

PRESIDENT'S LETTER

There Never Has Been a Better Time



**David Griffen,
MD, PhD, FACEP**

There never has been a better time to be an emergency physician. The debate over the need for our specialty is in the distant past. Our ability to provide excellent care to our patients has never been greater.

Coordinated systems of care for such illnesses as STEMI, stroke, sepsis, and trauma all rely on us as integral participants, and make our practice more effective and satisfying. Our individual opportunities in practice, leadership, research, education, academics, quality and emergency medicine subspecialties are tremendous. Our training programs are thriving. One of our own, Dr. Steven Stack, of Kentucky, is even President-Elect of the American Medical Association!

We are well positioned in this era of meaningful health care reform as part of the solution, and not part of the problem. ACEP's logo with the square representing the missing specialty is of historic significance, but that square is no longer missing. It has definitely been filled.

When I graduated from medical school over 30 years ago, the situation was much different. I can still vividly recall the look of shock on my distinguished faculty advisor's face

when I told him I was thinking of going into emergency medicine. He visibly recoiled, then said, "Why would you want to be a hardware clerk?" I have never understood that particular analogy — comparing us to restaurant servers or orchestra conductors, perhaps — or why he held hardware clerks in such low esteem.

More than once in residency, I was told by consultants, "This patient needs a REAL doctor." Early in my attending career, I had to defend three of my colleagues when a powerful oncologist complaining to our CEO referred to them as "Huey, Dewey and Louie" (which were not their names). There was not much love or respect within the house of medicine for our specialty.

Many emergency physicians of my age have similar stories and, to paraphrase Henry V, can "strip his (her) sleeve and show his scars" earned in those early days. Back then, when you finished residency there was no question about whether or not to join ACEP. We felt like we occupied a beachhead on hostile shores, and we all needed to stay together.

Although the early history of emergency medicine is important to appreciate, it is not the paradigm of today. Our specialty faces a whole new set of challenges as we navigate through the uncharted waters of health care reform. We are moving from a health care system based on volume to one based on value.

Some of the trends we face include coverage expansion, emergence of retail health care, in-

creased care coordination, emphasis on population health, value-based purchasing, pay for performance and "demand destruction." How will these trends play out? No one can possibly know exactly. Uncertainty is the only certainty. However, like any major transformation, do not expect our journey through these uncharted waters to be calm.

We truly need all hands on deck as we navigate a course. It will require a collective vigilance by our specialty. No other organization is positioned to provide that voice during this period that ACEP — and at the state level, ICEP — can provide. It is definitely time to stay together as a specialty.

According to our mission statement, "The Illinois College of Emergency Physicians exists to support access to quality emergency medical care and to promote the interests of emergency physicians and the patients and communities they serve." Our specialty was founded to improve care of our patients. As long as we remain focused on this part of our mission, I am very confident we will be just fine, and being an emergency physician will become even more rewarding.

As an emergency physician practicing in Illinois, I feel very fortunate to have the state organization we have in ICEP. Dr. Edward Ward has provided exemplary leadership as President over the past year. Under his leadership, ICEP has become stronger and more ef-

■ **CONTINUED ON PAGE 2**

InsideEPIC

2014 - Issue 3

**Legislation Passed to Fund
Illinois Poison Center**

■ page **2**

**Governor Quinn Signs
Bill to Reform Illinois
Medicaid**

■ page **3**

**Chicago to Host ACEP14
in October: Registration
Open Now**

■ page **4**

**Ultrasound for Emergency
Medicine Workshops Offer
Live Model Practice**

■ page **6**

There Never Has Been a Better Time

from Page 1

fective. Our Board of Directors are excellent emergency physicians with multiple diverse talents from a variety of practice settings. Our committee chairs are dedicated, effective leaders. We have many active members giving their time and effort to improve the care of emergency department patients in our state, and the ability of our members to provide that care. Our executive director, Ginny Kennedy Palys, and her administrative staff, are extremely competent and wonderful to work with on ICEP projects.

ICEP is a first-rate organization. I strongly endorse participation in ICEP courses, committees and other activities if for no other reason than to enrich your professional career. You will meet, and work with, some amazing people.

In the upcoming year, ICEP will hold multiple conferences including the Emergency Medicine Board Review Intensive courses, Oral Board Review Courses, EM4LIFE LLSA Article Review Courses, Resident Career Day, Ultrasound for Emergency Medicine courses, Emergent Procedures Simulation Skills Lab courses, EM Update in Peoria, and the Spring Symposium and Annual Business Meeting. In addition, ICEP will debut a new one-day leadership conference in December, and host an advocacy day in Springfield in early 2015.

ICEP will be following all regulatory and legislative initiatives affecting our specialty at the state and national level, and will be following the developments in health care reform, advocating for our patients and our specialty. A recent example of effective advocacy is the recent success in the Illinois

Poison Center funding. Later this year, we will be revisiting our strategic plans and updating it as necessary. There is a lot going on!

Please contact me directly at dgriffen@icep.org if you are interested in being more involved. If you are mentoring residents and other emergency physicians and feel that ICEP involvement would enrich their career s(which it will), please have them contact me as well. And be sure to tell them there has never been a better time to be an emergency physician.

Sincerely,



— David Griffen, MD, PhD, FACEP
ICEP President

NEW FROM ICEP: Save the Date!

Leadership Conference December 9, 2014

ICEP Conference Center
Downers Grove, IL

A 1-day meeting focused on
building leadership skills for
emergency physicians

More details to be announced
this summer at ICEP.org and in EPIC!

Legislation Passed to Fund Illinois Poison Center

At the end of May, the Illinois House of Representatives and Senate gave final legislative approval of SB741, which provides a dedicated funding source to keep the Illinois Poison Center (IPC) open for four years.

The bill was sponsored by Illinois Senator Don Harmon and Rep. Camille Lilly. Governor Pat Quinn signed the bill into law on June 16.

Earlier this year, the IPC gave notice of closure to the Illinois Department of Public Health due to insufficient funding. State and federal budget cuts totaling \$1.5 million per year had led to a shortfall of \$500,000 per year for the past three years. Without sustainable funding, the IPC was slated to close on June 30, 2014.

As part of the IPC's Save the Poison Center campaign, almost 11,000 letters, emails and calls were made since January 2014, with more than 400 emails sent by emergency physicians.

With funding secured, the IPC can continue to provide help to all emergency physicians in Illinois. The closure of the poison center would have created a tremendous burden on the emergency medical response and emergency departments throughout

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ILLINOIS POISON CENTER

the state due lack of home triage away from 911 and the EMS system and lack of medical toxicology information services.



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Highlights of Spring Legislative Session

The Illinois General Assembly has adjourned the spring session. Both chambers wrapped up the session on the final day but leave Springfield with many unaddressed issues, including pension reform, gambling expansion, issues surrounding the Lincoln Presidential Library, school funding and others.

The Fall Veto Session is scheduled for November 19, 20, 21 and December 2, 3 and 4, 2014.

A full description of all proposals introduced will be provided in an End-of-Session Report to come in July and published in the next EPIC.

The following are brief highlights of the session.

Among the bills passed are:

- Illinois Poison Center funding assured for 4 years
- Telehealth bill that provides definitions for terms such as interactive telecommunications system and telehealth services
- EMS Education Standards to bring Illinois into national compliance
- Expansion of the POLST (physician orders for life-sustaining treatment) form
- Psychologists prescribing authority with strict regulations that include additional education equivalent to physician assistance training and no “grandfathering” of current psychologists.

ICEP and its lobbyists Illinois Strategies believe that the governor intends to sign all of these bills. The Illinois Poison Center funding has already been signed into law.

Among the bills that failed are:

- Designation of Level III trauma centers
- EMS medical assisted transport

Look for more information to be published in the End of Session report later in July.

ACEP Poll Finds ED Visits On the Rise, Questions ACA Impact

Nearly half of emergency physicians responding to a poll are already seeing a rise in emergency visits since January 1 when expanded coverage under the Affordable Care Act (ACA) began to take effect.

In a nationwide online poll conducted by the American College of Emergency Physicians (ACEP), 86 percent expect emergency visits to increase over the next three years. More than three-fourths (77 percent) say their EDs are not adequately prepared for significant increases.

“Emergency visits will increase in large part because more people will have health insurance and therefore will be seeking medical care,” said ACEP President Alex Rosenau, DO, FACEP. “But America has severe primary care physician shortages, and many physicians do not accept Medicaid patients, because Medicaid pays so low. When people can’t get appointments with physicians, they will seek care in emergency departments.”

The data suggest states that expanded Medicaid are more likely to see increases in the

volume of Medicaid emergency patients. Dr. Rosenau said that policymakers need to make sure there are adequate resources to care for growing numbers of emergency patients.

“Congress and President Obama must make it a national priority now to strengthen the emergency care system,” Dr. Rosenau said. “ACEP is urging Congress to make a firm commitment to emergency patients by holding a hearing to examine whether additional strains are occurring in the emergency department safety net as a consequence of the Affordable Care Act.”

An overwhelming 84 percent of emergency physicians report that psychiatric patients are being held — “boarded” — in their emergency department, with nine in 10 (91 percent) saying that this practice has led to violent behavior by distressed psychiatric patients, distracted staff or bed shortages, all of which may harm patients.

More than half of the physicians polled add that the amount of time and effort their emergency

■ CONTINUED ON PAGE 8

Gov. Quinn Signs Bill to Reform Illinois Medicaid

Governor Pat Quinn signed legislation on June 16 to modernize and improve Illinois’ Medicaid system.

The new law will benefit Illinois’ three million residents who currently receive Medicaid, as well as the state’s 200-plus hospitals and 1,200 nursing homes by restoring adult dental and podiatric care, providing increased protections and more.

The legislation makes important reforms by creating uniform requirements for Managed Care Organizations and Accountable Care Entities, providing stability for hospitals and nursing homes, and giving a huge boost to the redesign of Medicaid.

It also aligns Illinois law with federal law, providing Medicaid coverage for children who have been without private insurance for three months.

Resident Career Day Features ACEP's Dr. Paul Kivela for Keynote Lecture

Register today for ICEP's Resident Career Day that targets what residents are looking for: practical, real-world guidance on career planning, to help you get what you want, where you want, when it's time to start the job hunt.

Resident Career Day will be held Thursday, September 4 at Presence Resurrection Medical Center's Marion Conference Center in Chicago.

The 2014 program features keynote speaker Paul Kivela, MD, MBA, FACEP, ACEP's Secretary-Treasurer. Dr. Kivela will present "What I Didn't Learn in Residency" and will participate in a panel discussion on managing student debt.

Life after residency will bring a new set of challenges, starting with the search for your first position. ICEP's Resident Career Day focuses on helping you meet these challenges head on and turn them into opportunities. On the agenda:

- Keynote speaker Dr. Paul Kivela, ACEP



Secretary-Treasurer, presenting key lessons he learned *outside* of residency

- A panel discussion on managing student debt, featuring Dr. Kivela, Dr. Matthew Pirotte, and financial advisor Thomas Olexa
- Building your brand on social media, presented by Dr. Ernest Wang, who was just named Faculty of the Year by the University of Chicago EM Residency Program
- A panel discussion on global health opportunities, featuring Dr. Timothy Erickson,

Dr. Jennifer Chan, and Dr. Cai Glushak

- The popular "Speed Dating" Career Fair networking event: top industry recruiters will rotate through tables of participants to discuss available employment opportunities and make valuable connections for the future

Registration and a full program agenda are available online now at ICEP.org. There is no charge for residents, medical students, and ICEP member attending physicians to attend.

Chicago to Host ACEP14 in October: Register Now

The world's largest emergency medicine educational meeting returns to Chicago this fall with nearly 7,000 emergency medicine health care providers ready to hit Chicago's streets October 27-30.



ACEP14 offers something for everyone: highly respected courses, labs and workshops; opportunities to advance your career; demos of the latest EM toys; and more. Registration is open online now at ACEP.org/ACEP14.

ICEP will host a special reception for members at ACEP14. Look for more details to be announced shortly!

Don't miss these highlights of ACEP2014:

- 350 educational courses, labs and workshops
- 26 topic areas related to clinical issues and practice trends
- A new "EM Hackathon" to crowd-source health care solutions
- Special features and events for EMF and NEMPAC donors

- Sessions designed specifically for residents and medical students
- Two days that showcase original abstracts at the Research Forum
- An expanded, case-based innovatED experience
- Hundreds of the latest products and services related to your practice
- Wellness Center for your annual check-up
- Pre-conference events to earn even more CME
- Dine around events for quality one-on-one time with notable EM leaders
- ECI Presents the ACEP14 Kickoff Party at the popular Navy Pier
- A Closing Celebration, presented by EmCare, at the Museum of Science and Industry

Get Ready for Your Boards with the Best

For Qualifying or ConCert exam prep, make ICEP's Emergency Medicine Board Review *Intensive* your choice.

Emergency Medicine Board Review *Intensive* prepares emergency physicians for initial certification or recertification exams in emergency medicine with a focused 4-day program that maximizes your study time to help you pass your Boards.

Courses will be held August 12-15, 2014 and October 14-17, 2014 at the ICEP Conference Center in Downers Grove. Spaces are still open for both course dates!

From targeted lectures to comprehensive review materials to a focus on questions for maximum preparation, EMBRI gives you the edge as you prepare for your ABEM exam. Find out more at ICEP.org/embri.



We're all in.



You may know by now that EMP places a high value on having fun and living life wholeheartedly. But our mission: *To care for patients*, is where we began 22 years ago, and it's where we begin each day. At EMP, we're all in. Putting our hearts into everything we do means every patient receives the best care imaginable, and every EMP physician has the opportunity to thrive in a group where fun and discovery never end. Are you all in?

EMP physician Dr. Celia Aguilar, part of a special force we call "Firefighters"—our heroes who travel to where help is needed most.



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Ultrasound for EM Courses Offer Live Model Practice

Dates are set for the Ultrasound for Emergency Medicine hands-on workshops this fall at ICEP! Courses will be held Friday, September 5 and Wednesday, December 3 at the ICEP Conference Center in Downers Grove.

ICEP's hands-on workshops for physicians demonstrate the use of bedside ultrasound to diagnose acute life-threatening conditions, guide invasive procedures, treat emergency medical conditions, and improve the care of emergency department patients.

The program uses live models to cover pelvic, gallbladder, AAA and FAST Exam techniques. State-of-the-art trainers let you practice central line and peripheral IV placement.

ICEP's interactive program offers two options to choose based on your experience:



The Basic course is designed for physicians with limited or minimal experience, seeking both didactic lectures and hands-on practice on ultrasound

techniques.

The Fast Track course is designed for physicians with prior ultrasound experience seeking hands-on practice only. The Fast Track Course does not include didactic lectures but puts participants hands-on at skill stations the entire course to maximize practice.

The full course agenda and registration is available online at ICEP.org. Due to the interactive nature of the program, space is limited. Register early to reserve your space.

ICEP's Ultrasound for Emergency Medicine courses are approved for a maximum of 5.25 AMA PRA Category 1 Credits™.

ICEP Seeking Faculty for Fall Oral Boards

ICEP is still in need of faculty for its Oral Board Review courses on Friday and Saturday, August 22-23 at the Chicago O'Hare Marriott Hotel.

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

Please contact Lora Finucane at loraf@icep.org or 630.495.6400, ext. 219, to sign up or with questions.

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ACEP Poll Finds ED Visits on the Rise Since Jan. 1, Questions Impact of ACA

from Page 1

department expends to transfer psychiatric patients who need admission has increased since January.

The poll follows ACEP's 2014 State-by-State Report Card released in January. Forty percent of emergency physicians polled say their state policymakers are doing a poor job of addressing the issues raised in their state's 2014 Report Card, which looked at the issues of Access to Emergency Care, Quality and Patient Safety, Medical Liability Environment, Public Health and Injury Prevention and Disaster Preparedness.

When asked about the most important policy solution to improve emergency care, the top response (32 percent) was "enacting liability reform."

ACEP supports passage of H.R. 36/S. 961 — the "Health Care Safety Net Enhancement Act of 2013" that would provide liability protections to physicians (emergency and on-call) who perform the services mandated by federal law. That law requires patients be screened, diagnosed and treated, regardless of their insurance status or ability to pay.

When asked about other issues related to the implementation of health care reforms:

- More than two-thirds (69 percent) report challenges with the disposition of patients who require hospital admission but do not meet the Two-Midnight Rule for hospital admission — 25 percent call it a "significant dilemma." (This rule requires patients to be in the hospital for two midnights before Medicare will reimburse for a hospital admission.)

- Just over one-third (35 percent) of emergency physicians report seeing more Medicaid patients, and 27 percent are seeing fewer privately insured patients.
- In regard to long-term impact, 34 percent believe the ACA will have a positive impact on access to emergency care.

Methodology:

Marketing General Incorporated conducted the poll on behalf of ACEP. This survey was conducted online within the United States by Marketing General Incorporated on behalf of the American College of Emergency Physicians between April 4-14, 2014, among 1,845 adults age 18 or older, providing a response rate of 8 percent and a margin of error of 2.3 percent.

View the full results of the poll online at:

<http://newsroom.acep.org/download/ACEP+Polling+Survey+Report.pdf>



Key Note Speaker: Joshua Goldstein, MD, PhD

Department of Emergency Medicine and the Division of Neurocritical Care and Emergency Neurology, Massachusetts General Hospital. Associate Professor of Surgery, Harvard Medical School.

1st Annual Emergency Neurovascular Symposium

SATURDAY, SEPTEMBER 6TH, 2014 | 7:00 AM-3:30 PM

Maggiano's | 240 Oakbrook Center | Oakbrook, Illinois 60523

Target Audience:

Emergency medicine physicians, neurologists, neurosurgeons, nurses, residents and fellows.

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Our Philosophy Aayu Clinics, Lakeview Immediate Care Clinic follows a patient-centric philosophy, which ensures that we deliver care that makes the health and safety of our patients a top priority. We treat each patient like we would want our own loved ones to be treated. We provide evidence-based medicine with a conservative, pragmatic approach and convenient hours .

The Position We place a strong emphasis on practice building. We value your relationship with the patient and the practice is designed to help you build, grow and deepen these relationships. We seek out outstanding providers who share our vision of building the practice. We also believe competence and teamwork are a talent that should be commensurately rewarded.



We are looking for a few outstanding physicians who:

1. Value the patient's welfare above all else. If you have done what is right for the patient, you have done what is right for the practice,
2. Actively engaged in collaborating with practice building, where patients want to return to see them
3. Understand the coding and billing process
4. Enjoy a work-life balance

Compensation Full-time experienced ED physicians can expect \$240,000 - \$300,000 based on productivity. There is a base salary that is determined by the amount of time worked. Following this, we use the work RVU system (wRVU) to estimate productivity. Practice building is closely related to higher productivity and compensation.

Benefits Insurance Health, Dental, Vision, 401K, Life, AD&D coverage for all full time associates. CME for full time providers with a commitment to work with us. PTO is available up to 2 weeks in a calendar year

Contact Please email your resume' to the medical director physicians@aayuclics.com and call 773.609.5520





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OSF Saint Francis Medical Center is the area's only Level 1 Trauma Center and resource hospital for EMS. We are a major teaching affiliate of the University Of Illinois College of Medicine at Peoria. Our state of the art, 60,000 square foot ED opened in 2010.

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Please contact or send CV to:

Stacey E. Morin, OSF Healthcare Physician Recruitment
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the chance to explore
many leadership opportunities.”



“I’m very fortunate that
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and want to be part of.”

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Director of Service & Operational Excellence
San Leandro Hospital

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Illinois College of Emergency Physicians
3000 Woodcreek Drive, Suite 200
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ICEP Calendar *of* Events 2014

July 9, 2014

**Practice Management
Committee Meeting**
10:00 AM - 12:00 PM
ICEP Board Room
Downers Grove

August 12-15, 2014

**Emergency Medicine Board
Review Intensive Course**
ICEP Conference Center
Downers Grove

August 16, 2014

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

August 22-23, 2014

Oral Board Review Courses
Chicago O'Hare Marriott
Chicago

September 1, 2014

ICEP Office Closed
Labor Day Holiday

September 4, 2014

Resident Career Day
Presence Resurrection Medical
Center, Chicago

September 5, 2014

**Ultrasound for Emergency
Medicine Hands-On Workshop**
ICEP Conference Center
Downers Grove

September 8, 2014

**Educational Meetings
Committee Meeting**
11:00 AM - 1:00 PM
ICEP Board Room
Downers Grove

September 16, 2014

**Research Committee
Conference Call**
10:00 AM - 11:30 AM

September 17, 2014

**ITLS Illinois Advisory
Committee Meeting**
10:00 AM - 12:00 PM
ICEP Training Room
Downers Grove

September 23, 2014

**EM Board Review Intensive
Course Committee
Conference Call**
9:30 AM - 10:30 AM

October 3, 2014

**Emergent Procedures
Simulation Skills Lab**
NorthShore University
HealthSystem Evanston
Hospital, Evanston

October 14-17, 2014

**Emergency Medicine Board Re-
view Intensive Course**
ICEP Conference Center
Downers Grove

October 20, 2014

Finance Committee Meeting
9:30 AM - 10:30 AM
ICEP Board Room
Downers Grove

October 20, 2014

Board of Directors Meeting
10:30 AM - 2:30 PM
ICEP Board Room
Downers Grove

November 13, 2014

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

December 3, 2014

**Ultrasound for Emergency
Medicine Hands-On Workshop**
ICEP Conference Center
Downers Grove

Register for all courses online at ICEP.org!

