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Members of the American Academy of Physical Medicine & Rehabilitation:

[AAPM&R Position Statement on the Necessity and Preservation of Personal Protective Equipment](#)

The American Academy of Physical Medicine and Rehabilitation (AAPM&R), the national medical organization representing more than 9,000 physicians who are specialists in physical medicine and rehabilitation (PM&R) and are also known as physiatrists, is compelled to raise awareness of the extreme shortage of personal protective equipment (PPE) and assert the critical need for physiatrists, as well as all health care workers, to have adequate protection when caring for patients. The world is in the midst of the COVID-19 pandemic, and the United States in particular has reached the status of epicenter after rising to the highest number of confirmed infections globally as of March 26, 2020. New information about the novel coronavirus becomes available every day of this fast-moving crisis. At this time carriers of the COVID-19 virus can be without symptoms and can spread the infection to others, placing medical personnel and patients at high risk for both contracting and further spreading the disease if proper protective measures are not practiced. Inadequate means of widespread and rapid testing for the COVID-19 infection in the United States is further compounding the problem. Use of PPE including masks, gowns, and gloves provides a necessary barrier to decrease risk and a layer of reassurance for both patients and health care providers.

AAPM&R is adamant that physiatrists and all caregivers must have access to and be permitted to use PPE for all face-to-face interactions. Physiatrists treat patients with a vast variety of conditions, including immunocompromising illnesses, and are doing their part to keep patients from presenting in potentially overwhelmed hospitals and emergency departments. For physiatrists and their health care teams to safely and effectively treat patients, they need to safeguard their own health. In situations where PPE is not supplied by their employer, AAPM&R supports our members' need to supply their own PPE without any threat of discipline or other negative consequences. AAPM&R strongly objects to health care providers being forced to deliver in-person patient care without availability of appropriate PPE.



In line with recommendations from the CDC, multiple state medical boards, and others, the AAPM&R’s Board of Governors, in a statement released on March 20, 2020, urged all members in the outpatient community to “immediately transition to virtual medical appointments (e.g., telemedicine) for those patients who do not have emergent or urgent medical conditions.” The Board’s recommendation was intended to “reduce the risk of both exposure and transmission of COVID-19 between and among patients, providers, and medical staff.” This measure is aligned with actions being enforced nationwide as physicians and health care providers in all medical specialties are being asked to postpone or cancel procedures that are not medically urgent in order to preserve the severely short supply of PPE. While physiatrists across the country have taken extreme and financially devastating measures in their individual practices to adhere to these recommendations, they are nevertheless still being called upon to see patients face-to-face for a variety of reasons in both inpatient and outpatient settings.

We anticipate that the exposure of physiatrists to COVID-19 positive patients will increase in all settings, including inpatient rehabilitation facilities (IRF), skilled nursing facilities (SNFs), long-term care facilities (LTCs), and ambulatory clinics, as the outbreak worsens in some geographic areas. For example, traditional IRF beds may increasingly be used for overflow acute inpatients, as now permitted due to recent waivers of government regulations, and some recovering COVID-19 patients will require rehabilitation following prolonged ventilator treatment. Our member physiatrists stand ready to serve their patients as they always have, but they deserve adequate protection for themselves, their patients, and their family members in order to safely provide necessary care and avoid further virus spread.

If adequate protection cannot be made available by their employers, then alternatives to providing face-to-face patient care must be permitted, and the clinical judgment of the physiatrist must prevail in these circumstances until such time that widespread, reliable testing can ensure low-risk (e.g., proven uninfected) in-person patient encounters. Furthermore, AAPM&R calls on the nation’s leaders in government and industry to immediately collaborate to resolve the critical shortage of PPE and COVID-19 testing kits including rapid testing. In the interim, AAPM&R supports further study and implementation by our members of appropriate use and potential extended use and re-use of PPE as recommended by the FDA (<https://www.fda.gov/media/136449/download>) and ECRI (<https://www.ecri.org/landing-covid-19-medical-devices-respirator-masks>) and as warranted by the physiatrist’s best clinical judgment.

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