

EDITORIAL

Research, academia, and specialty training in Emergency Medicine

Investigación, academia y especialidad en medicina de urgencias y emergencias

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Following the recognition of Specialist Physician in Emergency Medicine (SPEM) as a specialty in June 2024,¹ and the subsequent announcement of the first 82 residency positions in the specialty,² Order PJC/311/2026 was published on Saturday, April 4, 2026, concerning the official training program for the specialty of SPEM, the assessment criteria for specialists in training, and the accreditation requirements for SPEM teaching units (TUs).³

Focusing specifically on the accreditation requirements relating to research activity, Article 3.5 establishes 5 criteria concerning the following areas: research projects, scientific publications, communications or presentations at conferences, and research protocols involving SPEMs.

With regard to research projects, a 10-year activity window is established, encompassing everything from competitively funded projects to projects simply “evaluated by ethics committees.” The latter considerably broadens the concept of a research project to include virtually any type of study, because all research activity (retrospective studies, surveys, qualitative research, etc.) must be evaluated by an ethics committee before it is conducted.

In addition, the 2nd requirement specifies that the SPEM TU must have its own research project, which must be active and have generated scientific output within the previous 4 years. This criterion is considerably more restrictive and requires the permanent development of structured research activity yielding results in the form of publications. Indeed, when the National Commission for the Specialty (NCS) was established, membership already required possession of a doctoral degree and participation in a research project within the previous 5 years, requirements that represented a significant step forward compared with those of other national specialty commissions.¹

A 3rd section specifically concerns publications: 2 publications must be produced every 2 years (equivalent to 1 per year), although for multicenter studies the requirement increases to 4 publications over the same period. In addition, the journals in which the articles are published must have an impact factor (IF), that is,

they must be included in Journal Citation Reports-Web of Science, or alternatively the journal must at least be indexed in PubMed, a repository that does not provide an IF.

Fourth, the TU must submit, with the participation of EM residents, 2 communications or presentations per year at local, national, or international conferences.

When the SPEM training program is compared with the most recently updated programs of other specialties published within the past 5 years—legal and forensic medicine (2022),⁴ psychiatry and child and adolescent psychiatry (2023),⁵ family and community medicine (2024),⁶ and nuclear medicine (2025)⁷—the requirements in these 4 areas are more demanding and of greater scientific quality in the EM training program (Table 1). Thus, with regard to research projects, whereas the other specialties require participation in a project evaluated within the previous 5 or 10 years, the requirement for an active in-house research project with scientific output during the previous 4 years adds a higher level of rigor. Regarding publications, family medicine (2024), legal and forensic medicine (2022), and nuclear medicine (2025) require at least 1 publication per year in national or international journals, whereas in psychiatry (2023) this requirement increases to 3 publications when the work is multidisciplinary. Regarding IF, the nuclear medicine and psychiatry regulations explicitly require publications in journals with an IF, such as those indexed in Journal Citation Reports or the SCImago Journal Rank-Scopus, whereas this is not required in the other programs analyzed. Only in the section concerning conference communications or presentations does the EM program include local conferences, whereas the other specialties restrict these contributions to national or international conferences. However, EM requires 2 such contributions annually, whereas the other programs require 1 contribution every 2 years, except nuclear medicine, where the requirement is annual.

The journal *EMERGENCIAS*, ranked in the 1st decile of the Emergency Medicine category in Journal Citation Reports and indexed in PubMed since 2015, meets the requirements to receive publications from the TUs be-

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Table 1. Research-related requirements in the training programs of medical specialties updated within the last 5 years

Specialty (year updated)	Research projects	Minimum publications required	Publication indexing	Conference communications or presentations	Other
Emergency Medicine (2026)	Participation in 1 project within the last 10 years and 1 active in-house project with scientific output within the last 4 years.	2 publications within the last 2 years (or 4 publications for multicenter studies).	Mandatory (JCR-WoS or, at minimum, indexed in PubMed).	2 annually (local, national, or international).	A specific research plan for the teaching unit, integrated into the institution's research plan.* Establish research protocols involving specialists in training.
Legal and Forensic Medicine (2022)	At least 1 externally evaluated project within the last 5 years.	1 annual publication in the specialty within the last 2 years.	Indexing is not specified as mandatory.	1 national communication or presentation annually within the last 2 years.	Mechanisms to ensure resident participation in research projects.
Psychiatry and Child and Adolescent Psychiatry (2023)	At least 1 externally evaluated project within the last 5 years.	1 annual publication (or 3 if the work is multidisciplinary) within the last 2 years.	Indexing is not specified as mandatory.	1 annual communication or presentation (or 3 if the work is multidisciplinary) within the last 2 years, at national conferences.	
Family and Community Medicine (2024)	At least 1 externally evaluated project within the last 10 years.	1 annual publication in national or international journals of the multiprofessional teaching unit within the last 2 years.	Publications must be indexed and peer reviewed, without specifying an indexing database.	1 annually within the last 2 years (or 3 if the work is multidisciplinary), at national or international conferences.	
Nuclear Medicine (2025)	At least 1 externally evaluated project within the last 5 years.	1 annual publication in national or international journals.	Publications must be indexed and peer reviewed, without specifying an indexing database.	1 annually at national or international scientific meetings or conferences.	Establecer con protocolos de investigación con participación de los especialistas en formación.

cause it also fulfills the criteria for diamond open-access publishing: open access with no publication charges for authors. We also hope that the second journal published by the Spanish Society of Emergency Medicine (SEMES), *Revista Española de Urgencias y Emergencias*, will soon be included in both databases, where it is currently undergoing evaluation.^{9,10}

These EM requirements represent a genuine catalyst for the specialty. They not only oblige TUs to increase their research activity, making it necessary to conduct research projects and apply for competitive funding, but also, because of the cross-sectional nature of the TUs, require close collaboration among professionals and clinical leaders to develop cross-sectional activity encompassing all areas of EM, with the patient at the center not only of clinical care but also of research. It is true that there are emergency departments and emergency medical services in which clinical workload overshadows scientific activity and where achieving the proposed standards may prove difficult. Accordingly, the NCS has established, as provided by the regulations, conditional accreditation of TUs subject to auditable implementation of improvement measures within a maximum period of 2 years, or alternatively a commitment to rectify deficiencies subject to biennial verification audits.³

In the 5th and final section of the EM program, it is stipulated that the TU must have a specific research plan integrated into the research plan of the center. On

the one hand, this also requires strengthening the research profile of emergency departments and emergency medical systems; on the other, it requires greater integration into the research activities conducted by their institutions, within which the SPEM TUs will necessarily have to be incorporated. The logical progression of these requirements would be the integration of EM into universities, specifically into doctoral programs, and for residents to complete their residency with a doctoral degree. The regulation does not require this, but we believe that it provides all the necessary foundations for it to happen. The recently created positions of linked assistant professor with a doctorate¹¹ and linked permanent labor professor,¹² which are beginning to be incorporated into Spanish public universities, would also provide an additional employment opportunity for SPEM residents after completion of their training and would ensure continuity of university teaching in this specialty.^{13,14} Let us look to the future with perspective and ambition.

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