



International Federation
for Emergency Medicine

ANNUAL REPORT 2026





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INTRODUCTION

INTRODUCTION

The 2025–2026 period stands as a defining chapter in the history of the International Federation for Emergency Medicine. It was a year of numerous successes: a spectacular celebration of our community in Montreal, the launch of IFEM Academy and IFEM's ED Certification programme, and a profound transformation to strengthen our organisational governance structure.

In Montreal, we brought together thousands of emergency physicians from across the globe. The conference was a vibrant testament to the resilience, innovation, and unity of our speciality. The energy and collaboration witnessed in Montreal have become the fuel for our work throughout 2026.

Behind the scenes, we were laying the groundwork to ensure that this momentum is not just celebrated but sustained. We successfully executed significant governance reforms, transitioning to a new Board and Council structure that enhances our agility and strategic focus. Simultaneously, our internal operational capacity has grown substantially. With an expanded professional staff team led by our inaugural Chief Operating Officer, we have increased our ability to deliver on our mission faster, more efficiently, and with greater impact.

As a mission-driven non-profit, every initiative, from the IFEM Academy and the ED Certification programme, to scaling the WHO Basic Emergency Care programme, is dedicated to one vision – a world where all people, in all countries, have access to high-quality emergency care.

This report is a testament to the power of our global community. It is a story of how over 900 volunteers, 66 member societies, and countless partners came together to champion Emergency Medicine excellence and advocacy where it is needed most.

We remain steadfast in our belief that high-quality emergency care is a fundamental human right, and we are more committed than ever to making that right a reality for all people, in all countries.

VISION

A world where all people, in all countries, have access to high-quality emergency care.

Our vision is a commitment to a world where geography, wealth, or status never determines whether a patient receives life-saving care. In 2026, we are actively working to dismantle the barriers that prevent this vision from becoming a reality. We envision a global emergency medicine community that is united, equitable, and relentlessly focused on the highest standards of clinical excellence.

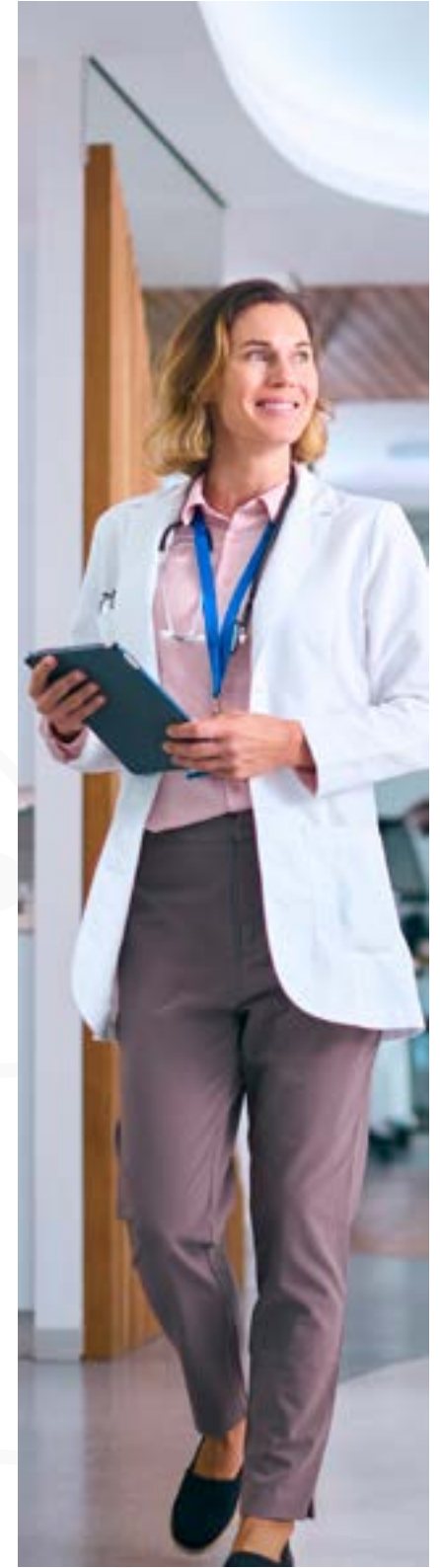
Our leadership is defined by collective purpose, proving what is possible when the world's emergency physicians stand together.

Every dollar we raise, every hour our volunteers give, and every partnership we forget is reinvested directly into our mission.

MISSION

- ➔ To advance the growth of high-quality emergency medical care through education and standards.
- ➔ To lead the collaboration and networking necessary to establish universal equality in service and care.

To promote the creation and growth of the specialty of emergency medicine in every country."



WHY IS IFEM NEEDED?

The world faces unprecedented health challenges: climate-driven disasters, conflict, and a global crisis in healthcare workforceretention. In these times, the need for a unified voice for emergency medicine has never been greater. IFEM exists because the work of emergency physicians is too critical to be left to isolated efforts.

We are needed because:

The world faces unprecedented health challenges: climate-driven disasters, conflict, and a global crisis in healthcare workforceretention. In these times, the need for a unified voice for emergency medicine has never been greater. IFEM exists because the work of emergency physicians is too critical to be left to isolated efforts.

We drive global standards of excellence

We provide the evidence-based frameworks, core curricula, and quality benchmarks that allow national societies to professionalise their specialty. By fostering a culture of continuous improvement and shared best practices, we ensure that high-quality care is not a privilege of the wealthy but a standard achievable everywhere

We amplify collective advocacy

Together, as IFEM, our voice resonates globally. We leverage our position to engage with governments and international bodies, shaping policies that support robust emergency care systems, protect our workforce, and prioritise the health of the most vulnerable.

We cultivate a global community of practice

We are a non-profit sustained by the generosity of our members and partners. We create the vital connections that allow experts to mentor emerging leaders, share resources across borders, and solve problems collaboratively. IFEM is not just an organisation; it is a movement. A movement dedicated to the belief that emergency care is a universal necessity, and that through our collective action, we can make the world a safer, healthier place for everyone.





PRESIDENT'S LETTER

PRESIDENT'S LETTER



Dr Saleh Fares Al-Ali

President

International Federation for Emergency Medicine

Dear IFEM Community,

As I conclude my term as IFEM President, I reflect with immense pride and gratitude on the remarkable journey we have shared together over the past two years. It has been a period of significant growth, transformation, and global engagement across IFEM, built on the strong foundations established by previous IFEM leaders, Boards, committees, volunteers, and member societies. Our progress today is a continuation of the vision and dedication of those who helped shape IFEM into the organisation it has become.

Throughout this period, we worked diligently to translate IFEM's strategy into meaningful action across all areas of the federation. Guided by the principles of our strategic framework, including the 4Ps and the 4Ss, we focused on ensuring that IFEM remains relevant, impactful, and responsive to the evolving needs of emergency medicine globally.

One of the most important milestones this year was the launch of the IFEM Academy and the Emergency Department Certification Programme. These flagship initiatives represent significant investments in education, professional development, and quality improvement, reflecting IFEM's commitment to supporting emergency care providers and systems worldwide. The successful pilot implementation of the ED Certification Programme across multiple countries demonstrated both its relevance and its potential to become an important global benchmark for emergency care quality.

IFEM also continued expanding its educational and academic reach through webinars, Virtual Learning Events, publications, and collaborative programmes, engaging

PRESIDENT'S LETTER

thousands of participants across over 70 countries. Our expanding multilingual and regionally tailored activities, particularly in Latin America, further strengthened our ability to connect with and support our diverse global community.

Our partnership ecosystem also expanded considerably. IFEM strengthened collaboration with governments, academic institutions, professional societies, industry partners, and international organisations, particularly the World Health Organization (WHO) through initiatives such as the Acute Care Action Network (ACAN) and the Basic Emergency Care (BEC) Programme. These collaborations continue to position IFEM as a trusted global convener and advocate for strengthening emergency care systems worldwide.

Another major achievement was the successful implementation of IFEM's new governance structure. The introduction of the Board and Council model, together with the expansion of our professional administrative team, has created a stronger organisational infrastructure capable of supporting IFEM's continued growth and future ambitions. Today, IFEM benefits from a strengthened operational infrastructure, including an expanding office and professional administrative team in Abu Dhabi.

I would like to express special thanks to the Department of Health (DoH) – Abu Dhabi for believing in IFEM's mission and supporting our vision for advancing emergency care globally. I also want to thank the many partners and collaborators who worked alongside us throughout this journey. Their trust and shared commitment have been instrumental in helping IFEM grow into a stronger and more impactful organisation.

Throughout my travels representing IFEM at conferences, meetings, and projects across many regions, I was consistently inspired by the passion, resilience, and dedication of emergency care professionals working in often challenging environments. These experiences reinforced the importance of ensuring that our work is measured not only by outputs, but by meaningful and lasting impact. I am proud that IFEM is increasingly able to demonstrate that impact through evidence, partnerships, educational reach, and system improvement initiatives.

I would also like to express my sincere gratitude to the 2024–2026 IFEM Board, our administrative team, and the hundreds of IFEM volunteers who collectively contributed thousands of hours to advancing our mission. Your dedication continues to be the driving force behind IFEM's success.

As I leave office, I do so with great optimism. IFEM is on a strong trajectory forward, supported by strong governance, landmark initiatives, expanding partnerships, and an exceptional global community. It has been an honour to contribute to this journey, and I am confident that the incoming leadership team will continue to take IFEM even further in the years ahead.

Dr Saleh Fares Al-Ali

President

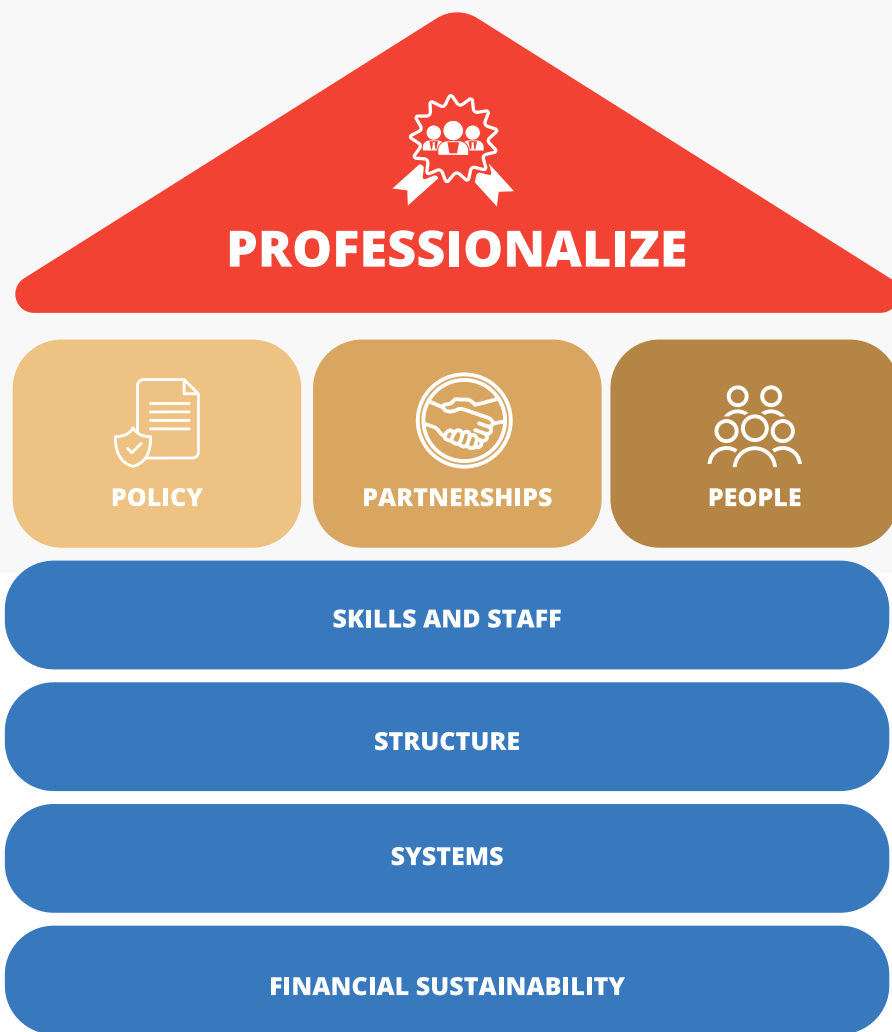
International Federation for Emergency Medicine



STRATEGY IN ACTION

From Foundation to Future Growth

Over the past year we have continued to focus on growing IFEM in a way that better serves our members and better serves the needs of emergency medicine and our patients around the world. Last year we introduced our short-term strategy which is captured visually in what we call the “strategy house”, shown in the figure. It illustrates how IFEM’s goals, structure, and operations align to deliver impact.



At the top of the house is our central objective:
to professionalize emergency medicine globally.

Supporting this goal are three strategic pillars:

Policy, to strengthen IFEM's voice as a global advocate

Partnerships, to deepen engagement with stakeholders including WHO, governments, academia, and allied professions

People, ensuring inclusive participation and meaningful member engagement





These pillars rest on four foundational enablers:

Skills and Staff, as we continue to grow operational and leadership capacity

Structure, through ongoing reforms to our board, committees, and working groups

Systems, to provide the tools and processes needed for effective delivery

Financial Sustainability, strengthened through new revenue streams and reinvestment into core operations

This strategy is already being put into action. Since early 2023, IFEM has significantly expanded its operational capacity, professionalised core services, and integrated high-level expertise across governance, legal affairs, strategic planning, and academic development. By investing in people and systems, and engaging expert volunteers alongside a dedicated team, we are translating strategy into measurable progress with greater clarity, speed, and alignment.

Strategic investments in educational partnerships and academic programs have also increased income, allowing us to reinvest directly into the infrastructure that supports our growth.

The “strategy house” brings this all together. From public awareness campaigns to academic platforms, from observerships and accreditation to committee restructuring and governance reform, each initiative is intentionally designed and aligned with this shared vision.

As we move into our next year of growth, work is underway to deepen our strategy for the next 3-5 years of global emergency medicine advocacy.

A low-angle, close-up shot of a young man, likely a firefighter, looking upwards with a focused expression. He is wearing a blue jacket with a red and yellow reflective safety vest over it. In the background, a tall building is engulfed in flames, with thick white smoke billowing out against a blue sky with scattered clouds. The word "PROGRAMMES" is overlaid in large, white, bold, sans-serif capital letters in the lower-left quadrant of the image.

PROGRAMMES

PROGRAMMES

IFEM Academy

The IFEM Academy was launched this year. It brings together the full range of IFEM's academic activity across research, education, and training under the leadership of Professor Elizabeth DeVos (Board Director of Academic Affairs) and Dr Ffion Davies (Dean of the Academy and Immediate Past President of IFEM).



// This year has seen incredible progress for IFEM's academic activities. We have grown our Virtual Learning Events to cover more cutting-edge topics and have delivered our first courses in Spanish. The academic committee has published several resources for educators, and we are all looking forward to the 25th International Congress on Emergency Medicine – our largest congress to date. **//**

Dr Elizabeth De Vos

Director of Academic Activities



// We are delighted to see the IFEM Academy online platform go live. This is a crowd-sourced, peer-reviewed resource and is growing by the week. Please visit the site at academy.ifem.cc and add it to your list of regularly visited CPD options! **//**

Dr Ffion Davies

Dean IFEM Academy

Access to emergency medicine education remains severely limited in many regions. Significant disparities persist between high-income healthcare systems and low-resource or rural settings, directly affecting patient care and outcomes. In support of the World Health Organisation's Acute Care Action Network (ACAN), IFEM's Virtual Learning Events (VLEs), in-person courses, and the Academy's new online platform aim to strengthen emergency care systems worldwide by supporting leaders, educators, and researchers across both high- and low-resource settings.

IFEM Academy's eLearning Platform academy.ifem.cc

The Academy's global eLearning platform has been created to address global inequities in access to high-quality learning in emergency medicine. It provides the go-to resource for learning, with IFEM-created content as well as signposting, promotion and curation of the best of the world's learning resources for emergency medicine.

It aims to provide both trainees and established clinicians with accessible, peer-reviewed resources. All content promoted or hosted by the Academy is reviewed by an IFEM expert Quality Assurance (QA) team to ensure accuracy, global relevance, and applicability across diverse healthcare contexts.



Content is divided as follows:

- Clinical learning resources supporting frontline emergency care
- Leadership and systems-strengthening resources focused on quality improvement and healthcare delivery
- Educator development tools supporting teaching skills, curriculum design, and faculty development
- Training and resources for early career researchers
- Resources appropriate for low-resource settings (practice in low-income or rural emergency departments)
- An events calendar featuring IFEM-hosted events and Virtual Learning Events (past and future) and highlighting other courses and congresses from around the world to support leaders, educators and researchers in both high- and low-resourced settings.



Quality Assurance

As a peer-led resource, users can be reassured that the platform's content is useful, reliable and not subject to profiteering or bias.

The platform is set up under a structure that relies upon a Technical Steering Group (TSG), overseen by the IFEM Board of Directors. An Advisory Panel operated for the first 6 months to guide the platform's strategic direction, with a focus on identifying educational gaps, curating high-quality resources, and supporting global relevance. Panel members represent a wide range of regions, resource settings, and areas of expertise. Their roles included:

- Undertaking gap analyses to identify priority areas for emergency medicine education
- Curating and commissioning content where gaps exist
- Signposting high-quality external resources to accelerate reach and reduce duplication
- Supporting quality assurance for platform content and endorsed resources

The Advisory Panel has now transitioned into operational teams responsible for content sourcing, curating and vetting. A dedicated Quality Assurance (QA) team supports consistency, quality, and usability of Academy resources.





Opportunities to engage with the IFEM Academy include:

Developing educational content as an individual

Delivering Virtual Learning Events or workshops

Collaborating with the IFEM team of volunteers to develop new material to plug gaps in global learning content

Partnering IFEM on specialty-, region-, or system-focused educational programmes

Sharing content from an existing online educational site (including member society content)

Partnership Opportunities

The IFEM Academy welcomes partnerships with organisations and institutions committed to advancing global emergency care education. Priority partnership areas include educator development, leadership training, and adaptation of resources for low-resource settings.

To offer help please [contact academy@ifem.cc](mailto:contact_academy@ifem.cc)

Our Virtual Learning Events: Global Reach

Our virtual learning events have reached over **10,500 users** across **70+ countries**.

Our audience spans both high-income and low-resource settings, with the top participating countries including:





Over the past year, IFEM's academic programme has continued to broaden both in scope and in international reach. A diverse series of Virtual Learning Events addressed key priorities across emergency medicine, including artificial intelligence, mental health and wellbeing, trauma and violence, geriatric emergency care, delirium, mass gatherings, and quality and patient safety. The programme reflected IFEM's commitment to relevance across settings, with content spanning clinical care, systems improvement, and emerging areas of practice.

Several events were delivered in Spanish, including regional activities for Latin America, reinforcing IFEM's focus on linguistic accessibility and inclusive engagement. Collaborations with international partners, specialist organisations, and expert faculty supported delivery of sessions that were both context-aware and globally applicable.

Across the reporting period, these educational activities attracted more than 2,700 registrants with individual events ranging from highly focused specialty discussions to large-scale regional sessions. Through this evolving programme of virtual learning, journal clubs, and simulation-based education, IFEM continues to strengthen its role as a global convener for emergency medicine education and professional development.

Our Virtual Learning Events since May 2025

AI in Emergency Medicine (Latin America)

Mental Health in Emergency Medicine – in collaboration with Mexican Society of EM (SMME)

Violence – in collaboration with ICRC

Trauma Beyond Boundaries

Adverse Events related to ED Boarding among Geriatric Patients

Quality and Patient Safety Frameworks in the ED

Artificial Intelligence in Emergency Medicine

Detection and Management of Delirium in the ED

Mass Gatherings: International Emergency Medicine Perspectives

IFEM-BEEM (Best Evidence in Emergency Medicine) International Journal Club

Simulation Series



Advocacy

This reporting period marked a transition toward a more structured and strategic role for the Policy Group within the Emergency Medicine Development Committee, aligned with IFEM's global mandate. The group continued advancing a focused advocacy agenda through inclusive and actionable policy development. This year's progress was driven by the dedication and shared commitment of our members, whose diverse expertise and collaborative spirit remain central to the group's success.

A primary focus this year was the review, strategic alignment, and dissemination of IFEM's foundational documents. Through ongoing mapping of existing policies, white papers, and guidelines, the group ensured alignment with IFEM's strategic priorities and global emergency care goals. This process helped identify critical policy gaps and overlaps, informing strategies to strengthen communication and policy uptake across Member Societies.

Building on prior IFEM statements to strengthen advocacy in conflict and humanitarian settings, the group continued its focus on actionable advocacy. The group recommended the development of policy statements affirming the protection of patients, healthcare workers, and healthcare facilities under international humanitarian law. Members also proposed practical approaches, including coordinated global action and educational support for frontline providers, focused on protecting healthcare workers and preserving access to emergency care during crises. A key highlight has been the ongoing collaboration with the Public and Environmental Health Special Interest Group on a white paper examining the public health impacts of war and conflict, reflecting IFEM's continued commitment to evidence-informed advocacy addressing both the direct and indirect health impacts of conflict.

Advancing inclusion, diversity, equity, and access (IDEA) remained a major focus area during the reporting period. In collaboration with the Gender-Specific Issues Special Interest Group, the Policy Group progressed an IDEA framework aimed at promoting inclusive leadership, equitable representation, and equitable access to emergency care. This initiative seeks to embed these principles across IFEM's future work and priorities.



Dr Pauline Convocar

Chair, Policy Group

And President-Elect IFEM

Operational efficiency and inclusive engagement also remained priorities, with the development of discussion platforms and hybrid meeting formats supporting engagement across IFEM's global membership, including preparations for ICEM 2026. Looking ahead, the group remains committed to advancing policy priorities including emergency care systems integration. The coming year will focus on translating these priorities into practical tools and strengthening collaboration across IFEM to support meaningful improvements globally, supported by the continued dedication of its members.

Emergency Department Certification

The IFEM Emergency Department (ED) Certification Programme has advanced significantly, moving from development into operational delivery. The programme is designed to recognise and drive quality improvement in emergency departments worldwide through a structured, internationally recognised certification framework comprising three tiers – Gold, Silver, and Bronze – each reflecting progressive standards of clinical excellence and operational capability.

Key Milestones

Version 1 of the IFEM Quality Standards for Emergency Department Certification was finalised during this period, building on the work of the 12-member technical committee established in 2024. TASNEEF, a reputable UAE-based accreditation body and IFEM's Certification Partner, provided critical technical expertise throughout the standards development and audit process. A formal long-term partnership agreement between IFEM and TASNEEF was presented to the Board for approval, covering audit execution, certification management, auditor quality assurance, and digital infrastructure – initially across the UAE and GCC, with plans for phased international expansion.

Pilot Programme

Three pilot audits were successfully completed during this period – at Sparsh Hospital Hennur in Bengaluru, India, Cleveland Clinic Hospital in Abu Dhabi, UAE, and Manila Doctors Hospital in the Philippines – validating the certification framework across diverse healthcare settings, income contexts, and geographic regions. The successful completion of all three pilots, spanning high-income and middle-income settings across the Middle East, South Asia, and Southeast Asia, has confirmed the standards' applicability and the audit delivery model across varied operational environments, marking a critical milestone ahead of the programme's commercial rollout.



ED Certification pilot audit in Manila Doctors Hospital, Philippines



ED Certification pilot audit in Cleveland Clinic Abu Dhabi (CCAD) UAE

Operational Development

A comprehensive pricing framework was developed with differentiated fee structures for High-Income Countries (HICs) and Low- and Middle-Income Countries (LMICs), aligned with IFEM's membership fee principles to ensure equitable access. Supporting infrastructure – including self-assessment toolkits, hospital contracts, certification branding (including digital logos and QR-coded plaques), and a dedicated section on the IFEM website – was developed to support the programme's commercial rollout following the conclusion of the pilot phase.





Partnerships

IFEM continues to broaden and deepen its partnership ecosystem, advancing its mission to professionalise emergency medicine globally through strategic collaboration across government, academia, industry, and the humanitarian sector.

Government and Institutional Partnerships

IFEM's partnership with the Department of Health – Abu Dhabi, formalised through a Memorandum of Understanding signed in September 2024, continued to underpin IFEM's operations in the UAE. The Department endorsed the ED Certification Standards and provided institutional support and credibility for the IFEM Academy and IFEM's broader strategic positioning in the region.

Collaboration with the World Health Organization (WHO) also remained central to IFEM's global work, including through the Acute Care Action Network (ACAN) Task Force and ongoing emergency care systems strengthening initiatives.

Academy Founding Partners

The launch of the IFEM Academy brought together a select group of Founding Partners whose contributions span academic infrastructure, quality assurance, institutional support, and professional development. The four Founding Partners are the Royal College of Surgeons in Ireland (RCSI), providing academic platform development and faculty expertise; the Department of Health – Abu Dhabi, offering government endorsement and institutional credibility; In Professional Development (InPD), supporting leadership and professional development programming; and TASNEEF, contributing quality assurance expertise that supports alignment between the ED Certification Programme and Academy educational standards.



Professional and Regional Partnerships

IFEM continued to strengthen collaboration with key professional bodies and regional societies during this period. Partnerships with the World Association for Disaster and Emergency Medicine (WADEM), the Best Evidence in Emergency Medicine (BEEM), the Australasian College for Emergency Medicine (ACEM), and the Royal College of Emergency Medicine (RCEM) reinforced IFEM's global network and enabled joint initiatives in education, research, and advocacy.

Industry Engagement

IFEM is also developing partnerships with leading medical technology and device companies to support its educational activities, conferences, and broader mission. Discussions are underway with several global healthcare industry partners whose expertise in diagnostics, resuscitation technology, and respiratory care aligns with IFEM's strategic priorities.

These emerging collaborations are expected to create new opportunities for supported educational initiatives, conference engagement, and joint activities that benefit the global emergency medicine community. They are also expected to support clinical and systems-level improvements while contributing to IFEM's long-term sustainability and its role as a global convener for emergency medicine.



World Health Organization

Acute Care Action Network (ACAN)

In 2024, the World Health Organization (WHO), in response to World Health Assembly (WHA) Resolution 76.2 – Integrated emergency, critical and operative care for universal health coverage and protection from health emergencies (May 2023) – established the Acute Care Action Network (ACAN). In October 2024, ACAN members, including IFEM, held their inaugural meeting at WHO Headquarters in Geneva.

WHO ACAN aims to strengthen acute care systems globally through coordinated advocacy, collaboration, and implementation support. The network convenes key stakeholders in global acute care and supports the dissemination and implementation of WHO acute care training programmes, tools, and system-strengthening resources.



Dr Gerard O'Reilly

Chair, ACAN Taskforce



IFEM Acute Care Action Network Task Force

To support the work of WHO ACAN, IFEM established the Acute Care Action Network Task Force (ACAN TF) in November 2024. The inaugural membership brought together a multidisciplinary group representing emergency medicine, nursing, paramedicine, surgery, critical care, and anaesthesia, reflecting the integrated approach underpinning emergency, critical, and operative care systems.

The ACAN TF was established to:

- ➔ Provide technical input and review as requested by WHO
- ➔ Support the dissemination, adoption, and implementation of WHO emergency care resources through IFEM's network of member societies
- ➔ Facilitate networking and knowledge exchange
- ➔ Foster collaboration around research and quality improvement initiatives
- ➔ Support the implementation of WHO registries and datasets relevant to emergency care

Across 2025, the ACAN TF held four formal meetings alongside multiple informal discussions involving IFEM leadership, Task Force members, and WHO acute care leads.

Key Priorities and Progress

During the reporting period, the ACAN TF focused on several strategic priorities, including:

- Supporting implementation and revision of the Basic Emergency Care (BEC) Course Guidelines
- Progressing development of a “meta-implementation tool” intended to guide implementation of WHO Acute Care Tools
- Improving understanding of the status and stakeholders involved in WHO Acute Care Tool implementation globally

Progress was achieved across all priority areas, including significant advancement of the updated BEC Course Guidelines. During this period, IFEM also renewed its Memorandum of Understanding (MOU) with WHO, further strengthening a longstanding partnership focused on improving access to high-quality emergency care worldwide.



Basic Emergency Care (BEC) Programme (ACAN TF)

Since the inception of the Basic Emergency Care (BEC) Course, IFEM – and more recently the IFEM ACAN TF – has overseen global administration and governance of the programme. IFEM remains a key implementation partner within WHO's ACAN for dissemination and implementation of WHO acute care training tools.

IFEM's oversight processes help ensure that BEC Courses are delivered by appropriately trained personnel and in alignment with the standards and intent of WHO, the International Committee of the Red Cross (ICRC), and IFEM. This allows participants to receive a standardised IFEM certificate recognised internationally and demonstrates that training has been delivered according to WHO-recommended facilitation and participant ratios.

Since 2022, the IFEM BEC Programme has engaged 905 participants across all credentialing pathways and data sources, with 799 individuals successfully completing their credentialing requirements. Most participants were credentialed as BEC Trained Providers, with a significant number progressing to Provisional Facilitator level through the BEC Training of Trainers (ToT) pathway.

The programme continues to demonstrate broad international reach, with activity spanning seven IFEM regions and active delivery across 22 countries and territories. The East Asia and Pacific region represented the largest cohort of participants, followed by South Asia and Europe. While this reflects substantial global progress, significant work remains to expand access and strengthen implementation across additional countries and regions.





EVENTS

ICEM 2025

The 24th International Conference on Emergency Medicine (ICEM 2025), held in Montréal, Canada, brought together the global emergency medicine community under the theme Innovation, Collaboration, Education, and Motivation. The congress welcomed 1,709 participants from 65 countries, including more than 600 international delegates, reflecting IFEM's broad global reach and the continued international growth of emergency medicine. Participants included physicians, residents, students, and allied health professionals, with representation from low- and middle-income countries further reinforcing the congress's inclusivity and global relevance.

The scientific programme featured 192 accepted presentations, 70 scientific sessions, 258 invited speakers, and 451 poster presentations. The programme included plenary lectures by internationally recognised leaders alongside concurrent tracks spanning clinical emergency care, research, education, leadership, digital emergency medicine, and planetary health. In addition, 16 pre-conference workshops provided hands-on learning opportunities focused on practical skills, simulation, and innovation.

Highlights of the congress included the George Podgorny Lecture, the Educational Marketplace, and a highly engaging Point-of-Care Ultrasound (POCUS) competition. ICEM 2025 also demonstrated strong industry engagement, with 57 exhibitors and broad sponsorship support contributing to a vibrant multidisciplinary environment for collaboration, knowledge exchange, and professional development.

Overall, ICEM 2025 marked another important milestone in IFEM's mission to advance emergency medicine globally through education, partnership, and international collaboration.



ICEM 2026

Momentum behind ICEM 2026 in Hamburg continues to build strongly, with the congress on track to become one of the largest gatherings in IFEM's history. By late April 2026, more than 2,700 registrations had already been confirmed, with participation representing 86 countries and speakers drawn from 52 nations.

The scientific programme will feature approximately 900 accepted abstracts reflecting innovation, collaboration, and emerging developments across the full spectrum of emergency care. Demand for the 25 pre-conference workshops has also been exceptionally strong, highlighting ongoing interest in practical learning, simulation, and professional development opportunities. In addition, the participation of 95 exhibitors reflects continued engagement from industry and healthcare stakeholders across the emergency medicine sector.

Beyond the scale of the meeting, ICEM 2026 reflects IFEM's continued commitment to advancing emergency medicine through global collaboration, inclusivity, and shared learning. Guided by the congress theme #wetogetherforward, the meeting aims to provide an important platform for discussion, innovation, and international knowledge exchange within the specialty.

Looking Ahead – IFEM Global Congress

Looking ahead, IFEM will continue evolving its global congress identity through the transition of ICEM into the IFEM Global Congress from 2027 onwards. This evolution reflects IFEM's growing international role as a global convener for emergency medicine and its commitment to strengthening collaboration, education, advocacy, and professional exchange across the specialty.

The inaugural IFEM Global Congress will be hosted in Kuala Lumpur, Malaysia, in 2027, building on the long-standing legacy and international impact of ICEM while supporting a broader and more integrated global engagement strategy for the future.





REGIONS



Dr Lauren Lai King
Regional Representative Africa

The African region has continued to build on its strong foundations of collaboration and shared purpose in advancing emergency care systems across the continent. With 16 countries now running active Emergency Medicine specialist training programmes and 22 national professional societies established, the breadth of commitment to emergency medicine reflects the impact of sustained regional efforts. A key priority remains ensuring that training and development opportunities reach all cadres, including nurses, pre-hospital providers, and community health workers, recognising that effective emergency care depends on contributions across the entire healthcare workforce.

AFRICA

IFEM engagement across the region has continued to deepen meaningfully during the reporting period. African representatives now participate across eleven IFEM committees, working groups, and advisory bodies, including the ICEM Committee, Academic Committee, Research Group, and IFEM Academy Advisory Panel, among others. This growing representation within IFEM's organisational structure reflects Africa's increasing contribution to shaping global emergency medicine policy and practice.

The year was marked by a strong programme of scientific and professional activity. The 2nd East African Trauma Symposium and EMS Expo, held at Makerere University in Kampala, Uganda, in August 2025, brought together emergency care stakeholders from across the region to focus on trauma systems strengthening. The Emergency Medicine Society of South Africa's annual conference, held in September 2025 under the theme Healthcare Without Borders: African Insights, Global Impact, further demonstrated the region's commitment to contributing African perspectives and expertise to the global emergency medicine conversation. The Ambulensi EMS Conference in Nairobi, Kenya, in March 2026 advanced system-level dialogue on public ambulance coordination and policy across Kenya.

Looking ahead, the African Conference on Emergency Medicine (AfCEM 2026), hosted by the African Federation for Emergency Medicine and the Emergency Medicine Association of Tanzania in Arusha, Tanzania, from 9–13 November 2026, will provide an important platform for knowledge exchange and regional collaboration.

Collaboration in research and education has also continued to grow, with several regional and international partnerships advancing shared priorities in emergency care training, knowledge generation, and capacity building across the continent.

The region enters this next phase with momentum and optimism. Expanding access to international events and digital education opportunities, developing membership models that reflect the diverse realities of African emergency medicine, and strengthening collaboration between IFEM and regional partners all represent areas of significant opportunity. AfCEM 2026 in Arusha, ICEM 2026 in Hamburg, and the IFEM Global Congress 2027 in Kuala Lumpur will all provide important opportunities for continued African engagement and contribution within the global emergency medicine community.



Professor Eillyne Seow
Regional Representative Asia

In 2025, two major emergency medicine conferences were held in Asia. The first was the 7th EMS Asia Congress, focused on Emergency Medical Services (EMS), held in Hua Hin, Thailand, from 18–20 February 2025 and attended by Dr Pauline Convocar, then President of the Asian Society of Emergency Medicine and President-Elect of IFEM. The second was the 13th Asian Conference on Emergency Medicine, held in Dubai, United Arab Emirates, from 10–13 December 2025.

ASIA



Collaboration between emergency medicine communities across Asia continues to strengthen. This was demonstrated through the Tripartite Congress involving Malaysia, Hong Kong, and Singapore, held in Kuala Lumpur, Malaysia, from 22–24 August 2025, with emergency medicine as a central theme.

The Global Ultrasound Case Analysis Symposium (GUCAS), a monthly meeting organised by Taiwanese emergency physicians, continues to foster regional collaboration with participation from Singapore, Korea, and Brunei. Korean emergency physicians conducted ultrasound courses in Singapore, while Malaysian emergency physicians trained colleagues from the Philippines and Singapore in advanced ultrasound skills. Singaporean emergency physicians also travelled to Brunei to conduct Ultrasound Life Support and Train-the-Trainer courses.

The 7th Emergency Medicine Masterclass, held on 31 October 2025 in Singapore, continued its long-standing practice of extending complimentary registration to participants from Vietnam, the Philippines, Indonesia, Thailand, Brunei, and Malaysia.



The Annual Academic Congress organised by the Sri Lanka College of Emergency Physicians, held from 9–10 August 2025, brought together trainers and speakers from across the Asian and Australasian emergency medicine communities for its pre-conference workshops. Notably, one of the workshops focused on non-clinical emergency medicine skills and was led by Dr Paul Ho, Past Vice-President of IFEM, from Hong Kong, alongside Drs Eillyne Seow, Goh Hsin Kai, and Seet Huey Ying from Singapore.

Several Asian emergency medicine societies continue to expand educational outreach through podcasts and webinars. The Society for Emergency Medicine in Singapore (SEMS) has produced 18 podcast episodes since December 2024, while the College of Emergency Physicians Malaysia continues to conduct monthly toxicology webinars.



Emergency medicine communities across Asia continue to train not only doctors, but also nurses, paramedics, non-healthcare personnel, and members of the public. On 21 January 2026, the Society for Emergency Medicine India (SEMI) trained 150 police officers in trauma and medical emergency response. SEMI also conducted a mass Basic Life Support (BLS) training event for 400 participants on 14 March 2026.

The practice and development of emergency medicine across Asia remains highly diverse, with varying levels of recognition and government support between countries. A significant milestone during the reporting period was the establishment of Sri Lanka's Accident and Emergency Directorate on 26 March 2026 by the Sri Lankan Cabinet, reflecting sustained advocacy efforts by the Sri Lanka College of Emergency Physicians in collaboration with the Ministry of Health.

Asia remains the world's largest continent and includes a highly diverse emergency medicine landscape. As regional collaboration continues to grow, there may be value in considering a dedicated West Asia or Middle East regional structure within IFEM in the future. Central Asia also remains an important area for future engagement and collaboration.



The region now looks ahead to ICEM 2026 in Hamburg, Germany, the 8th EMS Asia Congress in Singapore, and the IFEM Global Congress 2027 in Kuala Lumpur, Malaysia.





Dr Stephen Gourley
Regional Representative Asia

During this reporting period, emergency medicine across Australia, Aotearoa New Zealand, and the Pacific continued to operate under significant pressure. Overcrowding, access block, workforce shortages, and increasing complexity of presentations remained major challenges for emergency departments (EDs), shaping both service delivery and advocacy priorities across the region. The Australasian College for Emergency Medicine (ACEM) focused its work on supporting system reform, strengthening the emergency medicine workforce, and contributing to improved patient care through policy, advocacy, research, education, and regional collaboration.

AUSTRALASIA

A major theme during the year was the continued development of a stronger evidence base to support emergency medicine advocacy. This work has helped better define the pressures facing EDs and strengthened advocacy efforts relating to workforce sustainability, access block, and care for older people. Alongside this, ACEM continued progressing important training reforms, including implementation planning for a regional, rural, and remote training requirement for trainees entering the Fellowship of the Australasian College for Emergency Medicine (FACEM) Training Programme from 2027, as well as the integration of blended supervision placements from 2027. Together, these initiatives aim to strengthen regional training pathways and support a more sustainable and better distributed emergency medicine workforce.

ACEM also remained actively engaged with governments and health leaders across both Australia and Aotearoa New Zealand. The College met with ministers and senior officials regarding priorities including ED performance, workforce pressures, rural and regional training, and Indigenous health equity. Advocacy relating to violence in EDs also remained a major focus, with dedicated reports in Australia and Aotearoa New Zealand helping elevate the issue nationally and support calls for coordinated government action.

Regional collaboration remained an important area of activity. In June 2025, the inaugural Pacific Island Society for Emergency Care (PISEC) regional meeting and Annual General Meeting (AGM) was held in Nadi, Fiji, alongside World Health Organization (WHO), International Committee of the Red Cross (ICRC), and IFEM Basic Emergency Care (BEC) provider and Training of Trainers (ToT) courses. The meeting brought together more than 40 Pacific emergency care clinicians from 15 Pacific Island countries and Timor-Leste, highlighting the growing strength of regional emergency care leadership and collaboration. ACEM supported the meeting through its global emergency care work and broader partnerships across the Pacific, Papua New Guinea, and Timor-Leste.

A major College event during the reporting period was ACEM's 2025 Annual Scientific Meeting (ASM), held under the theme Riding the Wave of Change. The meeting represented ACEM's strongest ASM to date and also marked a leadership transition, with Dr Peter Allely becoming ACEM President and Dr Stephen Gourley transitioning to Immediate Past President.

Overall, the year reflected both the scale of current challenges facing emergency medicine and the opportunities created through stronger advocacy, improved data, educational reform, and deeper collaboration across the region.





Dr Jesús Daniel López Tapia

Regional Representative Central and South America

Emergency medicine in Latin America continues to grow across scientific, educational, and outreach activities. Despite differences in resource availability compared with other regions, the region continues to invest strongly in its most valuable resource – human capital. Through continuous professional development initiatives and improved access to regional educational opportunities, several online activities have been developed that have strengthened engagement with IFEM among emergency medicine specialists throughout Latin America.

CENTRAL AND SOUTH AMERICA

To support these efforts, a dedicated position was established within IFEM to coordinate the organisation, logistics, communication, and dissemination of Latin American activities and priorities. Talita Araujo has played an important role in advancing these efforts, reflected in both completed activities and several upcoming regional initiatives.

Webinars on a variety of topics have been conducted under the leadership of national societies across the region, with financial and logistical support from IFEM. Regular meetings are also held with society presidents to identify opportunities for collaboration and strengthen the specialty across Latin America.

In collaboration with the World Health Organization (WHO) and the Pan American Health Organization (PAHO), Basic Emergency Care (BEC) courses were delivered in Mexico, Guatemala, Honduras, Colombia, Paraguay, and Ecuador. These activities supported the training of new facilitators who will contribute to the ongoing expansion of BEC provider training across the region.

The Federación Latinoamericana de Medicina de Emergencias (FLAME) and the Sociedad Española de Medicina de Urgencias y Emergencias (SEMES) collaborated on the development of clinical guidelines for sepsis, developed with strong editorial rigour and tailored to the Latin American context.

The Mexican emergency medicine journal *Revista de Educación e Investigación en Emergencias* (REIE), now in its eighth year, has continued strengthening its regional academic presence with five indexed articles and increasing international recognition. The journal has also published contributions from emergency medicine specialists across Latin America.

Several important emergency medicine congresses were held across the region during the reporting period, including the Chilean Congress of Emergency Medicine (SOCHIMU 2025) in Chile, the Brazilian Congress of Emergency Medicine (ABRAMEDE 2025) in Brazil, the Panamanian Congress of Emergency Medicine (ASPAME 2025) in Panama, the Dominican Congress of Emergency Medicine (SODOEM 2025) in the Dominican Republic, the Argentine Congress of Emergency Medicine (SAE 2025) in Argentina, and the Congreso Internacional de Medicina de Urgencias (CIMU 2025) in Mexico.

CIMU 2026 featured participation from prominent IFEM leaders, including Dr Janis Tupesis. In addition, the second FLAME International Congress is scheduled to take place in São Paulo, Brazil, from 29 April to 2 May 2026, bringing together speakers from multiple IFEM regions.

Alongside ongoing scientific and educational development, the region continues to face important system-level challenges, particularly overcrowding and workforce burnout. Supporting the physical and mental wellbeing of emergency medicine professionals therefore remains an important regional priority for both workforce sustainability and patient care.

Language barriers also remain a challenge for many highly active academic colleagues across the region, limiting broader international participation and representation within IFEM scientific outputs. Addressing these barriers presents an important opportunity to further strengthen Latin America's contribution to global emergency medicine collaboration and scholarship.





Dr Grzegorz Waligora
Regional Representative Europe

During the reporting period, emergency medicine (EM) across Europe has demonstrated continued progress in collaboration, education, and advocacy, alongside persistent structural challenges. A central development has been the strengthening of the strategic partnership between the International Federation for Emergency Medicine (IFEM) and the European Society for Emergency Medicine (EUSEM). This collaboration has matured through regular leadership engagement and delivery of joint initiatives, including webinars, policy discussions, and the development of a joint position statement on EM specialty recognition. This partnership continues to serve as a key platform for advancing EM at both regional and international levels.

Europe

Membership engagement across Europe has expanded, with the region now comprising 15 member and affiliate societies. Notably, Greece has formally applied for IFEM affiliate membership, while Portugal is progressing toward full membership following national recognition of EM as a specialty. Emerging engagement from Latvia, as well as observer participation from Lithuania and Estonia, reflects a positive pipeline for future growth. Re-engagement efforts are also ongoing with previously inactive members such as Hungary and Israel.

Advocacy for formal recognition of EM as a specialty remains a major regional priority. Progress is uneven across Europe due to differences in healthcare systems, training structures, and governance. Nevertheless, coordinated IFEM–EUSEM advocacy efforts are gaining momentum, with a joint position statement scheduled for release on Emergency Medicine Day 2026. National developments highlight both challenges and opportunities, including workforce shortages and burnout driving reform discussions in Italy, and increasing momentum toward board certification in Germany.

Education and capacity building have advanced through the launch of a joint IFEM–EUSEM webinar series, including a trauma-focused session delivered in December 2025. Expansion of multilingual IFEM Academy content has improved accessibility, although sustainability remains dependent on volunteer translation resources. Additionally, work is underway to establish a European clinical practice repository to support dissemination of best practices across the region.

Significant scientific engagement has been observed through regional and international conferences. The Eurasian Congress on Emergency Medicine (Antalya, Türkiye; 20–23 November 2025), organized by the Emergency Medicine Association of Türkiye, brought together a broad international audience and facilitated knowledge exchange through plenary sessions, workshops, and research presentations. National conferences across Europe have continued to address key themes such as workforce sustainability, training, and system integration.

Looking ahead, the International Conference on Emergency Medicine (ICEM 2026), to be held in Hamburg, Germany (9–13 June 2026), represents a major milestone. Organized by IFEM in collaboration with the German Society for Emergency Medicine, the conference is expected to attract significant European participation and serve as a high-visibility platform for global collaboration and advocacy, particularly regarding specialty recognition in Germany.

Key challenges across the region include workforce shortages, variability in specialty recognition, and the sustainability of educational initiatives. At the same time, opportunities exist through strengthened regional collaboration, growing membership engagement, and increasing influence in European health policy discussions. Collectively, these developments highlight Europe's continued commitment to advancing high-quality emergency care through collaboration, innovation, and shared leadership





Dr Brittany Ellis

Regional Representative North America

Overall, the region remains highly engaged, with strong organisational capacity, active member societies, and significant opportunities to strengthen collaboration and regional alignment.

A major area of progress during the reporting period has been ongoing collaboration with the IFEM Academy to expand access to educational resources and shared learning opportunities. Discussions have taken place with key regional organisations, including the American College of Emergency Physicians (ACEP) and the Canadian Association of Emergency Physicians (CAEP). CAEP has expressed strong interest in continued partnership and identified several potential educational contributions, reflecting positive

North America

momentum for future collaboration between North American organisations and the IFEM Academy.

Broader efforts have also continued across IFEM to strengthen engagement with North American member societies, particularly organisations that have been less active in recent years. This renewed engagement remains important for ensuring inclusive participation and maximising the region's contribution to IFEM initiatives.

The region also continues to demonstrate leadership on advocacy and professional issues. A recent example is CAEP's position statement addressing harassment and bullying of emergency physicians by organisational and system-level administrators, highlighting North America's ongoing contribution to physician wellbeing advocacy and workplace standards within emergency medicine.

North America will also host several major emergency medicine events over the coming years, reflecting the region's continued prominence within global emergency medicine. These include ACEP Scientific Assemblies in Chicago (2026) and Boston (2027), CAEP Annual Conferences in Winnipeg (2026) and Halifax (2027), Society for Academic Emergency Medicine (SAEM) meetings in Atlanta (2026) and San Francisco (2027), and ACEP Leadership and Advocacy Conferences in Washington, DC.

A key challenge identified during the reporting period has been role clarity and coordination. North America benefits from many highly active IFEM leaders; however, multiple points of contact with member societies can sometimes result in duplication, fragmented communication, and missed opportunities for alignment. Improving coordination and communication pathways across the region would help strengthen engagement and support IFEM's overall impact within North America.

Looking ahead, there is significant opportunity to further strengthen regional collaboration, improve organisational alignment, and expand North America's contribution to IFEM educational, advocacy, and professional initiatives.



COMMITTEES



Emergency Medicine Practice Committee



Dr Simon Chu

Chair, Emergency Practice Committee

Under the revised IFEM organisational structure which started 12 months ago, all the IFEM Special Interest Groups (SIGs) are now governed under the newly created Emergency Medicine Practice Committee. Each of the SIGs have produced their own annual report. After reading them all, we all appreciate the staggering amount of work collectively produced to better global emergency medicine, including a number of advocacy documents, virtual learning events, and numerous events at ICEM2026.

As such, this EMPC annual report details changes to operational support to support optimal functioning and collaboration of the SIGs whilst ensuring they remain knowledgeable of the overarching work of IFEM. Our meetings now include dedicated presentations from other committees within IFEM throughout the year to keep all the SIGs updated on their work.

The beginning of the last 12 months involved a review of all the SIGs. Two major restructurings resulted. The first was the transformation of the Technology SIG into the New Technologies Task Force (NTTF). The second was the creation of the Early Emergency Careers SIG.

The mission of the NTTF is now the provision of expert advice and encouraging advancement of new technologies to benefit global emergency medicine, rather than producing advocacy or academic outputs. As such, the task force will report directly to the new IFEM Council, and both Dr Grzegory Waligora (NTTF chair) and I are delighted with this change.

The dissolution of the Resident and Trainee SIG to create the Early Emergency Careers SIG provided a breath of fresh air and improved focus to this SIG. You can read about their start in their annual report. They will develop advocacy and academic outputs in leadership skills critical for early EM physicians, which builds a solid foundation for their future careers.

The EMPC over this year has developed a close working relationship with the IFEM Academic Committee. Through this relationship we have managed to collaborate with each other's academic outputs, for instance the recently released IFEM Academy Platform. On the horizon is a more integrated VLE calendar, and the opportunity to develop a library of face-to-face workshops both for the future IFEM Congress and regional conferences.



I would like to thank Associate Professor Olita Shilpakar as my Vice Chair, who ensures all white papers and standards documents relate to the reality of emergency medicine in lower resource settings. I would like to acknowledge all the leaders in the IFEM Board for providing their patience and advice to Olita and myself as we navigated these last twelve months in the new IFEM organisational structure. Finally, I also am most grateful for the entire IFEM admin team now based in Abu Dhabi, particularly Mr. Jon Roxas; whose efforts (amongst his other numerous portfolios), have allowed the SIGs to function as optimally as possible.

Emergency Medicine Specialty Development Committee



Dr S. Saravana Kumar

Chair, EM Specialty Development Committee

The Emergency Medicine Development Committee (EMDC) continues to advance IFEM's strategic mandate of strengthening emergency care systems globally through structured development, collaboration, and standard-setting. Over the past year, our work has been focused across four key pillars: IFEM ED Certification, Membership, Policy, and Regional Engagement—each progressing with clearer governance, measurable outputs, and growing global relevance.

IFEM Emergency Department (ED) Certification – From Concept to Global Program

The IFEM ED Certification Program has reached a defining milestone. Following successful pilot audits across diverse health system settings, including both high-income and lower middle-income countries, we now have strong validation that:

- ➔ Our standards are measurable, practical, and globally applicable
- ➔ The audit methodology aligns with international best practices in healthcare accreditation
- ➔ There is clear and growing global demand for an ED-specific certification model

These pilots have demonstrated that emergency departments worldwide are actively seeking structured frameworks to improve quality, patient safety, governance, and clinical outcomes. Importantly, IFEM is uniquely positioned to define this benchmark.

We are now transitioning from standards development to scalable implementation, marking a shift from concept to operational global program.

Key Next Steps:

- ➔ Formalization of the IFEM ED Certification program structure and delivery model
- ➔ Expansion of pilot learnings into a phased international rollout
- ➔ Establishment of governance and certification oversight mechanisms
- ➔ Development of a global auditor network and certification pathway
- ➔ Strategic alignment with ICEM 2026 for global launch visibility

This evolution represents a significant step in IFEM's journey to become the global reference standard for emergency care excellence. It also creates a platform for continuous quality improvement across emergency departments worldwide.



Membership – From Administration to Active Engagement

The Membership Group has moved decisively from a transactional model to a structured, accountable lifecycle management system.

Key progress includes:

- ➔ End-to-end ownership of membership lifecycle now clearly defined—from onboarding to engagement and retention
- ➔ Identification and consolidation of “at-risk members”, with a shift from passive reminders to root-cause resolution in collaboration with Regional Directors
- ➔ Development of a standardized membership reporting framework, including regional mapping and growth indicators
- ➔ Strengthening onboarding processes with focus on benefit awareness and utilization, not just enrollment
- ➔ Introduction of engagement metrics, with membership survey response rates now a core KPI

Additionally, structured communication systems—including standardized contact frameworks and escalation protocols—have been implemented to improve continuity and reduce disengagement.

Strategic Direction:

- ➔ Transition toward data-driven membership decisions
- ➔ Exploration of future membership models (individual vs institutional)
- ➔ Focus on value articulation and engagement depth, not just numbers

This marks a shift toward a more responsive, insight-led membership ecosystem, aligned with IFEM's global mission.



Policy – Strengthening Voice, Relevance, and Global Impact

The Policy Group has made significant strides in aligning IFEM's policy framework with global emergency care priorities and ethical responsibilities.

Core Areas of Progress:

01. Policy Review and Strategic Alignment

A systematic review of IFEM policies is underway to ensure coherence with global priorities, while strengthening dissemination, adoption, and integration with IFEM's education and capacity-building initiatives.

02. Inclusion, Diversity, Equity, and Access (IDEA)

- A strengthened IDEA framework is being developed to promote:
- Inclusive leadership
- Equitable representation
- Improved access to emergency care globally

This work ensures that IFEM remains aligned with equity-driven global health principles.

03. Conflict and Humanitarian Policy Leadership

Recognizing the increasing complexity of global health environments, the committee has recommended that IFEM adopt clear, principled positions on:

- Protection of patients and healthcare workers
- Preservation of emergency care access in conflict settings
- Adherence to international humanitarian law

In parallel, future policy priorities have been identified, including:

- Emergency care systems integration
- Disaster preparedness
- Workforce well-being
- Ethical practice frameworks

This positions IFEM not only as a scientific body but also as a thought leader and advocate in global emergency care policy.



04.

Regional Forum – Strengthening Global Connectivity and Representation

The Regional Forum continues to play a critical role in bridging IFEM with regional realities, ensuring that global strategies remain contextually relevant and locally actionable.

Key Developments:

- Identification of regional priorities and shared challenges, with structured summaries underway
- Development of a “Starter Pack” for new EM societies, aimed at accelerating specialty recognition and system development
- Strengthened engagement with regional representatives through improved communication platforms and structured reporting
- Proposal to establish a dedicated advocacy task force focused on specialty recognition and policy influence

The Forum is increasingly becoming a platform for:

- Cross-regional collaboration
- Sharing best practices
- Supporting emerging emergency medicine systems

05.

Strengthening Governance and Integration

Across all EMDC groups, there has been a clear emphasis on governance, accountability, and structured delivery:

- Defined mandates and reporting structures across Membership, Policy, and Regional Forum
- Improved communication channels (SharePoint, structured reporting, regular cadence meetings)
- Clear deliverables aligned with IFEM’s annual reporting cycles
- Integration of committee outputs into IFEM’s broader strategic agenda

06.

Looking Ahead

The EMDC is now entering a phase of execution at scale.

- The IFEM ED Certification Program will transition into global rollout
- Membership will evolve into a high-engagement, value-driven network
- Policy will strengthen IFEM’s global advocacy voice
- Regional engagement will ensure inclusive and representative growth of emergency medicine worldwide

Together, these efforts reinforce IFEM’s role as the global leader in defining, developing, and advancing emergency care systems.





Dr James Kwan

Chair, Academic Committee

Academic Committee

It has been a privilege to serve as the inaugural Chair of the IFEM Academic Committee. I express my sincere thanks to Professor Elizabeth De Vos (Director of Academic Affairs), Dr Ffion Davies (Dean, IFEM Academy), and the IFEM Board for their invaluable guidance and support. I also wish to thank my Vice Chair Professor Erin Simon, the three Group Chairs, Associate Professor Beatrice Hoffman (CPD and Events Group), Dr Elif Cakal (Education Practice Group), and Dr Frances Kinnear (Research Group), along with their vice-chairs and members of the Academic Committee and its Groups, for their exemplary dedication and contributions throughout this foundational year. Special thanks must also go to Francesca Gonzalez, Sinatra Fernandes, and the IFEM operational support team for their unwavering support.

Throughout its first year, the Academic Committee established a solid framework to advance global emergency medicine education, research, and professional development. A key priority was to support the development and launch of the IFEM Academy, with an emphasis on ensuring high-quality, relevant, and peer-reviewed educational resources through content creation and quality assurance. These efforts culminated in the successful launch of Phase 1 of the Academy on 26 February 2026, marking a significant milestone towards fulfilling IFEM's academic vision.

The CPD and Events Group, supported by the IFEM Education team, collaborated closely with the Emergency Medicine Practice Committee (EMPC) and Special Interest Groups (SIGs), the Education Practice Group, and the Research Group to deliver eleven Virtual Learning Events (VLEs) and one in-person event. Key achievements include the implementation of a formal CPD hours approval process for IFEM educational activities, developed in partnership with the Australasian College for Emergency Medicine. The Group further initiated work on refining the planning, delivery, and evaluation procedures for both virtual and in-person events, enhancing governance, standardisation, and quality assurance to uphold consistently high standards aligned with IFEM's academic benchmarks.

The Education Practice Group made notable progress in establishing international standards for emergency medicine education and in developing resources. Two major articles were published in the International Journal of Emergency Medicine: one on training site accreditation led by Associate Professor Andrew Singer, and another on Entrustable Professional Activities for emergency medicine specialists led by Dr David Teng. The Group released the IFEM GME Emergency Medicine Curriculum – 2025 Recommendations, spearheaded by Dr Simon Chu, and contributed to the development and quality assurance of resources for the IFEM Academy. Faculty development remained a priority, demonstrated by a Simulation faculty development VLE series led by Associate Professor Jabeen Fayyaz alongside presentations at EuSEM 2025, accepted sessions, workshops, and marketplace initiatives at the International Conference on Emergency Medicine 2026 (ICEM 2026). The Group also responded to advisory requests and initiated work on a formal consultancy policy and regional advisory network.

The Research Group focused on expanding global research capacity, fostering scholarship, and encouraging collaboration. Among its key accomplishments was the establishment of a virtual Journal Club formed through a formal partnership initiated by Associate Professor Shelly McLeod (Vice-Chair) with the Best Evidence Emergency Medicine Group from Canada and in collaboration with the EMPC and SIGs. It was launched on 4 May 2026 with four annual sessions planned. The Group supported the development and quality assurance of IFEM Academy research modules and critical appraisal resources. Research innovation advanced through the accepted ICEM 2026 Research Forum “Dolphin Tank,” offering mentorship to authors of promising lower-scoring abstracts. Other ICEM 2026 activities included a marketplace session on artificial intelligence and literature searching. Additionally, the Group is developing a publication strategy to disseminate scholarly work by IFEM and its members, particularly from LMICs.

During this reporting period, the Committee held five full meetings and fifteen subgroup meetings. Collectively, the Groups facilitated twelve educational events, contributed to international conference programmes, assisted with numerous publications and academic materials, and developed foundational learning resources for the Academy.

The successes of this inaugural year have enhanced coordination across IFEM’s academic initiatives, strengthened international engagement, and achieved the successful launch of the IFEM Academy. The Academic Committee is now well positioned to build upon this progress and further advance IFEM’s mission in education, research, and professional development.

Congress Committee

The IFEM Congress Committee is pleased to report a highly productive and forward-looking year, marked by strong engagement, strategic progress, and important milestones that will shape the future of IFEM's flagship global meeting.

Over the past year, the Committee convened two exceptionally well-attended and dynamic meetings, reflecting a high level of commitment and collaboration among members. A central achievement has been the successful rebranding of the International Conference on Emergency Medicine (ICEM) to the IFEM Global Congress on Emergency Medicine. This evolution represents more than a name change—it signals a renewed vision for a truly global, inclusive, and forward-thinking congress that better reflects IFEM's expanding international reach and leadership in emergency care.

The Committee has also worked closely with IFEM Chief Operating Officer Alexander Thompson to finalize key contractual and royalty arrangements for the upcoming Malaysia congress. This collaboration has been instrumental in ensuring financial clarity, sustainability, and alignment with IFEM's strategic goals.

A substantial and highly impactful body of work has been completed in revising and modernizing the IFEM Congress Manual. This updated resource provides clear, detailed, and practical guidance for host organizations, setting transparent expectations, and strengthening consistency, quality, and accountability across future congresses. This effort will serve as a cornerstone for successful planning and execution in the years ahead.

Looking forward, the Committee is delighted to announce that the 2027 Congress Liaison Group has been established, with Professor Sally McCarthy appointed as Chair. We warmly welcome Professor McCarthy's leadership, experience, and deep expertise, and are confident that her stewardship will further enhance the success of the 2027 congress.

In parallel, the IFEM 2029 Selection Committee has been constituted, and we are encouraged by the strong interest demonstrated through multiple high-quality applications. The Committee is actively engaged in the review process and anticipates presenting a final recommendation at the ICEM 2026.

In summary, this has been a year of meaningful progress, strategic alignment, and exciting momentum. The IFEM Congress Committee remains committed to advancing a world-class global congress that reflects the values, innovation, and collaborative spirit of the international emergency medicine community.



Dr Eddy Lang
Chair, Congress Committee



SPECIAL INTEREST GROUPS (SIGS)



Behavioral Emergency Special Interest Group

The Behavioural Emergency Special Interest Group (BESIG) continued to deliver educational activities throughout the year focused on a broad range of topics related to behavioural emergencies. The SIG has also prioritised expanding membership, particularly from low- and middle-income countries, to strengthen global representation and engagement within the group.

For ICEM 2026 in Hamburg, Germany, Drs Leslie Zun and Josephine Darke collaborated with the Geriatric Emergency Medicine Special Interest Group (GEMSIG) to present ***Guidelines for Evaluation of the Older Agitated Patient*** alongside a session on geriatric emergencies as a global public health priority. Additional presentations from BESIG members included Dr Greg Larkin presenting ***Stay Calm, We've Got an Agitated Child or Parent***, and Drs Csaba Dioszeghy, Savannah Benko, and Leslie Zun presenting ***Disorders We Love to Hate: Malingering, Factitious and Somatisation Disorders***.

During the reporting period, BESIG also completed a white paper titled ***Behavioural Emergencies in Emergency Departments***, which is planned for submission for publication



Dr Leslie Zun

Chair, Behavioural Emergency Special Interest Group



Critical Care Special Interest Group

The Critical Care in Emergency Medicine Special Interest Group continued to expand its global engagement during the reporting period, with active participation from members across all IFEM regions. The SIG delivered quarterly educational sessions led by SIG members and invited international guest speakers, focusing on emerging and high-impact topics in emergency medicine and critical care.

These sessions have supported networking, knowledge exchange, and collaborative learning among clinicians and educators from around the world, while strengthening the sense of community within the SIG. The group also contributed a number of well-received educational sessions at ICEM 2025 in Montréal and has prepared further contributions for ICEM 2026 in Hamburg.

The SIG has also supported the launch of the IFEM Academy under the leadership of Standards Lead Dr Diulu Kabongo. In parallel, the group continues to explore collaborative opportunities between SIG members, medical societies, and industry partners for future educational and research initiatives.

The SIG remains committed to promoting excellence, innovation, and international collaboration in critical care and emergency medicine and looks forward to continuing this work in the coming year.

Dr Adam Laytin

Chair, Critical Care Special Interest Group



Disaster Medicine Special Interest Group

The Disaster Medicine Special Interest Group (DMSIG) remained highly active throughout the reporting period across education, collaboration, and programme development activities.

Education and webinars

In October 2025, DMSIG delivered a webinar on violence attended by 103 participants, exploring violence within homes, communities, healthcare settings, and emergency departments. The SIG also collaborated with the Trauma Special Interest Group (TSIG) on a trauma webinar attended by 336 participants. In April 2026, DMSIG hosted a Mass Gatherings webinar attended by 107 participants, focusing on principles of planning for mass gatherings and sharing experiences from regional colleagues involved in religious, sporting, music festival, and political events.

The SIG has also contributed educational materials for the IFEM Academy platform and continues preparations for ICEM 2026 in Hamburg.

Collaboration and membership

DMSIG continued strengthening collaboration with external organisations and IFEM groups during the year. A Memorandum of Understanding (MOU) with the World Association for Disaster and Emergency Medicine (WADEM) was finalised during the reporting period, reflecting growing collaboration between the organisations. The SIG also collaborated with the International Committee of the Red Cross (ICRC), TSIG, and the Public and Environmental Health Special Interest Group (PEHSIG).

Membership growth and engagement also remained a priority, with support from the IFEM administrative team helping streamline membership processes. The SIG's newsletters have continued throughout the year, and members are encouraged to contribute content and updates.

Dr Kavita Varshney

Chair, Disaster Medicine Special Interest Group



Early Emergency Careers Special Interest Group

The Early Emergency Careers Special Interest Group (EEC SIG) was established in 2025 following the transition of the former Resident and Trainee Special Interest Group. The SIG aims to support senior trainees and early-career emergency physicians during the transition to independent practice by fostering leadership development, education, collaboration, and professional networking within the global emergency medicine community.

During the reporting period, the EEC SIG focused primarily on establishing its governance structure and defining strategic priorities for the coming years. A key milestone was the inaugural organisational meeting held in March 2026, during which core leadership and operational roles were established, including Deputy Chair, Programme Lead, Education Leads, and Regional Leads. This structure aims to ensure broad geographic representation and support delivery of educational and collaborative initiatives for early-career emergency physicians globally.

The SIG also initiated several strategic projects, including the development of two white papers currently in progress. The first focuses on leadership development in early emergency careers, highlighting the importance of structured leadership opportunities for emerging emergency medicine leaders. The second addresses mentorship in early emergency careers, emphasising the role of mentorship programmes in professional development, career sustainability, and wellbeing.

In parallel, the SIG has begun expanding community engagement through invitations for new members and volunteers, with the goal of building a strong global network of early-career emergency physicians within IFEM. Planning is also underway for future webinars and educational activities focused on leadership, career progression, and professional development.

As a newly established SIG, this year has focused on building the foundations for sustainable growth, leadership engagement, and future collaborative initiatives supporting early-career emergency physicians across the IFEM community.

Dr Hamed Akhlaghi

Chair, Early Emergency Careers Special Interest Group



Gender Specific Issues Special Interest Group

The IFEM Gender-Specific Issues Special Interest Group (GSI SIG) continued advancing gender equity in emergency medicine through advocacy, leadership development, education, and research activities during the reporting period. The SIG's work reflected strong international collaboration and a growing focus on systems-level impact within emergency medicine workplaces and professional structures.

A major milestone was the Gender Equity in Emergency (GEE) Workshop held in Colombo, Sri Lanka, representing the first structured national engagement focused specifically on gender equity within emergency medicine in the country. The workshop was organised following a serious workplace incident involving sexual assault and was endorsed by the Sri Lanka College of Emergency Physicians. Participation included a gender-balanced cohort and senior leadership representatives. The programme incorporated expert contributions relating to sexual assault and concluded with nine actionable recommendations that have since been tabled at College level. Pre- and post-workshop evaluations were also conducted for future publication. The initiative was fully funded by Dr Imron Subhan, former IFEM Gender SIG Chair, enabling broad accessibility and free participation.

Regionally, the Advancing Women in Emergency (AWE) network in Australasia delivered leadership workshops and conference sessions at the ACEM Annual Scientific Meeting (ASM) 2025, focusing on feedback culture and neurodivergence within inclusive leadership. International Women's Day initiatives included Marching Forward (2025) and Balancing the Scales (2026), delivered in collaboration with multiple professional networks. A keynote presentation delivered in Aotearoa New Zealand in 2026 further explored leadership, compassion, and courage in emergency medicine.



Academic contributions during the year included publication of FEM2FAME – Women Emergency Medicine Physicians: An Indian Perspective by Dr Samata Chororia in the IFEM Newsletter (March 2025), examining gender disparities and leadership gaps within emergency medicine in India. In addition, Dr Nilanka Mudithakumara presented research at the Asian Conference on Emergency Medicine 2025 in Dubai examining gender-based job satisfaction in Sri Lanka, contributing to the growing evidence base surrounding gender equity within emergency medicine.

Overall, the GSI SIG continues to demonstrate the ability to translate advocacy into meaningful action, amplify underrepresented voices, and advance cultural and structural change towards safer and more equitable emergency medicine workplaces globally.



Dr Priyadarshini Marathe

Chair, Gender-Specific Issues Special Interest Group



Geriatric Emergency Medicine Special Interest Group

The Geriatric Emergency Medicine Special Interest Group (GEMSIG) remained highly active throughout the reporting period across education, publications, communications, and planning for ICEM 2026. Recent newsletters highlighted a broad range of ongoing activities, including a special edition focusing on emergency medicine developments in Africa.

The SIG has been supported by two interns who contributed across several projects, including newsletter development, IFEM Academy postcard initiatives, and work relating to position papers. Their involvement has provided valuable additional capacity supporting several SIG outputs.

Scholarly activity remained a major focus during the year. An updated paper examining the interface between residential care facilities and emergency departments was published in January, alongside a practical guide on establishing a national GEMSIG. A further publication focused on language use within geriatric emergency medicine is progressing well and is expected to be published later this year.

In parallel, trauma-related submissions not included in the 2025 paper are now being converted into poster formats aligned with the IFEM Academy poster initiative, with authors currently developing these materials.

The webinar programme continues to be a major strength of GEMSIG, with consistently positive feedback and strong international engagement. Sessions have been delivered in both Spanish and English under the organisational leadership of Shan, reflecting ongoing efforts to improve accessibility and broaden international participation.

GEMSIG also secured acceptance for multiple sessions, marketplace stalls, a fringe event, and two pre-conference courses for ICEM 2026 in Hamburg and



looks forward to contributing strongly to the congress programme.

As Dr Rosa McNamara concludes her term as Chair in June, she expressed sincere appreciation to colleagues across GEMSIG for their commitment, generosity, and sustained contributions over recent years, as well as to the IFEM team for its continued support of the SIG's activities.



Dr Rosa McNamara

Chair, Geriatric Emergency Medicine Special Interest Group



Informatics Special Interest Group

The IFEM Informatics Special Interest Group (ISIG) experienced a productive year focused on the integration of artificial intelligence (AI), digital health innovation, and virtual care within global emergency medicine, while also strengthening its internal community structure and international engagement.

Key initiatives and publications

A major achievement during the reporting period was completion of the SIG's AI White Paper, which has now been submitted and is awaiting final approval. Recognising the importance of global accessibility, ISIG also began exploring translation of key outputs into Spanish and the development of multilingual Virtual Learning Events (VLEs) using real-time AI-supported translation technologies to help overcome language barriers. The white paper was first presented during the Artificial Intelligence in Emergency Medicine webinar held on 13 March 2026 by Professor Rajadurai Meenakshisundaram.

Educational activities

ISIG successfully delivered the Artificial Intelligence in Emergency Medicine webinar, attended by more than 70 participants. The SIG also developed six IFEM Academy educational postcards covering topics including AI, clinical decision support systems (CDSS), and telemedicine, alongside visual summaries and supporting educational material related to the AI White Paper.

ICEM 2026

For ICEM 2026 in Hamburg, ISIG is organising the first International Hackathon held within an IFEM Congress, representing an important step in collaborative innovation and problem-solving. Additional contributions include a Virtual Care Marketplace stall, participation in the multi-SIG Build Your Dream Resuscitation Room marketplace initiative, an AI-focused session, and the transformation of the SIG's traditional one-hour meeting into an interactive workshop format.



Growth and engagement

The SIG also expanded and restructured its membership framework during the year, creating a comprehensive membership map accessible through its shared platform. ISIG continues to welcome new representatives, including members from the Early Emergency Careers SIG, while working closely with the Emergency Medicine Practice Committee to strengthen low- and middle-income country (LMIC) and low-income country (LIC) representation across future initiatives and projects.



Dr Goksu Bozdereli Berikol

Chair, Informatics Special Interest Group



Technology Special Interest Group

The IFEM Technology Special Interest Group experienced a significant period of strategic development during the reporting period, evolving from a primarily discussion-based forum into a more structured and output-focused group addressing the growing intersection between emergency medicine and technological innovation.

A major focus during the year was the proposed transition of the SIG into the IFEM New Technology Task Force (NTTF), reflecting the expanding scope of the group's activities, including standards development, industry engagement, and Board-level advisory input. This proposal was discussed extensively within the SIG and with IFEM leadership, with the aim of aligning governance structures with the group's evolving functions and strengthening IFEM's capacity to respond to external requests relating to emergency medicine technologies.

The SIG also continued development of the Visionary Industry Technology Award (VITA), positioning it as a flagship initiative recognising innovation in emergency medicine technology. Plans are underway to establish VITA as an annual globally recognised award aligned with ICEM programming while maintaining scientific independence and clinical credibility.

In parallel, the group progressed conceptual work relating to the IFEM Expert Network for Emergency Health Technologies, designed to support structured and evidence-informed evaluation of emerging technologies and contribute to standards development in areas such as point-of-care testing in emergency departments.

The SIG maintained active engagement through virtual meetings and strategic discussions, including a dedicated session held in March 2026 to consolidate member input regarding governance transformation and future priorities.



Collaboration with other IFEM groups, including alignment discussions with ISIG and contributions to ICEM 2025 digital initiatives, further strengthened the group's integration within IFEM's broader strategic direction.

Overall, the Technology SIG continues to position itself as a credible and clinically grounded interface between emergency medicine and the rapidly evolving global health technology ecosystem.



Dr Grzegorz Waligora

Chair, Technology Special Interest Group



Pediatric Emergency Medicine Special Interest Group

The 2025–2026 reporting period was marked by a strong and growing commitment to collaboration across the Paediatric Emergency Medicine Special Interest Group (PEMSIG), with the group actively contributing to several impactful educational, research, and advocacy initiatives.

One of the most significant projects currently underway is the development of the Standards Document for the Emergency Care of Children – 4th Edition, led by Dr Barbara Blackie. This work represents an important step forward in strengthening paediatric emergency care standards globally.

PEMSIG has also participated in early discussions and planning relating to a Global Initiative on Paediatric Readiness, working alongside multiple stakeholders to improve preparedness and outcomes for children in emergency care settings worldwide. These collaborative efforts reflect the group's continued commitment to meaningful systems-level improvement in paediatric emergency medicine.

A major milestone during the reporting period was the first Joint BEEM–IFEM Journal Club, held on 4 May 2026 at 3:00 pm UTC. This initiative represents an innovative collaboration bringing together expertise and perspectives from across the global emergency medicine community.

The SIG has also strengthened international collaboration, particularly in South America through partnerships with the Sociedad Latinoamericana de Emergencia Pediátrica (SLEPE). This collaboration has led to planning for a Spanish-language Virtual Learning Event (VLE) scheduled for October–November 2026 focusing on paediatric respiratory emergencies and aimed at improving educational accessibility across linguistic boundaries.



PEMSIG also contributed to the IFEM Academy through development of three educational postcards focused on improving the care of children in emergency departments, paediatric diabetic ketoacidosis in emergency medicine, and the use of sucrose in infants.

In addition, PEMSIG's collaboration with the Pediatric Emergency Research Networks (PERN) contributed to the success of the first World Congress of Pediatric Emergency Medicine held in Brazil, which welcomed nearly 3,000 participants from 32 countries.



Dr Rodrick Lim

Chair, Paediatric Emergency Medicine Special Interest Group



Public and Environmental Health Special Interest Group

The Public and Environmental Health Special Interest Group (PEHSIG) continues to work at the intersection of multiple issues affecting global health, including climate change, health equity, human rights, wellbeing, and the social determinants of health. Advocacy and education remain central to the group's activities.

Following publication of PEHSIG's first white paper on climate change and health in 2024, the SIG published its second white paper on emergency physician wellbeing on the IFEM website during the reporting period. Building on this work, colleagues from Ethiopia, Peru, and Australia collaborated on a publication in the World Journal of Emergency Medicine, highlighting common systemic challenges affecting emergency department workflow and staff wellbeing across different regions.

PEHSIG continued delivering educational activities for IFEM throughout the year. At ICEM 2025, the SIG contributed sessions on sustainability in healthcare, climate change and health, and the social determinants of health, including a focus on Indigenous health from a global perspective. The Green Emergency Department (Green ED) movement led by the Royal College of Emergency Medicine (RCEM) was also highlighted during these discussions.

For ICEM 2026 in Hamburg, the SIG will host sessions focused on sustainability in healthcare and climate advocacy, while also contributing to an Emergency Medicine Practice Committee session on key considerations relating to cessation of resuscitation. Within the Grand Educational Marketplace, PEHSIG is leading a stall titled Gaming Against the Climate Emergency and contributing to the multi-SIG Dream Resuscitation Room initiative through the development of the "Green Resus Room", focused on environmentally and economically sustainable approaches to resuscitation.



The SIG has also collaborated with several other IFEM groups on Virtual Learning Events, including a session on violence delivered in collaboration with the International Committee of the Red Cross (ICRC).

With a growing number of active members, PEHSIG is currently progressing a further white paper exploring the intersection between public health and emergency care. The SIG is also contributing educational resources for the IFEM Academy platform and looks forward to continued growth and collaboration over the coming year.



Associate Professor Lai Heng Foong

Chair, Public and Environmental Health Special Interest Group



Quality and Safety Special Interest Group

The IFEM Quality and Safety Special Interest Group (QSSIG) experienced a highly productive year, advancing several important priorities relating to emergency care quality improvement and patient safety globally.

Following engagement at ICEM 2025, the SIG played a central role in finalising the IFEM Emergency Department Standards on Quality and Safety. This landmark document was officially launched in Abu Dhabi on 9 December 2025 and represents one of the group's most significant achievements during the reporting period.

The SIG delivered a successful Virtual Learning Event (VLE) on 30 January 2026 and further strengthened interdisciplinary collaboration through participation in an Informatics SIG-led VLE held on 13 April 2026, focusing on artificial intelligence applications in emergency department quality and safety.

Three SIG meetings were planned during the reporting period, with two completed successfully and a third scheduled for April 2026.

In preparation for ICEM 2026, the SIG secured acceptance for several contributions, including a pre-conference workshop, an educational marketplace stall, and a panel discussion focused on quality and safety. These activities were developed with a strong emphasis on inclusive representation and member engagement.

The SIG also contributed to a collaborative patient safety pathway mapping document developed in partnership with Joint Commission International (JCI), supporting broader international alignment in patient safety initiatives. In addition, two SIG members joined advisory roles within the IFEM Academy and contributed to early educational outputs, including poster submissions.

Overall, QSSIG remains closely aligned with its annual activity plan and continues promoting excellence in emergency care through education, collaboration, and standards development.

Dr Temesgen Beyene

Chair, Quality and Safety Special Interest Group



Trauma Special Interest Group

The Trauma Special Interest Group (TSIG) remained highly active throughout the reporting period across education, publications, collaboration, and ICEM contributions.

TSIG members met during ICEM 2025 in Montréal, where the SIG meeting was attended by Drs Paulo Figueroa, Sharon Chekijian, Whitney Bryant, Cindy Bitter, Erin Simon, Patrick Van de Voorde, Ankur Verma, and James Kwan.

In collaboration with GEMSIG, TSIG also hosted the marketplace stall HOCUS POCUS: Using Ultrasound Magic for Pain Relief in Geriatric Trauma, led by Dr Whitney Bryant and Dr Jiraporn with support from Dr Paulo Figueroa and Dr Ankur Verma. The stall attracted strong engagement and high attendee participation throughout the congress. TSIG members also delivered several presentations during trauma-focused sessions at ICEM 2025.

The SIG's fifth newsletter was published in October 2025 as part of the group's ongoing commitment to producing two newsletters annually, with the sixth newsletter expected in June 2026.

In collaboration with the Disaster Medicine Special Interest Group (DMSIG), TSIG co-organised the Violence Virtual Learning Event on 8 October 2025 in partnership with IFEM and the International Committee of the Red Cross (ICRC). The event was chaired by Dr Simon Chu and co-chaired by Dr Ankur Verma.

TSIG also delivered its third VLE, Trauma Beyond Boundaries, on 8 December 2025, focusing on pre-hospital trauma, combat trauma, and trauma nursing. The event was attended online by 336 participants from around the world.

Membership growth remained a focus area for the SIG during the year, with several new members joining and contributing to ongoing activities and projects.



The SIG's paper Best Practices in Trauma Research is nearing completion. Authors including Drs Cindy Bitter, Ashutosh Wanchu, Ankur Verma, Anthony Joseph, Erin Simon, Patrick Van de Voorde, Whitney Bryant, and Ramyajit Lahiri contributed substantially to the work, while Dr Simon Chu and Dr Olita provided editorial review and strategic feedback currently being incorporated prior to submission for Board approval and publication on the IFEM website.

TSIG also has strong representation planned for ICEM 2026 in Hamburg, including three trauma-focused sessions with international speakers. The SIG additionally plans to continue collaboration with DMSIG while progressing future publications and its fourth VLE.



Dr Ankur Verma

Chair, Trauma Special Interest Group



GOVERNANCE AND FINANCE

Governance and Finance

IFEM's Governance

The 2025–2026 financial year marked a pivotal moment in IFEM's history as we transitioned to a new governance model designed to enhance agility, transparency, and strategic impact. The Board, acting on the recommendations of the Governance Committee, successfully implemented a restructured framework that separates executive oversight from operational delivery, ensuring that IFEM remains responsive to the evolving needs of our global membership.

This new structure introduces a Council to broaden representation and streamline decision-making, while the Board focuses on high-level strategy, risk management, and fiduciary responsibility. This separation allows for more efficient execution of our strategic plan and ensures that our diverse regional voices are heard at the highest levels of leadership.

Assembly

The IFEM Assembly remains the supreme governing body of IFEM, representing the collective voice of our global membership. Composed of delegates from all member societies, the Assembly is the ultimate authority on IFEM's direction, holding the power to amend the Constitution, approve the strategic plan, and ratify the Board's annual reports.



Board

The IFEM Board serves as the custodian of our mission, setting strategic direction, ensuring financial stewardship, and upholding IFEM's values. During the 2024 to 2026 term, the Board oversaw the historic reconfiguration of IFEM's structure and the successful delivery of ICEM 2025.

Executive



Dr Saleh Fares Al-Ali

President | **Emirates Society of
Emergency Medicine**



Dr Ffion Davies

Immediate Past President |
**Royal College of Emergency
Medicine**



Professor Feroza Motara

Treasurer | **Emergency Medicine
Society of South Africa**



Professor Janis Tupesis

Vice President | **American Col-
lege of Emergency Physicians**



Dr Ng Chip-Jin

Oversight and Liaison Officer |
**Taiwan Society of Emergency
Medicine**



Professor Elizabeth Devos

Director Academic Activities |
**American College of Emergen-
cy Physicians**



Mr Paul O'Connor

Independent Non-Executive
Director | **O'Connor Partners**



Dr Pauline Convocar

President Elect | **Philippine
College of Emergency Medicine**



Mr Adam Soffer

Company Secretary |
Dennis Family Corporation



**Professor Edgardo
Menendez**

Secretary | **Sociedad Argentina
de Emergencias**

Regional Representatives



Professor Eillyne Seow

Regional Representative Asia |
Society for Emergency Medicine
in Singapore



Dr Brittany Ellis

Regional Representative North
America | Canadian Association
of Emergency Physicians



Dr Stephen Gourley

President of ACEM & Regional
Representative Australasia |
Australasian College for Emergency
Medicine



Dr Grzegorz Waligora

Regional Representative
Europe | Polish Society of
Emergency Medicine



Dr Jesús Daniel López Tapia

Regional Representative
Central / South America |
Latinamerican Federation of
Emergency Medicine



Dr Lauren Lai King

Regional Representative Africa
| Emergency Medicine
Society of South Africa
African Federation for
Emergency Medicine.

Council

A cornerstone of our new governance structure is the IFEM Council, established to broaden participation and ensure that the voices of our committees, special interest groups (SIGs), and task forces are integrated into our strategic planning. The Council acts as a vital bridge between the Board and the wider volunteer emergency physician, facilitating a more inclusive and democratic approach to governance.



IFEM Finances at a Glance

IFEM requires a robust financial foundation to deliver reliable services to our members and to sustain our growing advocacy for better emergency care globally. As a not-for-profit organisation, every cent of income is reinvested directly into services for member societies, educational initiatives, and strategic growth. Our financial matters are overseen by the Finance and Audit Committee, reporting to the Board, with Dr Feroza Motara serving as IFEM Treasurer until June 2026.

This report summarises the financial performance for the full financial year (FY) 1 July 2024 to 30 June 2025, as reported in the audited Financial Statements. Figures are presented in Australian Dollars (AUD).



Financial Performance

The **2024–2025** financial year reflected a period of strategic transformation for IFEM. Following the strong surplus of **A\$366,350 in FY24**, we chose to invest heavily in organisational capacity, governance reforms, and operational infrastructure to support our long-term mission.

Total Revenue:

IFEM recorded total revenue of

2025: A\$427,575

compared to

2024: A\$776,408

Cash Position:

Despite the deficit, our cash reserves strengthened, ending

2024: A\$444,654

UP TO

A\$284,032

Surplus/Deficit:

We reported a deficit of

2025: A\$36,057

compared to the surplus of

2024: A\$366,350

Net Assets:

Total net assets stood at

A\$771,805

as at 30 June 2025.

Governance and Finance

Our revenue streams reflect our diversified approach to funding our mission:

Revenue Stream	FY25 (AUD)	FY24 (AUD)
Membership Dues	A\$200,918	A\$202,980
ICEM Conference	A\$206,647	A\$294,533
WHO Program	Nil	A\$85,436
Education Services	A\$7,807	A\$169,773
Leadership Development	Nil	A\$15,877
Other Income	A\$16,454	A\$7,809
Total Revenue	A\$427,575	A\$776,408

Note: Revenue recognition timing varies by stream, particularly for conference-related income, which is recognised at the point the event is held.

Whilst the WHO program in FY24 brought considerable revenue, it also had corresponding expenses and was therefore not a meaningful contributor to profit.

The reduction in education services revenue relates to a global congress on emergency nursing that IFEM facilitated in 2024, which was not repeated in 2025.



Strategic Investment and Expenses

IFEM's expenses for FY25 totalled approximately **A\$463,632** compared to **A\$410,058** in **FY24**. This increase is a result of bad debts due to unpaid membership fees from a variety of associations and societies. There was also an increase in consultancy and external support to build robust strategic planning and delivery of outsourced services such as governance and financial administration.

Greater transition has taken place during FY26 with the commencement of a Chief Operating Officer and solidification of IFEM's direct staffing resources.

Stewardship and Future Outlook

Sound stewardship of IFEM's resources is essential to developing high-quality emergency medical care globally. The strategic deficit in FY25 was a conscious decision to build organisational capacity that will enable us to:

Strengthen our advocacy capabilities on the global stage.

Support our member societies with enhanced resources and networking opportunities.

By diversifying our revenue streams and maintaining fiscal discipline, IFEM is building a sustainable model that ensures we can continue to serve the global emergency medicine community for years to come.

Our strong cash position of **A\$704,471** (including amounts on term deposit) provides a solid foundation for continued growth and strategic investment.

A close-up photograph of a person in a white lab coat with a stethoscope around their neck. They are holding a large, ornate gold trophy with both hands. The trophy has a dark wooden base, a gold cylindrical middle section, and a gold cup with two handles on top. The background is blurred, showing a clinical setting.

RECOGNITION

Congratulations to our 2025 and 2026 Award Winners



Gautam Bodiwala Award

- Dr Cherri Hobgood – 2025
- Associate Prof Sally McCarthy AO – 2026



IFEM Humanitarian Award

- Associate Professor Megan Cox – 2025



The Order of the IFEM

- Dr Nicholas Jouriles – 2025
- Dr Jesús Daniel López Tapia – 2025
- Associate Professor Anthony Joseph – 2025
- Dr Joseph Bonney – 2026



Congratulations to our 2025 and 2026 Award Winners



ICEM 2025 Research Paper and Poster Awards

- **Best Paper – Evidence into Practice**

Margaret Murphy

Using an evidence-informed safety system called HIRAID® to improve the quality and safety of emergency department care in Sydney, Australia

- **Best Paper at ICEM**

Jeffrey Perry

Prospective multicenter validation of the abbreviated Canadian TIA Score for predicting subsequent stroke within 7 days

- **Best Paper by a Trainee**

Tharsini Sivananthajothy

Impact of professional interpretation services in the emergency department: a systematic review and meta-analysis

- **Best Paper by a Young Investigator**

Cody Dunne

Mortality and healthcare utilization in Canada due to foreign body airway obstructions: An 11-year population-based cross-sectional analysis



Visionary Industry Technology Award (VITA) Winner 2025



EMVision First Responder Brain Scanner

- Alexander Chan, PhD
- Robert Tiller
- Christian Wight, PhD
- Scott Kirkland
- E/Prof Stuart Crozier



The EMVision First Responder Brain Scanner is a backpack-sized, point-of-care neurodiagnostic device designed to revolutionize the pre-hospital evaluation of suspected stroke. Built with advanced electromagnetic imaging techniques and AI-powered analytics, this portable scanner enables rapid and accurate brain assessments directly at the scene of a medical emergency.

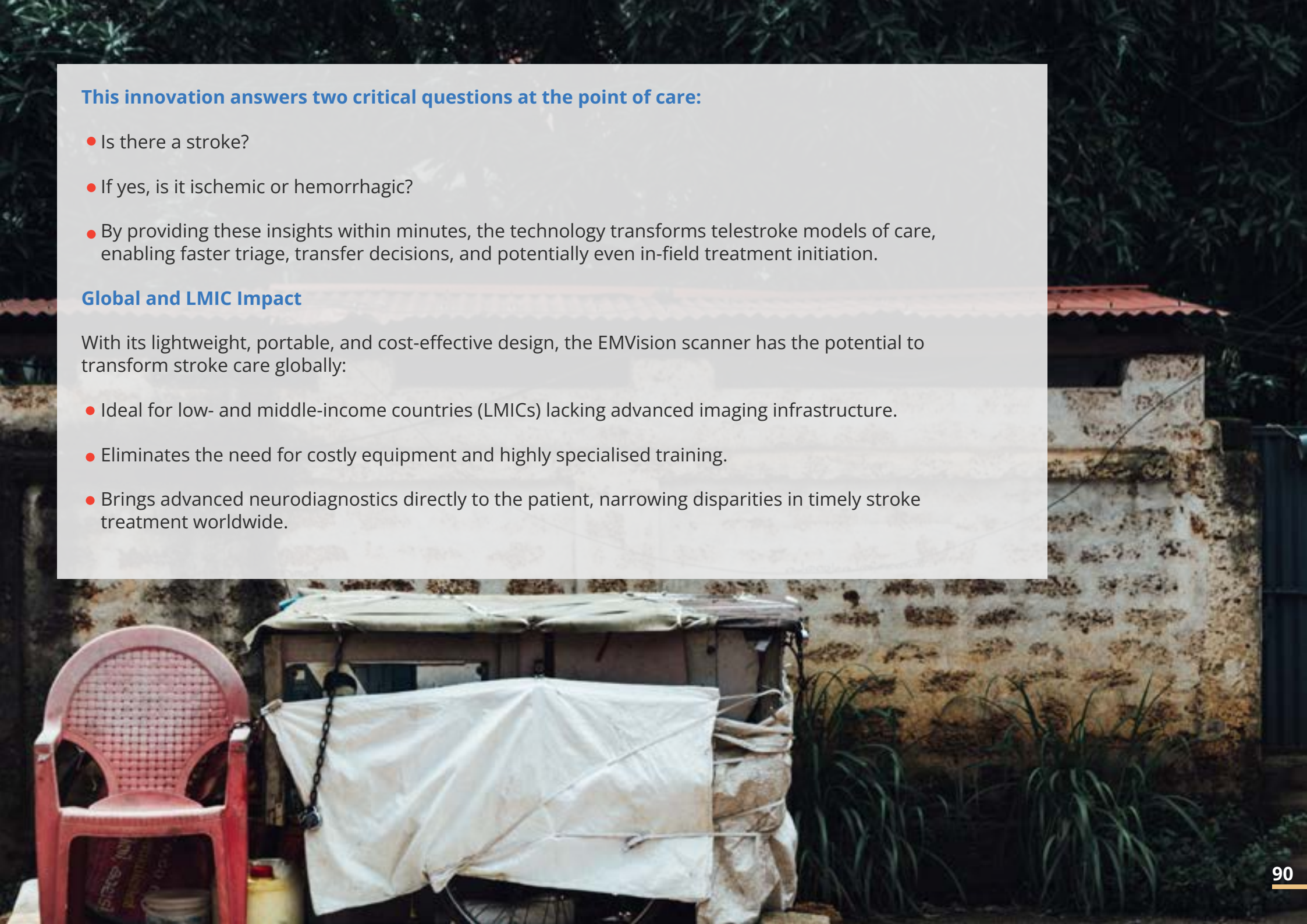
This innovation answers two critical questions at the point of care:

- Is there a stroke?
- If yes, is it ischemic or hemorrhagic?
- By providing these insights within minutes, the technology transforms telestroke models of care, enabling faster triage, transfer decisions, and potentially even in-field treatment initiation.

Global and LMIC Impact

With its lightweight, portable, and cost-effective design, the EMVision scanner has the potential to transform stroke care globally:

- Ideal for low- and middle-income countries (LMICs) lacking advanced imaging infrastructure.
- Eliminates the need for costly equipment and highly specialised training.
- Brings advanced neurodiagnostics directly to the patient, narrowing disparities in timely stroke treatment worldwide.





OUR MEMBERS



Our Members

- African Federation for Emergency Medicine
- American Academy of Emergency Medicine
- American College of Emergency Physicians
- American College of Osteopathic Emergency Physicians
- Asian Society for Emergency Medicine
- Asociación Costarricense de Medicos Emergenciólogos
- Asociación Panameña de Medicina de Emergencias
- Associação brasileira de Medicina de Emergência
- Australasian College for Emergency Medicine
- Bahrain Association of Emergency Medicine
- Belgian Society of Emergency and Disaster Medicine
- Canadian Association of Emergency Physicians
- College of Emergency Physicians, Academy of Medicine Malaysia
- Danish Society for Emergency Medicine
- Dutch Society of Emergency Physicians

- Emergency Medicine Association of Tanzania
- Emergency Medicine Association of Türkiye
- Emergency Medicine Society of Ghana
- Emergency Medicine Society of South Africa
- Emirates Society of Emergency Medicine
- European Council of Disaster Medicine
- European Society for Emergency Medicine
- Georgian Emergency Medicine Physicians Association
- German Association for Emergency Medicine DGINA
- Gulf Federation of Emergency Medicine
- Hellenic Society for Emergency Medicine
- Hong Kong College of Emergency Medicine
- Icelandic Society for Emergency Medicine
- Iranian Society of Emergency Medicine
- Iraqi Society for Emergency Medicine
- Irish Association for Emergency Medicine

Our Members

- Japanese Association for Acute Medicine
- Jordanian Emergency Medicine Society
- Korean Society of Emergency Medicine
- Latinamerican Federation of Emergency Medicine
- Lebanese Society of Emergency Medicine
- Libyan Emergency Medicine Association
- Nepalese Society of Emergency Physicians
- Norwegian College of Emergency Medicine
- Norwegian Society for Emergency Medicine
- Oman Society of Emergency Medicine
- Pakistan Society of Emergency Medicine
- Pan American Collaborative Emergency Medicine Development Program
- Philippine College of Emergency Medicine
- Polish Society for Emergency Medicine
- Royal College of Emergency Medicine
- Rwanda Emergency Care Association
- Saudi Society of Emergency Medicine
- Sociedad Argentina de Emergencias
- Sociedad Chilena de Medicina de Urgencias
- Sociedad Dominicana de Emergenciología
- Sociedad Mexicana de Medicina de Emergencia
- Society for Academic Emergency Medicine
- Society for Emergency Medicine, India
- Society of Emergency Medicine Practitioners of Nigeria
- Society of Emergency Medicine Singapore
- Spanish Society of Emergency Medicine
- Sri Lanka College of Emergency Physicians
- Sudanese Emergency Physicians Association
- Swedish Society for Emergency Medicine
- Swiss Society of Emergency and Rescue Medicine
- Taiwan Society of Emergency Medicine
- Thai College of Emergency Physicians
- Trinidad and Tobago Emergency Medicine Association
- Vietnamese Society of Emergency Medicine
- Yemeni Association of Emergency Medicine and Disaster





IFEM PRESIDENTS

IFEM Presidents

E. Jackson Allison Jr. (ACEP) 1991-92 (First Rotating President)	Peter Cameron (ACEM) 2010 – 2014
Norman G Kirby (BAEM) 1992-94	C. James Holliman (ACEP) 2014-2016
Richard H Ashby (ACEM) 1994-96	Lee Wallis (EMSSA) 2016 – 2018
Michael Murray (CAEP) 1996-98	James Ducharme (CAEP) 2018 – 2020
Nancy Auer (ACEP) 1998-2000	Sally McCarthy (ACEM) 2020 – 2022
Roger Evans (BAEM) 2000-02	Ffion Davies (RCEM) - 2022 – 2024
Ian Knox (ACEM) 2002-04	Saleh Fares Al-Ali (ESEM) – 2024 – 2026
Andrew Affleck (CAEP) 2004-06	
Robert E. Suter (ACEP) May-October 2006	
Gautam Bodiwala (CEM) 2006 –10 (First Elected President)	

Support Our Vision

Emergency care saves lives every day – yet access to high-quality emergency care remains unequal across many parts of the world. At IFEM, we believe that all people, in all countries, should have access to safe, timely, and high-quality emergency care delivered by well-supported and well-trained healthcare professionals.

The progress highlighted throughout this report has only been possible because of the dedication of our global community – our member societies, volunteers, educators, partners, healthcare professionals, and supporters who continue to contribute their time, expertise, leadership, and resources to advancing emergency medicine worldwide.

As IFEM continues to grow, so does the opportunity to create meaningful and lasting impact. From expanding the reach of the IFEM Academy and strengthening emergency care education, to advancing global standards, supporting emergency department quality improvement, and advocating for stronger emergency care systems, collaboration remains central to everything we do.

There are many ways to support IFEM's mission:

- Contribute educational expertise, research, or learning resources through the IFEM Academy
- Partner with IFEM on education, advocacy, research, or quality initiatives
- Support the development of emergency care systems and training globally
- Collaborate through IFEM committees, Special Interest Groups, and regional activities
- Share networks and opportunities that may help strengthen IFEM's global work
- Support IFEM financially through donations, sponsorship, or project-based partnerships

Every contribution – whether through expertise, collaboration, advocacy, or financial support – helps strengthen emergency care systems and improve outcomes for patients and communities worldwide.

Together, we can continue building a future where high-quality emergency care is accessible to all people in all countries.

To learn more about supporting IFEM or donating, visit: www.ifem.cc/donate



**International Federation
for Emergency Medicine**

***Creating a world where all people,
in all countries, have access to high
quality emergency medical care.***



admin@ifem.cc



ifemglobal



ifemglobal



international-federation-for-emergency-medicine



International Federation for Emergency Medicine