

## PRESIDENT'S LETTER



**Edward J. Ward,  
MD, MPH, FACEP**

released its "America's Emergency Care Environment, A State-by-State Report Card, 2014." This evaluation analyzes the support for emergency medicine patients on a state by state basis. It is very important to understand that this report card evaluates the conditions under which emergency care is being delivered in our state and **not** the quality of care provided by hospitals and emergency providers.

Illinois unfortunately received a D grade, ranking us 45th overall in the nation. This is worse than what we have received previously. While the items that contributed to Illinois' low grade should not be surprising to our members, here is a synopsis of the report. To view the report in its entirety as well as other Report Card resources, visit [ICEP.org/reportcard](http://ICEP.org/reportcard). More information is also included on Page 3 of this EPIC.

Illinois received a grade of F for Medical Liability Environment. The average malpractice payment (\$599,439) in Illinois is the highest in the nation. The average medical liability

This week, the American College of Emergency Medicine

premium for primary care physicians is second highest in the nation and the premium for specialists is \$36,000 per year higher than the

to see how poorly Illinois compares to other states in the fight for malpractice reform. When compared to Indiana and Wisconsin, both of which have enacted tort reform, Illinois has significantly fewer emergency departments per capita, significantly longer emergency department wait times, medical malpractice premiums up to four times as costly, and more than double the need for primary care physicians."

The state's grade for Disaster Preparedness was also an F. We have fallen from a national ranking of

8th in 2009 to 43rd. Although changes in a number of Disaster Preparedness indicators from 2009 may partially explain the significant grade drop, the decline also reflects that Illinois has not kept pace with other states. The medical response to the bombing at the Boston Marathon highlighted the benefit of what a well-prepared disaster plan can offer. This needs to be the gold standard for us in Illinois to achieve.

While most individual hospitals have some type of plan to deal with the next eventual flu outbreak, there is an extreme lack of regional coordination for something that is certainly going to occur. Also, proposed legislation to

### Contact Your State Legislators: Changes Needed to Improve Emergency Care in Illinois

Send an email voicing your concerns about the findings of the 2014 Report Card:

<http://www.capwiz.com/acep/issues/alert/?alertid=63054291&type=ML>



national average. The state also lacks a number of effective medical liability reforms including pretrial screening panels and liability protections for federally mandated emergency care. We also have few insurers writing medical liability policies (2.9 per 1,000 physicians), which may reflect the high malpractice awards in the state. These numbers are worse than what was presented in the 2009 report. Illinois has virtually no medical liability reforms in place to prevent frivolous lawsuits.

"Illinois has done little to change its reputation as being a litigious medical practice environment," said Bill Sullivan, DO, JD, FACEP, an ICEP Past President and owner of the Law Office of William Sullivan. "It is disappointing

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# 2014 ACEP Report Card for Illinois a Call to Action

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enhance immunity for health care responders during a disaster failed in the state legislature. These improved liability protections for health care workers would provide an incentive for physicians, nurses and behavioral health professionals to register and participate in the Emergency System for Advanced Registration of Volunteer Health Professionals. Illinois' per capita registrations in ESAR-VHP are among the lowest in the nation.

Register for ESAR-VHP at <http://www.phe.gov/esarvhp/Pages/default.aspx>.

Illinois improved its grade in Access to Emergency Care from a D- in 2009 to a D in 2014. This is due to the slight increases in emergency physicians, neurosurgeons, plastic surgeons and registered nurses. There has also been better than average health insurance coverage for children. One of the measures used for this category is available ED and hospital beds. We all know that there are many hospitals in Illinois that are purposefully contracting or struggling to survive. Some of them will not be open next year, let alone the next time we are surveyed.

The Public Health & Injury Prevention grade was again a D+. In Illinois, the percentage of people who are binge drinkers increased to 23% of adults. Binge drinking may also play a role in the state's relatively high percentage of alcohol-related traffic fatalities, 35%. Illinois has no motorcycle helmet law, which also contributed to the poor grade. The state fared better on seat belt legislation and laws on distracted drivers, but lack many injury prevention opportunities due to lack of funding.

Illinois dropped from an A- to a C+ in the cat-

egory of Quality & Patient Safety Environment. We rank 22nd in the nation in this category and this is the state's highest grade we received on the report. It shows there are a number of things we are doing right. Illinois maintains a statewide trauma registry and will be adopting the CDC's new trauma triage guidelines for pre-hospital and trauma center activation. We are also working on a system of care for the treatment of ST segment myocardial infarction and stroke.

If I had brought this report card home, my father would have had me back on the construction crew the very next day. While I do have some talent in dry walling, this would have a profoundly motivating effect to change my efforts and my behavior.

Many of the solutions to the limitations in Illinois highlighted by the Report Card will require funding — and that is a tough thing to accomplish in a state that is now having to face decades of financial debacles.

Members of the Illinois College of Emergency Physicians, I need you to contact your legislators and deliver the message that laws and funding need to change. ICEP has set up a link to do just that. Please take a few minutes to send your senators and representatives an email voicing your concern over the unacceptable conditions under which emergency care is being delivered in Illinois.



— **Edward J. Ward, MD, MPH, FACEP**  
**ICEP President**

## Deadline to Submit ICEP Committee Applications Is January 31

ICEP is accepting applications for members who wish to serve on ICEP Committees in 2014. The deadline to submit a committee application is Friday, January 31, 2014.

ICEP committees meet several times a year at the ICEP office or by conference call.

Appointments are available for all ICEP committees:

- Awards/Nominating
- Bylaws
- Educational Meetings
- EM Board Review Intensive Course
- EMS
- Finance
- ITLS Illinois Advisory
- Membership
- Patient and Physician Advocacy
- Practice Management
- Research

This year, the committee application must be submitted online. Visit [ICEP.org/2014Committee](http://ICEP.org/2014Committee) for the application. If you are applying for more than 1 committee, you must fill out the application 1 time for each committee.

Current committee members who would like to continue to serve are asked to complete the committee application as well.

Members will be notified of committee appointments by email in late February.



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# Illinois Drops from 27th to 45th Place in Nation on 2014 ACEP Report Card

Illinois ranked near the bottom of the nation at 45th place with a D grade in the 2014 ACEP Report Card on America's emergency care environment released January 16. It's a striking decline from the 27th place and C grade it received in 2009.

The report is not a reflection of the quality of care provided at emergency departments in Illinois but instead examines the support for emergency care and the environment in which it is delivered.

This year, the nation received an overall grade of D+, also a decline from its C- grade received on the 2009 Report Card.

"America's Emergency Care Environment: A State-by-State Report Card – 2014" has 136 measures in five categories: access to emergency care (30 percent of the grade), quality and patient safety (20 percent), medical liability environment (20 percent), public health and injury prevention (15 percent) and disaster preparedness (15 percent).

## Illinois Findings

Illinois' best grade was a C+ in Quality and Patient Safety Environment. Key policies and procedures in place in Illinois include a strong prescription drug monitoring program and a statewide trauma registry. Illinois is developing a system of care for stroke patients and STEMI patients. The state is also currently adopting new trauma triage guidelines for pre-hospital and trauma center activation, using the Centers for Disease Control and Prevention recommendations as baseline criteria.

The Report Card attributes Illinois' drop from 27th to 45th place largely to setbacks in the state's challenging medical liability environment and its failure to keep pace with other states in disaster preparedness. Illinois received Fs in both categories.

The state's failing grade for Medical Liability Environment, for which it was ranked 50th in the nation, reflects that Illinois has virtually no medical liability reforms in place. A major setback occurred when the state's medical liability cap on non-economic damages were ruled unconstitutional in 2010. Unless reforms

## Illinois Report Card At-A-Glance

	2009		2014	
	Rank	Grade	Rank	Grade
<b>Access to Emergency Care</b>	39	D-	<b>24</b>	<b>D</b>
<b>Quality &amp; Patient Safety Environment</b>	8	A-	<b>22</b>	<b>C+</b>
<b>Medical Liability Environment</b>	34	D	<b>50</b>	<b>F</b>
<b>Public Health &amp; Injury Prevention</b>	28	D+	<b>29</b>	<b>D+</b>
<b>Disaster Preparedness</b>	8	A-	<b>43</b>	<b>F</b>
<b>OVERALL</b>	27	C	<b>45</b>	<b>D</b>

are instituted, the state runs the risk of losing its most qualified physicians to states where there is more protection from frivolous lawsuits.

Illinois is 43rd in the nation in the category of Disaster Preparedness, falling behind in efforts to update disaster policies and procedures. The Report Card recommends the state work to increase the per capita number of physicians, nurses and behavioral health professionals registered in the Emergency System for Advance Registration of Volunteer Health Professionals, which are among the lowest in the nation.

Illinois moved up the ranks from 39th to 24th in the category of Access to Emergency Care, but still only received a D. The state increased the number of emergency physicians, neurosurgeons, plastic surgeons and nurses since 2009, but low reimbursement rates threaten access to care for the state's Medicaid patients. The Report Card recommends increasing Medicaid payments to improve access to primary care.

The D+ Illinois received in the category of Public Health and Injury Prevention reflects high rates of chronic disease and illness, very low

rates of immunization, and a high rate of binge drinking among adults. By contrast, the state's strong child safety seat and seatbelt laws have resulted in one of the lowest rates of traffic fatalities in the country.

## Resources

ICEP and ACEP have developed talking points about the 2014 Report Card for use when speaking with media and policymakers. The talking points are available to all members online at ICEP's Report Card page: [ICEP.org/reportcard](http://ICEP.org/reportcard).

ICEP's page also includes links to the Illinois report, the complete report for the nation, and tracking of media coverage with ICEP members interviewed.

A link to contact the Illinois legislature about the Report Card is also available on the website. All ICEP members are encouraged to use the tool to send an email to their legislators and call for action to improve the emergency medicine environment in Illinois.

With grant funds from ACEP, ICEP will be running an ad about the Report Card on Illinois' Capitol Fax website starting January 20. Visit [CapitolFax.com](http://CapitolFax.com) to see the ad and periodic posts about the Report Card from ICEP.

## National Report Card Findings

The 2014 Report Card shows that since the last study was published in 2009, support for emergency medicine in America on the whole has not improved but continues to decline.

The country was graded: D- in access to emergency care, C in quality and patient safety, C- in medical liability environment, C in public health and injury prevention, and C- in disaster preparedness.

The District of Columbia was ranked first in the nation, with an overall grade of B-, followed by Massachusetts, Maine, Nebraska, and Colorado. Wyoming was ranked last in the nation, with an overall grade of F. To see the complete Report Card data, visit [EMreportcard.org](http://EMreportcard.org).

The Report Card also warns that emergency departments are expected to see an increase in patient volume due to the Affordable Care Act.

# Registration Open Now for EM Update on Feb. 20 in Peoria

Programs Held at State-of-the-Art Simulation Facility

Registration is now open for ICEP's winter CME conference, the 2014 Emergency Medicine Update. EM Update will be held Thursday, February 20 at the new Jump Trading Simulation and Education Center in Peoria.

The multifaceted EM Update program offers educational topics for all emergency care providers, with a focus on pediatric emergency medicine. The program starts at 8:00 AM and concludes at 2:30 PM. It is approved for a maximum of 5.0 *AMA PRA Category 1 Credits*™.

On the agenda are:

Derek Robinson, MD, MBA, FACEP will illustrate the key economic, structural, and outcome imperatives of change in health care in his presentation, "Drivers of Health Care Transformation: Opportunities for Emergency Care Providers." He will define strategic interventions taken by major health care stakeholders and list the unique features of the Illinois health care delivery system.

Gene Couri, MD, FAAP, will review critical issues in the management of pediatric DKA, identifying the best practices and pitfalls of fluid management, glucose control, and osmolar control.

## EMERGENCY MEDICINE *Update*



**February 20, 2014**  
Peoria, Illinois

Teresa J. Morrell-Reich, MD, MPH, will discuss "Pediatric Dermatologic Emergencies: The Good, The Bad, and The Ugly," defining pediatric syndromes with skin manifestations and discussing the management of pediatric rashes.

Myto Duong, MD, will examine the presentation, differential diagnoses, and management of neonatal shock.

John W. Hafner, Jr., MD, MPH, FACEP and Rose Haisler, DO, FACEP will explore the 'pit crew' models of team resuscitation and their impact on community, pre-hospital and in-hospital management of cardiac arrest patients in their presentation, "Advances in Cardiac Resuscitation – From the Community to the Cath Lab."

Sara Krzyzaniak, MD, will describe the evaluation and emergency department management of the blunt abdominal trauma patient, including novel approaches: tranexamic acid, massive transfusion, and permissive hypotension.

ICEP President Edward J. Ward, MD, MPH, FACEP, will present an update on the current issues and challenges facing ICEP and the chapter's programs for patient and physician advocacy.

Registration and the full course brochure are available online at [ICEP.org/EMUpdate](http://ICEP.org/EMUpdate). Or register by calling the ICEP office at 630.495.6400, ext. 200.

New for 2014, EM Update will be followed by an Emergent Procedures Simulation Skills Lab course presented at the Jump Trading Simulation and Education Center on Friday, February 21. Plan to join ICEP for EM Update on Thursday and stay for the popular hands-on course on Friday! The course will follow the same format of ICEP's Emergent Procedures courses held at Evanston Hospital, with participants rotating in small groups to practice skills in airway, cardiovascular, pediatric/obstetric, and ultrasound modules.

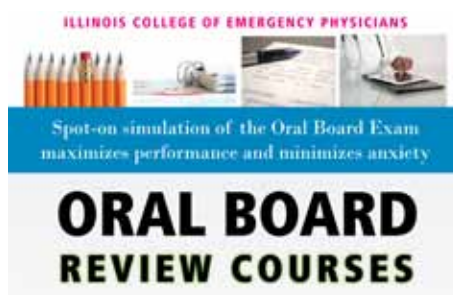
## Call for 2014 Oral Board Course Faculty

ICEP is seeking faculty for its popular Oral Board Review courses in 2014. Courses will be held at the Chicago O'Hare Marriott Hotel on:

- Friday & Saturday, March 14-15, 2014
- Friday & Saturday, August 22-23, 2014

Largely because of the excellent faculty, ICEP has the reputation for presenting the nation's premier oral board review courses.

As faculty, you will present single or multiple case simulations to candidates in strict oral board exam format and then provide feedback on their performance. The courses are intensive -- with a one-to-one student to faculty ratio. The honorarium is \$200 per course day.



ICEP's Oral Board Review courses run from approximately 7:45 am - 6:15 pm with coffee and lunch breaks. Faculty may sign up for a full day, half day morning, or half day afternoon session on one or both days of the course. Faculty may

also sign up to serve as alternates, but must still plan to be present on-site at the course during the time scheduled.

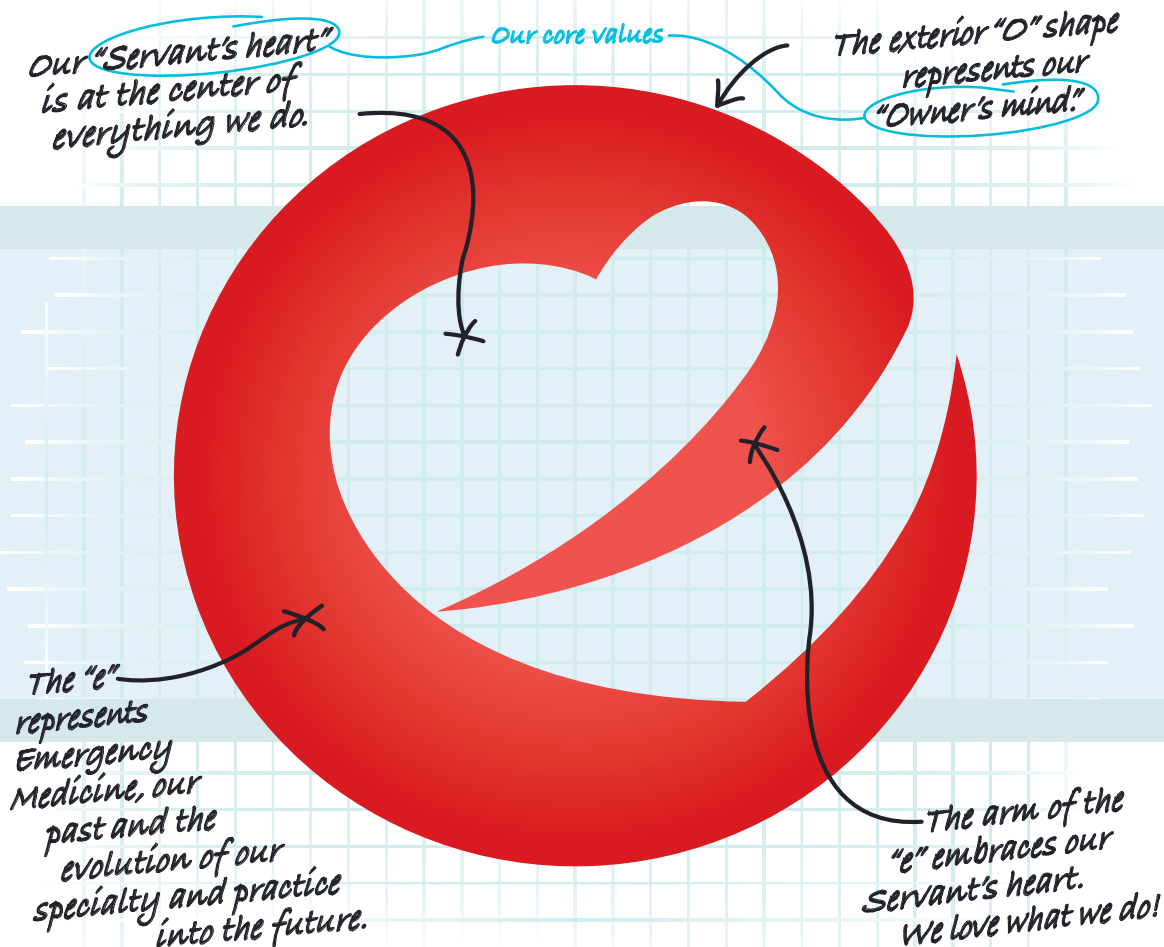
Teaching at the courses is a great way to give back to the specialty while networking with colleagues from around the country.

ICEP asks for your teaching commitment as early as possible because the courses are very popular, and we want to continue providing this important service to those who request it.

Please contact Lora Finucane at [loraf@icep.org](mailto:loraf@icep.org) or 630.495.6400, ext. 219, to sign up or with any questions.







## Introducing our new logo.

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# Help Reduce CAUTI: Illinois EDs Invited to Join National Program

Illinois emergency departments are encouraged to enroll in a national program designed to help reduce catheter-associated urinary tract infections (CAUTI).

Enrollment is currently open for the initiative, called "On the CUSP: Stop CAUTI" Emergency Department Improvement Intervention. Registration ends March 1, 2014.

Emergency departments have unique challenges in preventing CAUTI. The ED Improvement Intervention promotes best practices to reduce catheter utilization and decrease overall CAUTI rates:

- CAUTI are the most common type of healthcare-associated infection
- One fourth of all hospital patients have a short term, indwelling catheter with a significant portion placed for inappropriate indications
- 13,000 deaths are associated with CAUTI each year; most cases are preventable

Participation in the program expands an ED's capacity to ensure evidenced-based best practices are in place regarding catheter utilization, insertion and removal. This includes:

- Determining catheter appropriateness
- Promoting proper insertion technique
- Improving team work and communication of frontline staff
- Ensuring physician and nurse engagement
- Instilling a culture of partnership between ED and inpatient units

"On the CUSP: Stop CAUTI" Emergency Department Improvement Intervention is a structured well-developed program to ensure that catheter placement and utilization goals are met. Resources available for EDs participating in the program include the CUSP-CAUTI National Project Website rich with intervention materials and learning webinars, as well as quarterly "Office Hours" webinar/conference calls facilitated by Emergency Nurses Association/HRET.

For questions about the program or participation, contact Illinois State Lead, Sara Bader at [sbader@ihastaff.org](mailto:sbader@ihastaff.org) or 630-276-5685.

To register your emergency department for the program, please contact Neel Pathak at [npathak@aha.org](mailto:npathak@aha.org) to sign up for the ED Improvement Intervention.

## Call for Research Abstracts for 2014 Spring Symposium

ICEP is seeking submissions for the annual Statewide Research Showcase held at the Spring Symposium. This is ICEP's only research presentation opportunity, so don't miss your chance to submit and present at a regional meeting!

The Statewide Research Showcase is open to both residents and attending physicians to present oral and poster presentations of emergency medicine research.

ICEP is currently calling for submissions of

abstracts from those interested in presenting their research at this year's Symposium on May 1 at Northwestern Memorial Hospital.

The deadline to submit abstracts is Friday, March 7.

All abstracts must be submitted electronically to Lora Finucane at [loraf@icep.org](mailto:loraf@icep.org) with the completed Abstract Submission Form. Please make sure abstracts conform to the guidelines listed in the form. Download the form at [icep.org/research](http://icep.org/research).

## Last Chance for '11 LLSA: EM4LIFE Set for Feb. 25

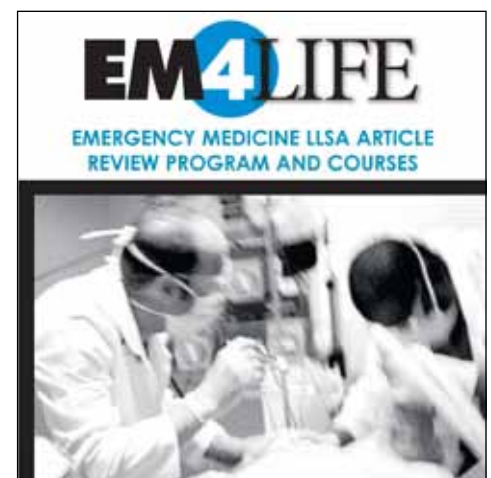
If you haven't already completed your 2011 LLSA requirements, time is running out: ABEM's deadline to complete the 2011 LLSA exam is March 31, 2014. Don't fall behind! Failure to complete the requisite number of LLSA exams could result in you being unable to fulfill your requirements for renewing your certification certificate.

ICEP will hold its last 2011 EM4LIFE LLSA Article Review Course on Tuesday, February 25, 2014 at the ICEP Conference Center in Downers Grove.

Registration for this course is open online now at [ICEP.org/LLSA](http://ICEP.org/LLSA).

EM4LIFE review courses help you meet your EMCC requirements by getting your LLSA done in just one day — including the exam! All sessions include the opportunity to take the LLSA exam online in a group setting.

The course includes the 2011 EM4LIFE Emergency Medicine LLSA Article Review & CME Program textbook! Earn 15 additional hours of *AMA PRA Category 1 Credits*™ upon successful completion of the text's post-test. The cost of the course and textbook is \$389 for ICEP/ACEP members and \$419 for non-member physicians.



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# ICEP Physicians Appointed to 2014 ACEP Committees

Twenty-three ICEP members have been selected to serve on national ACEP Committees in 2014. Jeff Schaidler, MD, FACEP, of John H Stroger Jr. Hospital of Cook County, has been named the chair of ACEP's Education Committee. Congratulations to all members selected.

## **Academic Affairs Committee**

Jacqueline Marie Cappiello Dziedzic, DO  
David S Howes, MD, FACEP

## **Education Committee**

John Michael Bailitz, MD, FACEP  
Morris S Kharasch, MD, FACEP  
Christopher H Ross, MD, FACEP  
Jeff J Schaidler, MD, FACEP, Chair  
Michelle J Sergel, MD  
Ernest Enjen Wang, MD, FACEP

## **EMS Committee**

Eric Beck, DO, EMT-P

## **Federal Government Affairs Committee**

Susan Marie Nedza, MD, MBA, FACEP

## **Emergency Medicine Practice Committee**

Leslie S Zun, MD, FACEP

## **Research Committee**

Shu Boun Chan, MD, FACEP  
D Mark Courtney, MD, FACEP

## **Public Relations Committee**

Archana Reddy, MD, FACEP  
Valerie M Roth, MD

## **Medical Legal Committee**

James Raymond Hubler, MD, JD, FACEP  
Daniel J Sullivan, MD, JD, FACEP  
William P Sullivan, DO, JD, FACEP

## **Quality & Performance Committee**

Christopher B Beach, MD, FACEP  
Rahul K Khare, MD, FACEP  
Susan Marie Nedza, MD, MBA, FACEP  
Meredith C Williams, MD

## **Disaster Preparedness & Response Committee**

Bhakti Hansoti, MD

# Mobile Sites for Illinois HIV Care Connect Launch

Illinois HIV Care Connect recently announced the launch of English and Spanish mobile versions of its Web site ([www.hiv-careconnect.com](http://www.hiv-careconnect.com)), making access to treatment-related information easier for today's HIV-positive population.

The mobile site is the latest in a series of Illinois HIV Care Connect efforts to improve access to HIV treatment, diagnostic and prevention information. In August, the statewide program launched a Spanish version of its desktop Web site ([www.hivcareconnect.com/index-es.html](http://www.hivcareconnect.com/index-es.html)). The program also launched:

- A Twitter feed
- Facebook pages in English and Spanish
- Google+ pages in English and Spanish

Physicians are asked to refer patients with HIV to these resources. Illinois HIV Care Connect is a statewide network providing medical case management, health care and support services to people living with HIV.

# Illinois Prescription Monitoring Program

- ▲ Tracking Controlled Prescriptions
- ▲ View Patient Prescription Histories
- ▲ Preventing Abuse and Diversion
- ▲ Mobile Accessibility – 24/7 Access
- ▲ Program is Voluntary
- ▲ Web Site is Free of Charge



[www.ilpmp.org](http://www.ilpmp.org)



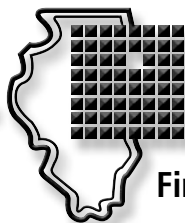
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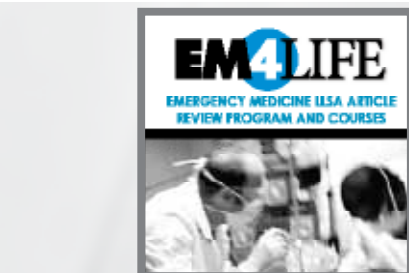
# Here's how 2014 is stacking up at ICEP!

## EDUCATIONAL PROGRAMS



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### Emergency Medicine Update

February 20, 2014

Jump Trading Simulation & Education Center, Peoria

### Emergent Procedures Simulation Skills Lab

February 21, 2014

Jump Trading Simulation & Education Center, Peoria

May 2, 2014 | October 3, 2014

NorthShore Center for Simulation and Innovation, Evanston

### EM4LIFE LLSA Article Review Courses

**2011 Articles:** February 25, 2014

**2012 Articles:** April 29, 2014

**2013 Articles:** May 8, 2014; August 16, 2014

**2014 Articles:** November 13, 2014

ICEP Conference Center, Downers Grove

### Oral Board Review Courses

March 14-15, 2014 | August 22-23, 2014

Chicago O'Hare Marriott Hotel, Chicago

### Mock Orals Private Tutorials

April 3-7, 2014 | September 18-22, 2014

Chicago O'Hare Marriott Suite, Rosemont

### Spring Symposium

May 1, 2014

Northwestern Memorial Hospital, Chicago

### Emergency Medicine Board Review Intensive

August 12-15, 2014 | October 14-17, 2014

ICEP Conference Center, Downers Grove

### Resident Career Day

September 4, 2014

Presence Resurrection Medical Center, Chicago



## Clinical and Core Faculty Physician Opportunities in Illinois

OSF HealthCare is an integrated healthcare network, with seven hospitals in Illinois, and a variety of emergency medicine opportunities. We offer a highly competitive compensation package ranked in the top 5% nationwide. Positions exist for those seeking low or high volume, ranges in acuity, and diverse community preferences. Opportunities are currently available in Peoria, Pekin, Pontiac, Galesburg, and Monmouth, Illinois. All centers provide 24-hour emergency services.

With headquarters in Peoria, Illinois, OSF Saint Francis Medical Center is the area's only Level 1 Trauma Center, the highest level designated in trauma care and base station and resource hospital for EMS. A pediatric ED is located within the main ED.

OSF Saint Francis Medical Center is a major teaching affiliate of the University of Illinois College of Medicine at Peoria, with a total of 12 emergency medicine residents a year in a competitive TL1-2-3 program. Other locations service as primary and tertiary referral centers or critical access hospitals. A Life Flight helicopter program, with adjacent landing area, is in place in order to provide the highest quality care.

**Please contact: Stacey E. Morin**  
OSF Healthcare System  
1420 West Pioneer Parkway | Peoria, IL | 61615  
p (309) 683-8354, [stacey.e.morin@osfhealthcare.org](mailto:stacey.e.morin@osfhealthcare.org)



[www.osfhealthcare.org](http://www.osfhealthcare.org)



# Classified Ads

**BARRINGTON, ILLINOIS.** Tri-County Emergency Physicians, LTD seeks a full-time or part-time Emergency Department Physician at Good Shepherd Hospital in Barrington, Illinois. We offer flexible hours, a competitive salary with bonus, and premium pay for night shifts. Must be board certified or board eligible in Emergency Medicine. Please send your CV to Dr. Joseph Giangrosso, 450 W. Highway 22, Barrington, IL, 60010, 847-842-4231 or email [joe.giangrosso@advocatehealth.com](mailto:joe.giangrosso@advocatehealth.com).

**Full and part time positions are available for a combined Holy Cross/Mount Sinai Hospital Position.** The Sinai Health System is recruiting part and full time emergency physicians to work at Mount Sinai Hospital and Holy Cross Hospital. Mount Sinai Hospital is a community teaching hospital, teaching affiliate of Chicago Medical School and University of Chicago on the southwest side of Chicago. Mount Sinai sees 60,000 patients per year and is a level I pediatric and adult trauma center with EDAP. Holy Cross is a community hospital with stroke designation, sees 45,000 patients per year is also on the south side of Chicago. Physicians will work at both hospitals and will be employed by Sinai Medical Group. Competitive salary and benefits. For further information, contact Les Zun, MD, Chair, Emergency Medicine at [zunl@sinai.org](mailto:zunl@sinai.org) or 773-257-6957.

want to reach 1,350 Illinois emergency physicians?  
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Advertise in the  **EPIC.**  
**Targeted. Affordable. Effective.**

Contact Kate Blackwelder  
at 630.495.6400, ext. 205 or  
[kateb@icep.org](mailto:kateb@icep.org) for an Illinois EPIC  
rate sheet and list of closing dates.



## Democratic Group Seeking BC/BE ED Physician Amazing Career Opportunity

70K ED at **Rush Copley Medical Center** in Aurora/Naperville Area

40 minutes southwest of downtown Chicago

10 minutes to Naperville Area with top ranking schools, housing, entertainment, dining

Staffing adjusted to maintain 2.0 patients per hour for main ED physicians

Efficient real-time Dragon based dictation, templated Electronic Medical Record & ordering

Award winning nursing staff with low patient to nurse ratios, 90th percentile Press Ganey

Complete backup coverage, supportive medical staff, efficient radiology service

Level II Trauma Center, 24/7 Cath Lab On Call, Certified Stroke Center

Dedicated Express Care separately staffed by physicians

10K annual volume **Rush Copley** Freestanding Emergency Center in Yorkville, IL

Single Coverage, lower acuity

24 hour shifts available

Dedicated CT, radiology, lab, and EMS support

Backup specialty coverage via main campus

Admissions transferred directly to Rush Copley Medical Center

Outstanding compensation as independent contractor:

Competitive hourly rates with night differential

Paid malpractice & tail and Quarterly Performance Incentive Bonuses

Guaranteed hourly rates first year for full time contractors

RVU based reimbursement after 12 months full time service, sooner for high performers

Dedicated scheduler, coordinator

2 year partnership eligibility

We are seeking high performing 'A-team' members to join our democratic group of satisfied and motivated physicians to staff both of the above sites. Board Certification / Eligibility in Emergency Medicine is **required**. The ideal candidate will have excellent interpersonal skills, a clean record to be seamlessly credentialed, commit to 140+ hours per month. Part time candidates will be considered.

Send CV to Steven Parkes:  
[SWParkes@empactphysicians.com](mailto:SWParkes@empactphysicians.com)  
[www.EMPactPhysicians.com](http://www.EMPactPhysicians.com)



Due to expansion and growth, **Carle Physician Group** in Urbana, Illinois is recruiting additional **BE/BC Emergency Medicine** physicians to join our stable and experienced quality-oriented department. ● 21-member department and 10 PAs seeing ~70,000 patients per year ● All physicians are ABEM/AOBEM certified ● Emergency Department physicians are supported by a 18-physician Hospitalist Department and 24-hour in-house coverage provided by Anesthesiology, Hospitalists, OB-GYN, and Trauma Surgery ● Opportunity to teach medical students/residents through the **University of Illinois College of Medicine** ● **Superior compensation package, paid malpractice insurance with 100% tail coverage** ● Vacation, CME/meeting and holiday time with equitable distribution of holiday/weekend shifts ● **Sign on and Retention bonus** ● Department has routinely scored in the 99th percentile in Press Ganey customer satisfaction among its peers and just received the prestigious 2012 Emergency Medicine Excellence Award by HealthGrades ● Home to the Big Ten University of Illinois, Champaign-Urbana is a diverse community of 195,000 offering cultural, sporting and entertainment options usually associated with much larger cities; centrally located two hours from Chicago/Indianapolis and three hours from St. Louis. **For more information, contact Melissa Emkes at (800) 436-3095, extension 4101, email your CV to [melissa.emkes@carle.com](mailto:melissa.emkes@carle.com) or fax it to (217) 337-4181.**



**Illinois College of Emergency Physicians**  
3000 Woodcreek Drive, Suite 200  
Downers Grove, IL 60515

## ICEP Calendar *of* Events 2014

**January 21, 2014**  
**ICEP EM Board Review**  
**Intensive Committee**  
**Conference Call**  
9:00 AM - 10:30 AM  
800-944-8766, code

**January 21, 2014**  
**ICEP Membership Committee**  
**Conference Call**  
1:00 PM - 2:00 PM  
800-944-8766, code 28574

**February 12, 2014**  
**ICEP EMS Committee**  
11:00 AM - 1:00 PM  
ICEP Board Room  
Downers Grove

**February 12, 2014**  
**EMS Forum**  
1:00 PM - 3:00 PM  
ICEP Conference Center  
Downers Grove

**February 20, 2014**  
**Emergency Medicine Update**  
Jump Trading Simulation  
& Education Center, Peoria

**February 20, 2014**  
**Emergent Procedures**  
**Simulation Skills Lab**  
Jump Trading Simulation  
& Education Center, Peoria

**February 24, 2014**  
**ICEP Education Programs**  
**Committee**  
11:00 AM - 1:00 PM  
ICEP Board Room  
Downers Grove

**February 25, 2014**  
**EM4LIFE 2011 LLSA Article**  
**Review Course**  
ICEP Conference Center  
Downers Grove

**March 5, 2014**  
**ICEP Finance Committee**  
9:30 AM - 10:30 AM  
ICEP Board Room  
Downers Grove

**March 5, 2014**  
**ICEP Board of Directors**  
10:30 AM - 2:30 PM  
ICEP Board Room  
Downers Grove

**March 14-15, 2014**  
**Oral Board Review Courses**  
Chicago O'Hare Marriott  
Chicago

**April 29 2014**  
**EM4LIFE 2012 LLSA Article**  
**Review Course**  
ICEP Conference Center  
Downers Grove

**May 1, 2014**  
**Spring Symposium &**  
**Annual Business Meeting**  
Northwestern Memorial  
Hospital Feinberg Pavilion  
Chicago

**May 2, 2014**  
**Emergent Procedures**  
**Simulation Skills Lab**  
NorthShore Center for  
Simulation and Innovation  
Evanston Hospital  
Evanston

**May 8 2014**  
**EM4LIFE 2013 LLSA Article**  
**Review Course**  
ICEP Conference Center  
Downers Grove

**May 12, 2014**  
**ICEP Education Programs**  
**Committee**  
11:00 AM - 1:00 PM  
ICEP Board Room  
Downers Grove

**May 15, 2014**  
**ICEP EMS Committee**  
11:00 AM - 1:00 PM  
ICEP Board Room  
Downers Grove

**May 15, 2014**  
**EMS Forum**  
1:00 PM - 3:00 PM  
ICEP Conference Center  
Downers Grove

**Register for courses online at**  
**ICEP.org!**

