PRESIDENT’S LETTER

Involvement Benefits College and Career

As I sit down to write this article, there are so many things swirling in my head about the current climate affecting the specialty of emergency medicine.

(One example: how the climate literally affected my ED shift last week, with the unexpected mid-March snow causing an influx of patients needing treatment after slips, falls and MVCs — even though spring is supposedly right around the corner. Mother Nature foils us again...)

Just as unpredictable as the Midwestern almost-spring weather, so too is the practice of emergency medicine, both within a day’s shift and across the larger spectrum of the specialty.

There are so many nuances to our practice: different issues and requirements that keep us on our toes and make us experts at diagnosing medical conditions that other doctors never see.

That’s one of the things that sets us apart: the many different approaches to emergency medicine, and the many ways you can specialize your training. From pediatrics to informatics, EMS to administration, public policy to medical-legal consultation, you have the opportunity to combine your commitment to medicine with other interests and develop a unique career trajectory.

As you focus on what matters to you and look for ways to integrate with your EM practice, do not discount the role ICEP can play. Our multifaceted organization offers numerous avenues for involvement and impact, and we are always seeking the assistance of our members to help us expand our mission and stay relevant during a time of constant change.

ADVOCACY

Every member has an opportunity to participate in our efforts to influence legislative mandates that would impact our practice. No one knows our patient care role and practice limitations better than we do, and you are your own best advocate. Advocacy campaigns are what you make of them: Your commitment can be as simple as an email or as involved as face-to-face meetings with your legislators.

Phone2Action is a new platform ICEP has available as a tool for our members and advocates to very quickly and easily contact legislators. Twitter activity appears to demonstrate the influence of electronic media on our practice, and it is one of the avenues we will be pursuing. But don’t wait for us: If there’s an issue you care about, tweet your legislators to start a dialogue.

This legislative session, ICEP is working to get an amendment passed to a bill that requires mandatory HIV testing of all pregnant women presenting to hospitals and outpatient clinics, including emergency departments. Forward progress is underway on this issue, and we are optimistic that the final result will be emergency medicine physicians exempted from the mandate.

On ICEP Advocacy Day on March 30, some of our members are traveling to Springfield to immerse themselves in the legislative process for an afternoon. After a briefing with our lobbyists, we will head over to the Capitol for visits with legislators and staffers. There is no charge for members to attend ICEP Advocacy Day, and we would love to see more of you representing ICEP on March 30. RSVP online at ICEP.org and join me!

EDUCATION

A cornerstone of the ICEP mission is education. At the recent Board meeting, Board members noted that there are newer statistics demonstrating the influence of electronic media on legislators. Twitter activity appears to be far more influential than emails, and this is another avenue we will be pursuing. But don’t wait for us: If there’s an issue you care about, tweet your legislators to start a dialogue.

Dr. Gary Slutkin to Headline Panel on Gun Violence at 2017 Spring Symposium

Three Members to Be Honored at Spring Symposium with ICEP’s Annual Awards

Perspectives from 2017 ACEP Leadership and Advocacy Conference

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ICEP Board of Directors Elections Open Now Through April 19: Cast Your Ballot

Five active members and one resident member will be elected to the ICEP Board of Directors this spring for the 2017-2018 term. Voting opened online on March 20 and closes on April 19.

Results of the elections will be announced at the Annual Business Meeting that will be held during the Spring Symposium on May 4, 2017 at Northwestern Memorial Hospital in Chicago.

Board of Directors Candidates:
• Amit Arwindekar, MD, MBA, FACEP
• Paul Casey, MD, FACEP
• D. Mark Courtney, MD, FACEP
• Christopher McDowell, MD, MS, FACEP
• Jared D. Novack, MD, FACEP
• Willard W. Sharp, MD, FACEP
• Ernest Wang, MD, FACEP
• Jack S. Wu, MD, FACEP

Resident Member Candidates:
• Mark Baker, MD
• Amanda Friend, MD
• Michael Logan, MD
• Hashim Q. Zaidi, MD

ICEP’s online voting process makes it quick and easy to cast your ballot. Visit http://vote.associationvoting.com/icep to vote now.

All current ICEP members in good standing received an email with instructions for voting. The email contains the link to the voting platform and their personalized login details.

To log in and cast your ballot, you will use your ACEP Member number (beginning with A) and your last name (as recorded by ACEP).

If you did not receive an email with voting instructions, please contact Kate Blackwelder at kateb@icep.org or 630-495-6400, ext. 205, for assistance. Your email server may block the email as spam.

Each candidate has completed a short profile as well as a personal statement in response to the following question: **What do you think is one measure that could positively impact the new Health Care Policy if the current ACA as it is "repealed and replaced", in terms of Emergency Care of Patients?**

The candidate profiles were included with the email you received on March 20 and can also be viewed directly in the voting portal.
Dr. Gary Slutkin to Headline Panel on Gun Violence at Spring Symposium

ICEP’s Spring Symposium and Annual Business Meeting presents a powerful panel discussion that comes straight from the headlines. Join us on May 4 for “Gun Violence in Chicago and Beyond: Continuum of Care.”

The panel will feature keynote presenter Gary Slutkin, MD, founder and CEO of Cure Violence, and will examine alternative perspectives on the continuum of care and discuss actions emergency medicine practitioners can take to address the effects of gun violence. Expert panelists that include Allison Arwady, MPH, MD, Chief Medical Officer for the Chicago Department of Public Health, and LeVon Stone, Sr., Director of CeaseFire Illinois, will present viewpoints from outside the emergency department: surveillance, field response, trauma surgery, crime lab, and prevention.

Register now to attend the Symposium at Northwestern Memorial Hospital on Thursday, May 4. Registration is open online at ICEP.org.

Also on the agenda:

ACEP President Becky Parker, MD, FACEP will highlight key initiatives and projects moving forward at ACEP.

The Resident Speaker Forum will showcase novice speakers from each residency in a lecture competition.

A Statewide Research Showcase will spotlight the best in Illinois emergency medicine research.

The Annual Business Meeting will include the presentation of ICEP’s annual awards and announcement of the Board of Directors election results. (See story on Page 2 for details on how to cast your ballot.)

Vendors will be on-site with the latest products and services for emergency care. Raffle prizes will be given away at the conclusion of the meeting.

Rush Launching Emergency Medicine Residency Program to Start July 1

On July 1, Rush will launch its new, fully accredited emergency medicine residency program, with 12 first-year physicians. When the three-year program is fully staffed, it will include 36 trainees, making it one of the largest residencies at Rush, said Braden Hexom, MD, FACEP, Emergency Management Residency Program Director.

Rush’s emergency management program will be the newest in the country, and is the first new program of its kind in Chicago in the last 20 years. Its training and curriculum will reflect the innovation for which Rush is known.

While it will teach all aspects of emergency medicine, the program offers a unique focus on disaster preparedness and the use of analytics to measure efficiency and outcomes. This model has drawn considerable interest from graduating medical students, with Rush interviewing about 140 candidates to find the 12 who will ultimately make up the first class of residents.

A Solid Foundation for Innovation

Physicians will be trained in diverse settings, including rotations at Rush University Medical Center west of downtown Chicago, where residents will see patients in the state-of-the-art, 40,000-square-foot emergency department that opened as part of Rush’s Tower hospital building in 2012. Residents also will work closely with other hospital departments, such as critical care and pediatrics, to which emergency patients often are admitted.

They’ll be exposed to trauma medicine through a longstanding partnership between Rush University Medical Center and nearby John H. Stroger Hospital of Cook County, and they’ll also spend time at Rush-Copley Medical Center, a community hospital in west suburban Aurora. This is important, Dr. Hexom said, because many EM physicians ultimately will practice in community hospitals, where they’ll see a wider range of medical issues that they’ll be tasked with solving quickly and independently. In March, Rush University Medical Center and Rush-Copley Medical Center completed the process of reorganizing their operations under a common corporate parent led by a board of trustees overseeing a fully integrated Rush academic health system.

The program also includes a special focus on disaster preparedness, one of Rush’s core competencies. Rush is widely recognized as the top academic medical center in the Chicago area for the treatment of infectious disease and biohazard exposure. Officials say Rush University Medical Center is uniquely equipped for infection control and large-scale response to a bioterror attack or deadly pandemic, with an ambulance bay that can be turned into a huge decontamination room, specialized ventilation to isolate the air in rooms or entire wards, and robotic equipment to minimize cross-contamination.

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Three Members to Be Honored at Spring Symposium with ICEP’s Annual Awards

Join your colleagues at the Spring Symposium on Thursday, May 4 to honor three ICEP members for their contributions to the college and emergency medicine.

David Griffen, MD, PhD, FACEP, Liza Pilch, MD, MBA, FACEP, and John Hafner, MD, MPH, FACEP, will be recognized during the Annual Business Meeting at the Symposium. The Symposium is held at Northwestern Memorial Hospital in Chicago.

Bill B. Smiley Award
Dr. Griffen, of Springfield, is the recipient of the Bill B. Smiley Meritorious Service Award, which honors individuals who have made significant contributions to the advancement of emergency medicine in Illinois. The Bill B. Smiley Award is ICEP’s highest honor.

Dr. Griffen is a Past President who served two terms on the ICEP Board of Directors and continues to remain involved as a Councillor and on a wide variety of committees, including Awards/Nominating, Bylaws, Finance, Membership, and Patient and Physician Advocacy.

ICEP Meritorious Service Award
Dr. Pilch, of Chicago, is the recipient of the ICEP Meritorious Service Award, honoring her significant contributions to the advancement of emergency medicine by exemplary service.

Dr. Pilch is a dedicated longtime member of the ICEP Education Committee who has helped to advance many new educational initiatives for the College. She has served as Assistant Course Director for the Oral Board Review Courses for years and has been a key player in helping to debut the eOral program at the 2017 courses. At ICEP’s programs, Dr. Pilch is frequently seen lending a hand wherever it is needed, from assisting at registration to networking with vendors. She also serves on the EMS Committee.

Dr. Pilch is the Medical Director for the Bureau of Emergency Preparedness at the Chicago Department of Public Health. She is also a student advisor for MedEdits Medical Admissions, LLC.

Downstate Member Service Award
Dr. Hafner, of Peoria, is the recipient of the Downstate Member Service Award, which

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ICEP Advocacy Day is Thursday, March 30 in Springfield: Register to Join Us

Join ICEP members, ICEP’s lobbyists, and other guests on Thursday, March 30 in Springfield to meet with state legislators to lobby for emergency medicine issues.

The program will start at 11:00 AM at the Sangamo Club in Springfield, where participants will attend a briefing with lobbyists from Illinois Strategies, LLC., and have lunch at the Club.

After lunch, the group will walk to the state capitol to visit legislators. Members may make appointments with their legislators but should note that many legislators’ offices do not take appointments and prefer drop-in visits.

ICEP Advocacy Day is free for all members, but advance registration is required. Registration is open online now at ICEP.org.

Participants outside of Springfield may wish to take Amtrak for convenience. The Amtrak station is within walking distance of the Sangamo Club.
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Leadership Scholarship Recipients Offer Their Perspectives on ACEP LAC in D.C.

ICEP would like to congratulate the three recipients of the 2017 ICEP Leadership Scholarship program:

- Racheal Gilmer, MD, PGY-2, University of Chicago
- Alejandro Palma, MD, PGY-4, University of Chicago
- John Purakal, MD, MSc, PGY-3, University of Illinois at Chicago

As part of the scholarship requirements, Drs. Gilmer, Palma, and Purakal traveled to Washington, D.C., last week to attend ACEP’s Leadership and Advocacy Conference, where they had the opportunity to network, hear new perspectives on leadership, and meet with legislators to advocate for emergency medicine issues. Here are their experiences in their own words:

*From Racheal Gilmer, MD:*
As an emergency medicine resident, you spend much of your time learning the medical aspect of what we do. I have spent hours recounting different drug dosages, memorizing steps to various procedures, and learning to recognize sick versus not sick. These are all key skills to creating a good emergency medicine physician. However, with heated political discussions occurring around me, I realized I may be doing right by my patients during my shifts but am I really supporting them outside of my clinical hours? I found myself unable to answer the increasingly predictable questions from my friends and family: What do you think about the changes in our health care system? How will the proposed changes affect your day-to-day work? How will this new bill affect your patients? Despite serving my patients as best I could by studying on the weekends, listening to podcasts, and taking practice tests, I was ignorant to some of the biggest pieces of medicine that would affect many, if not all, of my future patients.

I was thrilled to be awarded the ICEP Leadership Scholars position, as I knew this would not only give me the knowledge needed to field the inevitable questions from friends and family but also the skills needed to advocate for my patients amongst leaders and politicians. As a scholar, I attended the Leadership and Advocacy Conference in Washington, DC, this March and found myself surrounded by many residents with the same eagerness to learn. I met residents across the spectrum: some who knew the proposed bill inside and out; others, like me, who needed a crash course in how a bill was made. All residents and practicing physicians were equally inviting and friendly. I was surprised how much of the conference was geared toward residents, with a strong focus on engaging residents from the very beginning. Between small group breakout sessions, lobbying with your individual state, and early-morning round tables, it is impossible to feel like a passive learner.

This was a life-changing conference that I cannot wait to attend again next year. I will use the lessons learned in the coming days not only to educate those around me, but also to protect and support those who cannot do the same for themselves — my patients.

*From Alejandro Palma, MD:*
The ACEP Leadership and Advocacy Conference (LAC) is an opportunity all emergency medicine physicians should have at least once in their career. I particularly recommend it to residents, as having the experience early on in your career will color the way you view your role as a physician. I first attended LAC in 2016. One of the things that struck me was how eager the legislators’ staffers were in hearing our concerns through our patient encounters. As a resident, I was able to provide insight and nuance to policy makers that to me initially seemed like common knowledge. I felt empowered, but at the same time terrified. There is a very important and necessary role for physicians in our government that as clinicians we may underappreciate.

LAC this year was no different in its impact. Dr. Parker led the Illinois congregation last year
Discount Available for April 5-6 Oral Board Review Courses: Join Us at ABEM Exam Site

Are you preparing for your Oral Boards? ICEP’s top-rated course gives you more bang for your buck with more cases in less time. That’s maximum preparation, only from ICEP.

For a limited time, ICEP is offering a March Madness promo on April 5-6 course registration: Save $100 off any 6-Hour Course option or $150 off any 10-Hour Course option with discount code MARCHMADNESS. This is the first time ICEP has offered a discount on our popular Oral Board course!

Better than ever in 2017, ICEP is proud to be the leading program offering practice and preparation on the eOral system used by ABEM for the board exam. Build confidence and skills on the interactive digital interface that includes:

- Dynamic vital signs and rhythm strip
- Digital images, animations and videos
- Test ordering and review

Every participant at ICEP’s courses will experience two single-case encounters on the eOral system. Preview the program with a sample case online at ICEP.org/oralboard.

Registration is open now for both spring and fall courses: April 5-6, 2017 or September 15-16, 2017. Courses are held at the Chicago O’Hare Marriott, the ABEM Oral Board Exam Site — an advantage other courses can’t offer.

ICEP’s courses offer one-on-one case simulation with experienced faculty who provide immediate, personalized feedback on your performance.

There are two different course options available: the Core Review Plus 10-Hour Course and the Core Review 6-Hour Course. Both course options include six single-case and two multiple-case encounters one-on-one. No duplicate cases are presented, so you can choose one or both programs depending on the level of review you are interested in.

The eOral software at ICEP’s Oral Board Review Courses is identical to the program used by ABEM. Participants use the interface to review and order tests as well as view dynamic vital signs, rhythm strip, digital images and more.

For more information about the course options or to register, visit ICEP.org/oralboard. If you are feeling overwhelmed with the options, ICEP can help! Call us at 630-495-6400 for a customized course experience that gives you the practice and preparation you need.

Leadership Scholarship Recipients Offer Their Perspectives on ACEP LAC in D.C.

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and this year led the conference as the ACEP president. Meeting people like Dr. Parker and several other leaders from both academic and community emergency medicine that are willing to provide mentorship and to help form connections is both inspiring and formative.

The conference begins with a health policy primer. It assumes you know nothing about the current state of health care legislation or even how legislation is formed, which is helpful for first-time attendees. It then progresses to hot-button topics varying from opiate management to balance billing. We heard from legislators on both sides of the aisle, such as Democratic Sen. Tim Kaine and Republican Rep. Brett Guthrie providing their perspective on current health care reform. Guest speaker “ZDogMD” this year gave his own perspective on health care through his rap performances. The conference ended with a leadership day with topics including social media, implicit bias and leading through crisis.

Attending LAC was a career-defining moment for me last year and I am grateful for the ICEP Leadership Scholarship program for providing me the opportunity to build on that by attending again this year. I look forward to meeting future ACEP leadership scholars in subsequent years as I transition to becoming an academic attending at the University of Chicago and begin to provide the mentorship that was as invaluable to me as a resident.

From John Purakal, MD, MSc:

ACEP’s Leadership and Advocacy Conference (LAC) was an incredible experience! As a first-time attendee, I was impressed by the number of participants at the conference, the wide breadth of topics covered, and the planned Capitol Hill visits. It was inspiring to see my colleagues fight for what they think is right for their patients, regardless of political affiliations. Dr. Rebecca Parker provided great leadership in the months of political changes regarding health care leading up to this conference, and throughout the conference itself. When inclement weather nearly cancelled our trips to Capitol Hill to meet with senators and representatives to voice our concerns, it was amazing to see the number of physicians who took it upon themselves to find ways to still make it to their meetings. Conversations like the ones had this week are the launching point to meaningful change, and it will take a concerted effort amongst all sub-specialties of medicine to unify their voice and stand up for what is just for both our patients and ourselves as caregivers. I am so grateful to ICEP for the 2017 ICEP Leadership Scholarship which allowed me to take part in the LAC and strengthen my commitment to health policy and patient advocacy.
Tips and Pitfalls in Emergency Medicine Research:
The Anatomy of a Meeting Abstract

By Mark B. Myceyk, MD, FACEP
ICEMP Research Committee Member

“Tips and Pitfalls in Emergency Medicine Research” is a new series authored by ICEP Research Committee members.

So you finished your project and you’re wondering if it’s worth submitting your preliminary findings in an abstract to a meeting like the ACEP Scientific Assembly, the SAEM Annual Meeting, or the ICEP Spring Symposium. The answer should be YES!

There are many benefits to submitting an abstract to a regional or national meeting. First, and most importantly, presenting your study at a meeting allows you to get feedback from peers outside your home institution where it will be seen with fresh eyes. If you want your study published in a journal, your chances are significantly better if you incorporate constructive comments from a meeting into your manuscript.

Second, a meeting abstract provides you an opportunity to network and collaborate with other scholars working on similar issues. Your single-center study this year can easily become a multi-center trial at the end of a poster session.

Third, getting an abstract accepted to a meeting gives you an excellent excuse to travel (usually somewhere fun) for a good reason (and often on the department’s budget).

Writing an abstract gets easier every time you do it. Here are a few tips.

1. Plan ahead. Give yourself plenty of time to write and re-write the abstract. Don’t do it at the last minute. You should instead plan on having your abstract done at least one week before the submission deadline to allow all co-authors to review and edit it. And don’t try to upload it on the deadline day, as the meeting web server can be overwhelmed and slowed down by other last-minute submissions.

2. Know the scoring system. Review the scoring criteria for the meeting (if available) so you know how your abstract will be graded. For example, SAEM publishes its abstract scorecard online so all submitters know how evaluation will be done. Abstract reviewers sometimes need to judge 40-60 abstracts at once — their time and attention are limited, so you want to make sure their eyes notice all score-able items easily.

3. Keep your Objective short. Most meetings have tight character or word count limits for their abstracts. Since most points can be scored in the Methods and Results, it is acceptable to make your Objective a simple sentence to save precious characters for other areas. You can expand your background and objective in your final manuscript.

4. Don’t skimp in the Methods. This is the most important part of the abstract where reviewers determine if your approach was robust. Identify the design, inclusion criteria, and analytic strategies. Even if your study results are not exciting, a well-developed Methods section can get an abstract scored high enough to be accepted to a meeting. The SAEM scorecard provides terrific guidance on what details are important to highlight and what language to use in this section so you can wow abstract graders.

5. Focus on key Results. Remember, an abstract is not a full manuscript, but a brief report of your work — reviewers want to know if you should be invited to the meeting to discuss your whole project. So focus on key findings that will excite reviewers, use a consistent format in how your report your results, and make the semi-colon (:) your friend in this section to keep your character count low. The semi-colon is equivalent to the word “and” but only uses 1/3 of the characters.

6. Conclude with confidence. Junior abstract writers spend too much of their character count in this section. It is best to have a clear final message for reviewers, state it confidently, and keep this section short just like the Objective section. Do not over-speculate, do not tell reviewers why they should not accept your abstract, and make sure the language in your Conclusion is consistent with your Objective.

Abstract writing is not creative writing. It is important to state the facts succinctly and precisely. It is challenging getting your message into the limited character count for some meetings, so think about your main message and make sure it is crystal clear from start to finish. Before I start my first draft, I find it helpful to look at last year’s published abstracts for inspiration. Writing an abstract gets easier every single time; that’s why you’ll notice some seasoned investigators have abstracts accepted to every meeting they submit. Good luck! I look forward to seeing your work at the next meeting.

Members to Be Honored at Spring Symposium

from Page 4

recognizes an ICEP member from outside the metropolitan Chicago area who has made a consistent effort to advance emergency medicine in Illinois despite lengthy travel.

Dr. Hafner is the immediate past president of ICEP, whose second term on the Board is concluding in May. As a Board member, he made the drive from Peoria to the ICEP office whenever it was needed, no matter how short or long the meeting would be. Dr. Hafner continues to stay active, serving as a Councillor and sitting on the Awards/Nominating, Bylaws, Finance, Membership, and Research Committees, as well as the Board Liaison for the ITLS Illinois Advisory Committee. Dr. Hafner is a repeat presenter at the Emergency Medicine Update conference in Peoria, for which he previously served as Course Directors for several years. He also served as faculty of the EM Board Review Intensive course and on the course committee for many years.

Dr. Hafner is the Residency Director and a Clinical Associate Professor of Emergency Medicine at the University of Illinois College of Medicine at Peoria. He is also an attending physician at OSF Saint Francis Medical Center.

The Awards Presentation will take place during the Annual Business Meeting, which will be held from 12:30 to 1:00 pm on Thursday, May 4 at Northwestern Memorial Hospital. Register to attend the Spring Symposium & Annual Business Meeting online at ICEP.org.
Family life. Amazing EM career.
You can have both.

US Acute Care Solutions values family, and the diverse ways families are born. As physician owners, we are one family, united in our mission to care for patients and each other. When a clinician in our group decides to have a child by birth or adoption, the rest of us rally around to ensure they receive the time they need to pursue their dream of family, and the support they need to continue excelling in their careers as physicians and leaders. At USACS, we're living life to the fullest, together.
Involvement Benefits College and Career

from Page 1

posium, Emergent Procedures Simulation Skills Lab, and Ultrasound for fresh topics and a lot of hands-on practice.

Our course registrations are sometimes limited by the number of faculty signed up to teach, as is frequently the case with our very popular Oral Board Review Courses. If you’ve taken your Boards, consider serving as a mock examiner at this course. We always welcome new faculty, and the unique course format is truly something to experience in action.

The Education Committee is at work on the launch of the ICEP Podcast, coming later this year. We are excited to move into this new arena of education as a way to reach more members and spread the word about all that ICEP offers. If you want to be involved, we welcome your input. Residents are encouraged to submit podcasts to the competition at the Spring Symposium. Guidelines are online at ICEP.org and submissions are due April 3.

The ICEP Board and Education Committee are also investigating adding some CME offerings to the ICEP website as a member benefit, specifically adequate CME hours to satisfy the mandatory pediatric, trauma, and stroke topic hours required by our hospitals for reappointment. Would you take advantage of this? Let us know your thoughts.

COMMUNICATION

Also discussed at the Board meeting was innovation in how we communicate with our members and stakeholders, as well as with governing bodies that affect us.

Social media offers real-time communication and sparks conversations and debate with often very useful outcomes. Certainly, a large proportion of recent graduates rely heavily on Twitter, Facebook, and other social media channels for communication, as well as education and advocacy efforts. As I mentioned, even legislators are taking more notice of Twitter activity versus traditional communication.

It’s time to expand and innovate to reach a greater number of influencers, both in the emergency medicine community and outside it. There is a potential for the creation of a new community within our chapter, focused on information technology to increase and improve our reach on advocacy, education, and communications.

But to make a meaningful change, we rely on our members and their expertise. We welcome your input and advice. You can contact me directly, or you can review the list of committee members on the ICEP website and start a conversation with any of them as well. Collaboration is the key, and I look forward to continuing to collaborate even when my term as president comes to an end in May.

— Valerie J. Phillips, MD, FACEP
ICEP President

Rush Launching Emergency Medicine Residency Program to Start July 1

from Page 3

The residents also will take part in disaster planning. Rush University Medical Center regularly leads or partners with the City of Chicago and other organizations on drills and preparation for large-scale events. This will be an invaluable opportunity for physicians to see the full scope of how their work can have an impact, Dr. Hexom said.

“Our objective is to train outstanding clinicians who are prepared to handle any EM environment and to equip them with the skills to be efficient, capable and compassionate emergency physicians,” he said.

Measuring Their Progress

Another major focus of the program will be on self and peer assessment. From the first month, residents will be integrated into the department’s quality improvement process. Through continual peer review of cases and performance evaluation, residents will acquire additional skills that will prove invaluable as they enter an increasingly measurement-driven clinical environment. Rush residents will amass data on visit count, procedure count and turnaround times in an effort to improve efficiency and patient outcomes. This information helps all physicians — residents and attendings — to refine the way they practice and hone their problem-solving skills. Residents will be able to show future organizations their progress, and to demonstrate the ability to use objective information to make decisions on what is not always an exact science.

Because emergency care is shifting dramatically along with health care as a whole, knowing how to collect and analyze this information is critical to delivering the best care. This data also is incorporated into national quality and patient satisfaction numbers that affect payment both for health systems and individual physicians.

Right Time for Rush

With the addition of the EM residency, Rush now trains physicians in all major disciplines, with about 700 residents across 25 specialties.

Adding an emergency medicine residency program long has been part of the department’s plan, said Dino Rumoro, DO, FACEP, chair of the Department of Emergency Medicine and the president of the medical staff at Rush University Medical Center. The department has experienced tremendous growth over the past decade, and with more than 72,000 patients a year, has the volume to support such a program, he said. It also reflects the Rush system’s mission to improve the health of the individuals and diverse communities Rush serves through the integration of outstanding patient care, education, research and community partnerships.

“This program really touches on all parts of our mission,” Rumoro says. “Training the next generation of providers is one of our greatest responsibilities, and we’re privileged to launch this program as another way to do that.”
Emergent Procedures Sim Lab Spaces Open for April

ICEP’s top-rated Emergent Procedures Simulation Skills Lab courses at the Grainger Center for Simulation and Innovation in Evanston are scheduled for April 21 and October 6, 2017. Registration is open online at ICEP.org/sim.

Sharpen your skills for high-risk procedures with a full day of hands-on practice on 20+ critical-care procedures. Expert faculty, the convenient 1-day format, and a state-of-the-art facility at Evanston Hospital set ICEP’s course apart from the rest.

Participants work hands-on with the most current simulation technologies, rotating in small groups through numerous procedure stations that are organized into four modules: Airway, Cardiovascular, Pediatric/Obstetric, and Ultrasound.

The faculty-to-participant ratio is small to ensure that participants get the personalized instruction and practice time they need to feel confident performing the critical-care procedures that are seldom performed day-to-day in the emergency department because their clinical presentation is rare.

Dr. Ernie Wang (left), Emergent Procedures Simulations Skills Lab co-creator and former course director, demonstrates proper technique while participants practice hands-on.

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Comment Period Open for ACEP Clinical Policy for Reperfusion Therapy for STEMI

The Clinical Policies Committee of ACEP has completed a draft “Clinical Policy: Emergency Department Management of Patients Needing Reperfusion Therapy for an ST-Elevation Acute Myocardial Infarction.”

The draft is now open for comments until April 13, 2017.

To view the draft policy and comment form, go to: www.acep.org/clinical—practice-management/Clinical-Policy-Comment-Form—Reperfusion-Therapy—for-STEMI/

For questions, please contact ACEP Clinical Practice Manager Rhonda Whitson, RHIA, at rwhitson@acep.org.
Last Call to Attend EMS Summit in Springfield

Last call to register to attend the Illinois EMS Summit presented by the Illinois EMS Alliance.

ICEP is proud to be a member of the Illinois EMS Alliance.

The 1-day summit will be held Thursday, April 6, 2017, from 8:30 a.m. to 4:30 p.m. at the Memorial Center for Learning and Innovation in Springfield.

The cost of the program is $15 and CEUs will be available to registrants. A link to register and the full course brochure is available at ICEP.org.

A group rate for overnight accommodations has been arranged at the Carpenter Street Hotel in Springfield. Call 217-789-9100 for reservations.

For more information about the 2017 EMS Summit, contact Dennis Presley at 618-453-3314.

Mission: Lifeline Program Seeks Applications for EMS Recognition

Mission: Lifeline® is excited to offer a recognition program designed to showcase Emergency Medical Service organizations across the nation for excellent STEMI care. In 2016, 21 agencies in Illinois were recognized.

Application to apply for recognition is open until March 31, 2017. Mission: Lifeline Director Art Miller, RN/EMT-P encourages organizations to apply as early as possible so he can better track and anticipate Illinois’ participation.

To learn more about the requirements for EMS recognition and download the applications, browse the AHA program tools online at: http://www.heart.org/HEARTORG/Profesional/MissionLifelineHomePage/Mission-Lifeline-EMS-Recognition_UCM_308047_Article.jsp#WH-rsfKQzGj

ICEP Calendar of Events 2017

- **March 30, 2017**
  - ICEP Advocacy Day
  - Sangamo Club & Capitol
  - Springfield

- **April 4, 2017**
  - Research Conference Call
  - 10:00 AM - 11:00 AM

- **April 5-6, 2017**
  - Oral Board Review Courses
  - Chicago O’Hare Marriott Suites
  - Chicago

- **April 19, 2017**
  - ICEP Board of Directors Voting Closes

- **April 21, 2017**
  - Emergent Procedures Simulation Skills Lab
  - Grainger Center for Simulation and Innovation
  - Evanston

- **April 26, 2017**
  - ITLS Illinois Advisory Committee Meeting
  - 10:00 AM - 12:00 PM
  - ICEP Conference Center
  - Downers Grove

- **April 27 - May 1, 2017**
  - Mock Orals Private Tutorials
  - Chicago O’Hare Marriott Suites

- **May 4, 2017**
  - Spring Symposium & Annual Business Meeting
  - Northwestern Memorial Hospital, Chicago

- **May 4, 2017**
  - Board of Directors Meeting
  - 1:00 PM - 1:30 PM
  - Northwestern Memorial Hospital, Chicago

- **May 23, 2017**
  - EM4LIFE 2016 LLSA Article Review Course
  - ICEP Conference Center
  - Downers Grove

- **May 29, 2017**
  - Memorial Day Holiday
  - ICEP Office Closed

- **May 30, 2017**
  - EMS Committee Meeting
  - 11:00 AM - 1:00 PM
  - ICEP Board Room
  - Downers Grove

- **May 30, 2017**
  - EMS Forum
  - 1:00 PM - 3:00 PM
  - ICEP Conference Center
  - Downers Grove

- **June 5, 2017**
  - Finance Committee Meeting
  - 9:30 AM - 10:30 AM
  - ICEP Board Room
  - Downers Grove

- **June 5, 2017**
  - Board of Directors Meeting
  - 10:30 AM - 2:30 PM
  - ICEP Board Room
  - Downers Grove

- **July 4, 2017**
  - Independence Day Holiday
  - ICEP Office Closed

- **August 15-18, 2017**
  - Emergency Medicine Board Review Intensive Course
  - ICEP Conference Center
  - Downers Grove

- **August 31, 2017**
  - Resident Career Day
  - Northwestern Memorial Hospital, Chicago

- **September 4, 2017**
  - Labor Day Holiday
  - ICEP Office Closed

Register for all courses online at ICEP.org!