnout

Despite the life-saving impact of EM, the speciality faces a significant challenge: Burnout.⁸ A 2020 study published in *Academic EM* reported that over 50% of emergency physicians in the United States experience burnout.⁹ This not only impacts physician well-being but can also negatively influence patient care.

Prioritising Physician Wellness

Investing in physician wellness programmes is paramount to sustaining a robust EM workforce. The Society for Emergency Medicine India (SEMI) advocates for initiatives that promote work-life balance, mental health support systems, strategies to reduce administrative burdens and robust peer support networks. A well-rested and resilient physician workforce translates to better patient care, improved staff morale, and reduced turnover rates within emergency departments.¹⁰

SEMI recognises the importance of promoting wellness among emergency physicians to ensure their physical, mental, and emotional well-being.

Promoting wellness among emergency physicians is crucial for:

- **Sustaining Workforce:** Ensuring the mental and physical well-being of physicians help maintain a capable and effective workforce.
- **Improving Patient Care:** Healthy and well-rested physicians are more likely to provide high-quality care and make sound clinical decisions.
- **Reducing Burnout:** Implementing wellness programmes and support systems can reduce burnout rates, enhancing job satisfaction and retention.
- **Enhancing Professional Fulfilment:** A focus on wellness contributes to a more fulfilling and balanced professional life, encouraging physicians to continue in their roles long-term.

Work Management

Working Hours and Shift Management

- **Emergency Physicians:** Physicians in EM should work a maximum of 48 hours per week, in accordance with institutional policies and national regulatory guidelines. Shift schedules for residents shall be structured to provide adequate rest between shifts and minimise fatigue. Night shifts, week ends, holidays and odd-hour shifts shall be rotated among Physicians to distribute the workload evenly and prevent burnout. Institutes may consider providing extra pay allowances or reducing the number of working hours to facilitate optimal work in a stressful environment of an emergency department.^{11,12}

- Over-time: Emergency physicians play a vital role in providing timely and critical care to patients in emergency departments. This policy outlines the guidelines and procedures for managing over-time work for emergency physicians to ensure fair compensation and adherence to working hour regulations. Over-time is defined as any hours worked by emergency physicians beyond their regular scheduled 48-hour workweek.

Calculation and Compensation

For every hour worked beyond the standard 48-hour workweek, emergency physicians will be compensated on an hourly basis at a rate determined by institutional policies and regulations.

Authorisation and Approval Process

The Institute should have measures or process in place to specifically measure the over-time work provided by the emergency physicians and compensated appropriately for the over-time provided. However Institutes should take all the feasible measures to avoid over-time among the emergency physicians to prevent burnout:

- Emergency physicians seeking authorisation for over-time work must submit a request detailing the duration and reason for the deviation from the standard workweek as per the institutional policy.

Documentation and Reporting

- All over-time and under-time work must be accurately documented and recorded in the physician's timekeeping records, electronic health records, or designated documentation systems.
- Documentation should include the date, time and duration, reason for over-time or under-time, and authorisation/approval details.

Compensation and Benefits

- Emergency physicians will receive compensation for over-time or under-time work based on the hourly rate established by institutional policies.
- Compensation may include additional pay for over-time work or adjustments to salary for under-time work, as per institutional regulations.
- Emergency physicians will continue to receive standard benefits and entitlements based on their employment contracts, regardless of over-time or under-time status.

Coping with Shift Work

Coping Strategies

- Emergency physicians shall be provided with resources and support to cope with the challenges of shift work, including stress management techniques, relaxation exercises, and access to counselling services.
- Institutions shall promote a culture of peer support and open communication to encourage emergency physicians to share their experiences and seek assistance when needed.

Wellness Initiatives

- Institutions shall implement wellness initiatives such as mindfulness programmes, exercise classes, and nutrition

- workshops to support the physical and mental well-being of emergency physicians.
- Support for Women in EM.

Women in Emergency Medicine

There is the gradual increase in the women workforce in EM. With the demanding nature of EM, women during pregnancy face various work hazards during pregnancy and lactation. Recent research has shown that the risk of miscarriage for women in Medicine is double the risk for the general public. Given the increased number of women in the workforce, it is critical that SEMI consider the effects of our work on pregnancy outcomes and adopt best practices to minimise the occupational risks to pregnant physicians.

Antepartum Period

Due to the rigorous shifts with long hours of standing, shifting schedules and night shifts led to increased fatigue, and poor sleep hygiene. These effects are compounded during pregnancy and can lead to changes in worse pregnancy outcomes. Hence, pregnant emergency physicians shall be provided with accommodations and support to ensure their safety and well-being during the antepartum period. This may include modified duties, reduced work hours, or temporary reassignment to lower-risk tasks.

SEMI Recommendations

- The choice to opt out of nights during the first and third trimesters.
- Exemption from any mandatory over-time during the third trimester.
- Scheduling easily cancellable/coverable shifts during the third trimester.
- Backup call that includes coverage for pregnancy-related conditions including miscarriage.
- Scheduling which accounts for breaks to eat, drink or use the restroom.

Postpartum Period and Lactation

Emergency physicians returning to work after childbirth shall be provided with support for lactation, including access to lactation rooms, breast pump facilities, and flexible scheduling to accommodate breastfeeding breaks.

SEMI Recommendations

- Provide adequate Staffing models that allow for breaks for lactating and nonlactating mothers.
- Provide adequate space and privacy to encourage pumping at work.
- Assign champions to support returning women to work by offering cross-coverage and other support required.
- The choice to opt-out of nights during the first year of childbirth.
- Exemption from mandatory over-time during the first year of childbirth.

Maternity Leave

Emergency physicians shall be entitled to maternity leave as per government regulations. However, the trainees in emergency medicine who take the entitled maternity leave will also have their training period extended in order to complete the required hours of

PG training. Extension of training must be approved by the institute prior to commencing the leave period.

Leave Policy for Emergency Physicians

Annual Leave

- Emergency physicians shall be entitled to a maximum of 12 days of annual leave per year or as per institutional policies.
- Leave shall be scheduled in advance and approved by the relevant authorities to ensure adequate coverage of emergency services.

Extended Leave

Emergency physicians shall not take more than 15 consecutive days of leave during residency. Extended leave may require the physician to repeat the training period to fulfil the required hours.

Importance of Sleep in Emergency Medicine

Sleep plays a crucial role in the well-being and performance of emergency physicians. The nature of EM, which runs 24/7/365, across holidays, birthdays, and weekends all the same and standards of the care and quality of care do not vary by the sun. This can significantly impact sleep patterns and quality. Society for EM India (SEMI) aims to provide guidelines for emergency physicians to effectively manage sleep before, during, and after night shifts, ensuring their safety, health, and optimal performance.

Strategies for Effective Sleep amidst Rotating Shifts

- **Sleep:** Sleep needs to be a priority over the daily chores after a night shift. Don't schedule meetings in the middle of your daytime sleep. Let your family and friends know your daytime sleep schedule so that you are not disturbed during that period.
- **Darkness:** Our bodies want to sleep when it is dark. Create a dark, quiet place for daytime sleep. Darkness and cool temperature are needed to foster REM sleep.
- **Split Sleep Sleeping:** Split sleep Sleeping is a technique involving 3–4 hours immediately before and 3–4 hours immediately after a night shift. The rationale is that at least part of each sleep episode is during the circadian period when sleep is expected.
- **Caffeine Intake:** Moderate caffeine consumption during the night shift can enhance cognitive function and vigilance. Emergency physicians should limit caffeine intake to avoid disrupting daytime sleep and dependency.
- **Exercise:** Exercise can help in adopting shift work. Not only does exercise improve general mood but also promotes alertness on night shifts. Aerobic exercise immediately after awakening, no matter what shift you are working, is more effective.

Emergency physicians should regularly assess their sleep quality, daytime alertness, and overall well-being. Identify any signs of sleep deprivation or sleep disorders and seek appropriate medical evaluation and intervention if needed.

Identifying Burnout and Developing Wellness Strategies in Emergency Medicine

Emergency medicine is a demanding field that places significant physical, emotional, and cognitive demands on healthcare providers. Burnout, characterised by emotional exhaustion, depersonalisation, and reduced personal accomplishment, is a prevalent issue among emergency physicians. Society for EM

India aims to provide guidelines for identifying, preventing, and managing burnout while promoting wellness while working in EM.

Identifying and Preventing Burnout

Recognising Signs of Burnout

Educate emergency physicians about the signs and symptoms of burnout, including feelings of exhaustion, cynicism, and reduced job satisfaction. Encourage physicians to self-assess their well-being regularly and seek support if they experience symptoms of burnout.

Stress Management

Provide training in stress management techniques, such as time management, prioritisation, and effective coping strategies, to help emergency physicians navigate the challenges of their profession.

Work-life Balance

Promote a healthy work-life balance by encouraging emergency physicians to set boundaries between work and personal life, prioritise self-care, and allocate time for hobbies and leisure activities.

Wellness Strategies

Hobbies

Encourage emergency physicians to pursue hobbies and interests outside of work to promote relaxation, creativity, and personal fulfilment. Examples include reading, gardening, trekking, painting, or playing musical instruments.

Nutrition

- Provide access to nutritious food options in the workplace, such as healthy snacks and meals, to support energy levels, cognitive function, and overall well-being.
- Educate emergency physicians about the importance of balanced nutrition and hydration in maintaining physical and mental health.

Exercise

- Promote regular physical activity among emergency physicians through on-site fitness facilities, exercise classes, or outdoor recreational activities.
- Encourage physicians to incorporate aerobic exercise, strength training, and flexibility exercises into their routine to improve cardiovascular health, muscle strength, and stress management.

Mindfulness and Meditation

- Offer mindfulness and meditation programmes to help emergency physicians cultivate present-moment awareness, reduce stress, and enhance resilience.
- Provide resources such as guided meditation sessions, mindfulness apps, or mindfulness-based stress reduction (MBSR) courses to support ongoing practice.

CONCLUSION

Investing in EM is an investment in the health and well-being of the entire nation. By ensuring a robust and well-resourced EM system, we can significantly improve patient outcomes, reduce the burden on healthcare systems, and create a more sustainable and resilient healthcare infrastructure. The SEMI urges policymakers and healthcare leaders to recognise the critical role of EM and prioritise its

development. Implementing mandatory EM training and fostering a culture of physician wellness are crucial steps towards achieving this goal. This will not only benefit patients in their time of greatest need but also create a more positive and rewarding work environment for EM professionals, ultimately leading to a healthier India for all.

ORCID

Sowjanya Patibandla  <https://orcid.org/0009-0005-1888-6991>

TS Srinath Kumar  <https://orcid.org/0000-0002-6712-5700>

Imron Subhan  <https://orcid.org/0000-0002-5054-1505>

Saravana Kumar  <https://orcid.org/0000-0003-0569-3582>

Rajadurai Meenakshisundaram  <https://orcid.org/0000-0002-5811-3062>

Sudip Chakraborty  <https://orcid.org/0009-0005-9849-2844>

Rajani Adepu  <https://orcid.org/0009-0004-3966-0556>

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