On April 9, 2020, a panel of AMA leaders took to YouTube for a live town hall to shed light on the most pressing issues facing physicians during the COVID-19 pandemic.

Below, you’ll find answers to your pressing questions about PPE shortages, supply management, public policies and more.

What can be done to source PPE for COVID-19 hotspots from locales without the same high demand?

In light of the serious, ongoing concern over the shortage of necessary PPE for frontline health care and laboratory personnel, the AMA has called on the Federal Emergency Management Agency to act as the single national source for procurement of the supplies.

As physicians confront the challenges of reopening their practices, we know that access to PPE, for themselves and their staff, as well as for their patients, is a growing concern and we are working with policymakers on a solution.

What does the AMA recommend physicians whose specialties require close contact with patients, like ophthalmology or dermatology, do when PPE supplies are so limited?

As a stopgap measure while AMA works on more permanent solutions with policymakers, the Association encourages physicians and practices to follow CMS recommendations to postpone visits for non-urgent procedures. In order to protect both patients and health care personnel, physicians should opt for telehealth over in-person visits as much as possible.

The AMA Code of Ethics offers detailed advice on when physicians can responsibly provide noncritical care during a pandemic.
What is the AMA’s stance on providers not being allowed to bring their own PPE?

The AMA fully supports frontline health care workers using their own face masks and respirators when these critical resources are not available.

How does the AMA view recommendations that all individuals wear masks in public spaces?

Increasing evidence shows that asymptomatic individuals are contributing to the spread COVID-19. To reduce the spread of the disease, the AMA supports CDC guidance that the public wear non-medical cloth masks.