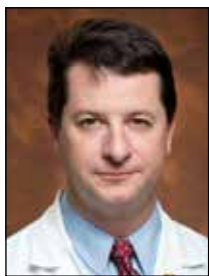


PRESIDENT'S LETTER

FOLD Mental Health Reporting System In Need of Clarification



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

I recently received an email from the Department of Human Services (DHS) outlining required participation for physicians in the Firearm Owners Identification card (FOID) reporting system. I didn't pay this any attention at all, as I mistakenly thought it

only applied to those applying for a concealed carry permit.

Boy, was I wrong. The idea is that we as physicians come into contact with individuals who should not have a firearm, as outlined below. By reporting these individuals to the FOID registry, they will be flagged if they were to apply for the card necessary to legally own a gun. Physicians and other health care providers would essentially be assisting in building the database for the state.

Here are the details of the plan as taken from the Illinois DHS website:

"On July 9th 2013, Illinois passed HB 183 (Public Act 098-0063), also known as the

Firearm Concealed Carry Act. The Firearm Concealed Carry Act expands the reporting requirements for health care facilities and clinicians to include any person that is: adjudicated mentally disabled person; voluntarily admitted to a psychiatric unit; determined to be a 'clear and present danger'; and/or determined to be 'developmentally disabled/intellectually disabled'."

Here are some explanations from the website of what this means in practice:

1. Who reports?

"Physician, Psychiatrist, Clinical Psychologist, Clinical Social Worker, Registered Nurse, Clinical Professional Counselor, and Marriage & Family Therapist."

2. What defines "Clear and Present Danger"?

A person who:

- "Communicates a serious threat of physical violence against a reasonably identifiable victim or poses a clear and imminent risk of serious physical injury to himself, herself, or another person as determined by a physician, clinical psychologist, or qualified examiner."
- "Demonstrates threatening physical or verbal behavior, such as violent, suicidal, or assaultive threats, actions, or other

behavior, as determined by a physician, clinical psychologist, qualified examiner, school administrator, or law enforcement official."

3. What defines "Developmentally Disabled"?

"A disability which is attributable to any other condition which results in impairment similar to that caused by an intellectual disability and which requires services similar to those required by intellectually disabled persons. The disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap."

4. What defines "Intellectually Disabled"?

"Significantly sub-average general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years."

Emergency physicians are very comfortable with admitting patients who pose harm to themselves or others for psychiatric care. I would agree that this patient population should not have access to firearms, and these patients are pretty easy to identify.

The law states that a report must be made within seven days of admission. Many hospitals

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FOID Mental Health Reporting System In Need of Clarification

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with inpatient psychiatric facilities will batch the patient information and make one report per week. I will be making this suggestion to my hospital ASAP in the hope that the inpatient psychiatric ward will have the time and resources to do this rather than adding one more task to the emergency department.

I do not think it will be as easy to determine the developmentally or intellectually disabled to the degree that reporting is required. In the emergency department, we frequently serve a patient population that makes really bad choices. One of my mentors used to say (frequently) that "if it weren't for stupid people, I wouldn't have a job."

Depending on how the individual physician interprets the criteria for developmental or intellectual delay, you might find yourself reporting a large portion of your patients. I can think of a few shifts where many patients would have qualified.

For discharged patients falling into this category, we have 24 hours to make a report. This

is going to be difficult, but if it only applies to the strict definition of intellectually or developmentally disabled, the numbers will be small. Sadly, I think that this is to be one more cut to add to the thousands we endure daily. Perhaps there will be a way to check a box within the electronic medical record to auto-populate a notification to the proper authorities.

ICEP has been reaching out to lawmakers at the state and federal level for clarification (See story on Page 2 for more information. We have also asked for an exception for clinicians providing care in a hospital emergency department. I hope that in time we will have good news to report. In the mean time, please review the information on the FOID website as it does apply our delivery of care.



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

Find Out More: FOID Mental Health Reporting System

ICEP Comments to DHS: www.icep.org/foidcomment

DHS Site: www.dhs.state.il.us/page.aspx?item=37393

Includes information on:

- Direct link to the reporting system
- Accessing the FOID Reporting System
- FOID Reporting FAQ
- More Information on FOID Reporting

Last Call for Research for 2014 Spring Symposium: Due March 7

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 Thursday, May 1 at Northwestern Memorial Hospital.

The deadline to submit abstracts is Friday, March 7. The Research Committee will make selections and notify applicants by the end of March. All submitted abstracts are published in the Statewide Research Showcase eBook that is distributed with other meeting materials at the Spring Symposium.

All abstracts must be submitted electronically to Lora Finucane at 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.



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STEMI-Stroke Seminar to Be Presented April 9

Are you comfortable using tPA for the treatment of stroke in the emergency department?

With a new comment period opened for ACEP's Clinical Policy on the topic (see story at right) — the first time a second comment period has ever been allowed — tPA usage is a hot topic in emergency medicine.

ICEP's STEMI-Stroke Seminar addresses the controversy and provides guidance about tPA usage, as well as other current topics on the treatment of STEMI and stroke patients in the ED.

The STEMI-Stroke Seminar will be presented Wednesday, April 9 at the ICEP Conference Center in Downers Grove. Registration is open online now at ICEP.org/2014STEMIstroke.

The seminar helps emergency physicians meet Joint Commission requirements for specialized STEMI and stroke continuing education hours. Registrants may attend the full-day program for 4 hours of STEMI topics and 4 hours of stroke



topics, or may opt for a half-day morning or afternoon to focus on just one of these in-depth topics.

The program will cover the same content that was presented at the inaugural course last fall. The agenda includes:

- Care of the NSTEMI Patient
- Chest Pain Patient – Rapid Rule Out
- Care of the STEMI Patient
- EMS Triage
- tPa 0-3 Hour and 3-4.5 Hour Window
- Advanced Neuroimaging in Acute Ischemic Stroke
- Interventional Strategies
- Transfer Protocols, Optimal Hospital Protocols, and Stroke Centers

View the course brochure online at ICEP.org.

ACEP IV tPA Clinical Policy Open Again for Comment

In response to the 2013 Council and ACEP Board-adopted Amended Resolution 32(13), the Clinical Policy: Use of Intravenous tPA for the Management of Acute Ischemic Stroke in the Emergency Department, published in 2013 in *Annals of Emergency Medicine*, is being posted for a 60-day additional ACEP membership comment period.

Comments received along with supporting evidence and any new evidence will be carefully reviewed and the evidence graded. References should accompany comments so that the evidence can be carefully considered and graded. Findings will be reported to the ACEP Board.

Comments must be submitted by March 24, 2014.

View the policy and comment form: www.acep.org/commentform/IVtPA-Stroke

Note that future clinical policy developments will include a 60-day comment period before finalization.

ICEP Expresses Concerns About FOID Mental Health Reporting Mandated by Concealed Carry Legislation In Illinois

ICEP is working on efforts to persuade the Illinois Department of Human Services that the rules implementing the Illinois FOID Mental Health Reporting System should be amended.

ICEP is concerned about the rule's overreach and chilling effect on patients seeking emergency care. Many members have contacted to ICEP to express their own concerns. ICEP submitted comments to the Department expressing these

concerns. The Illinois State Medical Society is also submitting comments.

The new system was expanded as part of the Illinois Concealed Carry legislation, Public Act 98-063, that went into effect on January 1. Under the provisions of the new law, health care providers, including emergency physicians, are required to report patients who they believe pose a clear and present danger to themselves or others.

Previously, there were approximately 100 inpatient settings required to report to the Illinois FOID Mental Health Reporting System. The new legislation expands reporting to include all inpatient settings, all outpatient settings and tens of thousands of licensed health care professionals.

ICEP will continue to update our membership about developments on this issue.

2014 Spring Symposium Set for May 1; Program Examines Affordable Care Act

ICEP's 2014 Spring Symposium & Annual Business Meeting will focus on national and local perspectives on the impact of the Affordable Care Act on the practice of emergency medicine.

Don't miss the insights provided by presenters that include ACEP President-Elect Michael Gerardi, MD, FAAP, FACEP; Derek Robinson, MD, MBA, FACEP, of the Illinois Hospital Association; Thomas Fisher, MD, of the University of Chicago; William McDade, MD, PhD, president-elect of the Illinois State Medical Society; and Michael Gelder, senior health care policy advisor for Governor Pat Quinn's office.

The 2014 Spring Symposium will be held Thursday, May 1, 2014 at Northwestern Memorial Hospital's Feinberg Pavilion. Registration is open online now at ICEP.org/spring.

Dr. Gerardi will analyze the impact of the Affordable Care Act on the practice of emergency medicine from a national perspective, including a discussion of current legislation and lobbying efforts.



Later, a panel of Illinois medicine experts will will examine the current landscape of health care in Illinois in relation to the Affordable Care Act. Panelists are Dr. Robinson, Dr. Fisher, Dr. McDade, and Mr. Gelder.

The Spring Symposium will also include the annual Statewide Research Showcase that spotlights the best in Illinois emergency medicine research. Oral presentations will be given during a morning session, and research posters will be on display in

the exhibit area. (See story on Page 2 for details on submitting an abstract. Deadline is Friday, March 7.)

At the Annual Business Meeting that concludes the Symposium, three ICEP leaders will be honored for their contributions to the College. Cai Glushak, MD, FACEP, will receive the Bill B. Smiley Award, ICEP's highest honor. Carolyn Zonia, DO, FACEP, FACOEP will receive the ICEP Meritorious Service Award. Walter Bradley, MD, MBA, FACEP will receive the Downstate Member Service Award. Profiles of the award recipients will be published in the next issue of the EPIC.

The Annual Business Meeting also includes an update on ACEP and ICEP activities, and announcement of the newly elected members of ICEP's Board of Directors.

Register now to join your colleagues for ICEP's premier member event. The cost is \$105 for ICEP member physicians, \$135 for non-member physicians, and \$25 for residents. There is no charge for medical students to attend. The Spring Symposium provides a maximum of 3 *AMA PRA Category 1 Credits*TM.

Board of Directors Elections Open March 17

The ICEP ballot to elect Board of Directors members will open online March 17 and close April 16. ICEP's members will elect four Board members to serve three-year terms. One resident member will also be elected to a one-year term on the Board by the College's candidate members.

Candidates standing for elections are:

Active Members

- D. Mark Courtney, MD, FACEP
- Mila Felder, MD, FACEP (incumbent)
- John Graneto, DO, FAAP, FACEP
- Henry Pitzele, MD, FACEP
- Yanina Purim-Shem-Tov, MD, MS, FACEP
- Ernest Wang, MD, FACEP

Resident Members

- Eashwar Chandrasekaran, MD
- Archit Gulati, MD
- Rocky Samuel, MD, MBA
- Rukmini Velamati, MD

Members will receive an email the morning of March 17 with instructions for voting and a link to the voting platform. To log in to cast their ballot, they will use their ACEP Member number (beginning with A) and their last name (as registered with ACEP). If you do not receive an email with voting instructions by March 17, please contact Kate Blackwelder for assistance. Your email server may block the email as spam. You may also request a paper ballot by contacting Kate Blackwelder.

Once you have logged into the voting platform,

you will be able to view the slate of candidates, including their profiles, personal statements, and photos, to evaluate the candidates before submitting your vote. The voting platform will allow you to submit your vote only one time. After you have voted, you may log in again but you will receive a message that your vote has already been received.

Election results will be announced at the Spring Symposium's Annual Business Meeting on Thursday, May 1.

If you have trouble logging in to vote, contact Kate Blackwelder for assistance during regular business hours of 8:30 AM - 4:30 PM Monday through Friday. (You may vote online at any time, but assistance is only available during ICEP business hours.)



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Dr. Paul Kivela to Present Keynote Address at '14 Resident Career Day

ICEP will welcome ACEP Secretary-Treasurer Paul Kivela, MD, MBA, FACEP as the keynote speaker at 2014 Resident Career Day.

Resident Career Day will be held Thursday, September 4 at Presence Resurrection Medical Center's Marian Hall Conference Center in Chicago. There is no charge for ICEP members, residents or med students to attend the program.

Mark your calendar and plan now to attend. Dr. Kivela will present "What I Didn't Learn in Residency" and will participate in a panel discussion about managing student debt.

Also on the 2014 agenda are building your brand using social media presented by Ernie Wang, MD, FACEP, and a panel discussion on global health opportunities.

Resident Career Day will also feature its popular Speed Dating Career Fair, where participants network with top recruiters to find out more about opportunities and open positions.

Registration and the full course brochure will be available this spring. Visit ICEP.org/residentcareer for more information.

ICEP's 2014 EM Update Draws a Crowd in Peoria

ICEP's Emergency Medicine Update drew nearly 100 participants to the new Jump Trading Simulation and Education Center in Peoria on February 20. The program was well received by the physicians, residents, medical students, nurses, and EMS personnel in attendance.

Presenters included Derek Robinson, MD, MBA, FACEP; Gene Couri, MD, FAAP, FACEP; Teresa Morrell Riech, MD, MPH; Edward Ward, MD, MPH, FACEP; Myto Duong, MD; John Hafner, MD, MPH, FACEP; Rose Haisler, DO, FACEP; and Sara Krzyzaniak, MD.

ICEP thanks its exhibitors and sponsors for their support, including the program's gold sponsor, Emergency Physician Staffing Solutions, and exhibitors Advocate Medical Group, EmCare, Infinity Healthcare, MedaPhor Ltd., OSF HealthCare, Ruffatti Ophthalmic Instruments, and TeamHealth.



ABOVE: Dr. John Hafner examines advances in cardiac resuscitation.

BELOW LEFT: Dr. Teresa Morrell Riech speaks to a full house at the new Jump Trading Simulation and Education Center as she explores pediatric dermatological emergencies.

BELOW RIGHT: Dr. Derek Robinson discusses drivers of health care transformation, outlining opportunities for emergency care providers.



ICEP Seeking Oral Board Faculty for 2014 Courses

ICEP is still in need of faculty for its popular Oral Board Review courses. 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 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.

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

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



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ICEP Calendar *of* Events 2014

March 14-15, 2014

Oral Board Review Courses
Chicago O'Hare Marriott
Chicago

March 17, 2014

**ICEP Board of Directors Election
Ballots Open Online**

March 18, 2014

**ICEP EM Board Review
Intensive Course Committee
Conference Call**
9:00 AM - 10:00 AM

March 25, 2014

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

April 7, 2014

**ICEP Practice Management
Committee**
1:30 PM - 3:30 PM
ICEP Board Room
Downers Grove

April 9, 2014

The STEMI-Stroke Seminar
ICEP Conference Center
Downers Grove

April 16, 2014

**Last Day to Submit Ballot
Online for ICEP Board of
Directors Election**

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

May 26, 2014

ICEP Office Closed
Memorial Day Holiday

June 2, 2014

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

June 2, 2014

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

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

