

## PRESIDENT'S LETTER

# Out With the Old, In With the New in 2018

## ICEP Priorities Include Prudent Layperson Standard, Opioid Epidemic



**Yanina A. Purim-Shem-Tov, MD, MS, FACEP**

In our first issue of 2018, I would like to start by wishing you a very happy new year! May this be a year of happiness, love, joy and prosperity for you and your families.

2017 was an eventful year for physicians, including those in emergency medicine.

We have seen our colleagues step up to the plate and be heroes of disaster care in several states afflicted by floods, hurricanes and fires. These providers left their own families at home to stay days and sometimes weeks at a time in the hospitals, taking care of our patients. Let us not forget the EM and trauma heroes of Las Vegas as well, taking care of 500+ gunshot victims of the deranged gunman.

To all of them, we say thank you and a humble "proud of us" for always being there when we are needed.

### Prudent Layperson Standard

As we start 2018, our current plight is making sure that the key principles of the Prudent Layperson (PLP) standard remain in place. In 2017, several states stopped covering some so-called "unnecessary" ED visits.

The issue we have is that this practice places the burden of deciding if the illness is an "emergency" onto our patients. This is contrary to all the education we have given to our patients over the years. For example, patients with chest pain are taught to go to the ER to make sure they are not having a heart attack. Now, Anthem Blue Cross Blue Shield in several states would not reimburse this visit if the "heart attack" turned out to be symptoms of GERD.

These same concerns have started to build in Illinois. In November 2017, ICEP supported the Emergency Department Practice Management Association's (EDPMA) efforts voiced in their address to Illinicare. All of us are concerned that Illinicare's Non-Emergent Services ER policy that uses a diagnosis list to determine reimbursement rates violates the Prudent Layperson standard – payment by Illinicare is based on the diagnosis.

The PLP standard is reiterated in the Medicaid Managed Care Rules finalized in 2016. The rule states that it is appropriate to seek care in the emergency department when there is a "medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the health of the individual (or for a

pregnant woman, the health of the woman or her unborn child) in serious jeopardy, serious impairment to body functions, or serious dysfunction of any bodily organ or part. The final determination of coverage and payment must be made taking into account the presenting symptoms rather than the final diagnosis. The purpose of this rule is to ensure that enrollees have unfettered access to health care for emergency medical conditions, and that providers of emergency services receive payment for those claims meeting that definition without having to navigate through unreasonable administrative burdens."

### Opioid Epidemic

We have joined the fight against the opioid epidemic. ICEP supported the National Safety Council (NSC), who started the campaign to "save a life", bringing public awareness to the epidemic and to the 22,000 deaths attributed to the opioid overdose each year. Chicago hosted the NSC's memorial to the victims of the epidemic in November; ICEP was a vocal supporter of this worthy campaign.

Furthermore, ICEP has endorsed the Opioid Prescribing Guidelines for Patients in the Emergency Department and Immediate Care Centers. See story on Page 3 for details; more will be presented on this important topic at Spring Symposium on May 3 and in upcoming issues of the Illinois EPIC.

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# Out With the Old, In With the New in 2018

## ICEP Priorities Include Prudent Layperson Standard, Opioid Epidemic

from Page 1

One of the key provisions in the guidelines states: "Hospitals and health systems should have a method for providing naloxone to patients deemed at risk of developing opioid use disorder or their family members..."

ICEP lobbied to exclude emergency department physicians from mandatory Prescription Monitoring Program (PMP) screening for patients when we prescribe Schedule II drugs if done for less than 7 days, in order to maintain efficiency within our workplace. The bill that recently passed in Illinois does require all providers that prescribe Schedule II drugs to be registered with the IL-PMP and to screen patients through PMP when prescribing such medications.

We are in agreement that the opioid epidemic is rampant and we should curtail the prescriptions for narcotics, but we are also aware that our patient population presents with acute problems and pain control is necessary. We know that the pain management options for our discharged patients are limited.

That being said, an effort is underway to re-educate our patients that we do not have a miracle drug, and other options for pain control (i.e., ice, elevation, NSAIDs, topical medications, acupuncture, etc.) are the first line of management. This is in lines with other states and ACEP. In

fact, multiple institutions are enacting ALTO (Alternative to Opioids) programs, and creating guidelines for opioid use in the EDs.

*"We are in agreement that the opioid epidemic is rampant and we should curtail the prescriptions for narcotics, but we are also aware that our patient population presents with acute problems and pain control is necessary. We know that the pain management options for our discharged patients are limited."*

*— Dr. Yanina Purim-Shem-Tov*

### ICEP Update

ICEP remains a strong organization, going into 2018 with more than 1,300 diverse members. We are continually focusing on education and advocacy, research and clinical excellence. Our educational and CME programs – Oral Board Review Courses, Emergency Medicine Board Review Intensive for Qualifying & ConCert Exam (EMBRI), Emergency Medicine Update, Ultrasound courses, Simulation courses, and others – continue to draw a wide number of participants with very positive reviews and outcomes.

We provide a platform for our residents to showcase their research and present interesting topics in

EM during our Spring Symposium in May, and abstract submission is already open for 2018. See story on Page 4 for more details. Furthermore, we consistently provide our growing force with opportunities to meet future employers during the summer Resident Career Day. Mark your calendar now for August 30, 2018, and save the date to join us.

In recent years, ICEP has focused on mentoring the next generation of leaders with leadership training opportunities focused on residents and young physicians. ICEP's annual Leadership Scholarship program focuses on advocacy and includes:

1. Attending ICEP Advocacy Bootcamp and learning the legislative process from the beginning to law enactment.

2. Attending ICEP Advocacy Day and meeting with district law makers to discuss issues pertinent to EM.
3. Attending ACEP Leadership and Advocacy Conference in Washington, DC and meeting with State's law makers to discuss current issues in EM.

ICEP received a record number of Leadership Scholarship applications in 2018, and the ICEP Board of Directors Executive Committee was faced with a very difficult decision. Leadership Scholarship recipients for 2018 will be announced in the next issue of the EPIC. We look forward to introducing you to this next generation of leaders, and their personal accounts of the advocacy activities they attend will be published in upcoming issues of the EPIC.

I am proud to report that our organization, through its strong membership, remains solvent with a consistent operational budget of 4-6 months.

We are looking forward to a great year, and I wish all of you a happy and healthy 2018! I hope to see you soon at the Emergency Medicine Update conference in Peoria, on February 15. Registration is still open and details can be found on Page 4. If you are looking for pediatric and trauma-specific hours, EM Update is a great forum to earn them, and you have the option for hands-on practice at a simulation skills session presented in the afternoon.

Sincerely,



**— Yanina Purim-Shem-Tov, MD, MS, FACEP**  
**ICEP President**



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# ICEP Endorses Opioid Guidelines for EDs

A workgroup that includes ICEP and the Illinois Hospital Association (IHA) have created a set of opioid prescribing guidelines for patients in the emergency department and immediate care centers.

ICEP endorsed the guidelines at its Board of Directors meeting in December. The guidelines have been sent to the IHA Board of Directors for final endorsement before the guidelines are released statewide.

Upon IHA board approval, the guidelines will be sent to the Illinois Department of Public Health (IDPH) and disseminated to Illinois hospitals. Supporting materials will be developed to aid in this process.

The guidelines are intended to assist in treating patients with acute and chronic pain in the emergency department (ED) and immediate/urgent care settings. They are not intended for

patients receiving treatment for cancer, palliative care or end-of-life care.

The guidelines' purpose is to:

- Provide safer, more effective care for patients with acute and chronic pain;
- Improve communication between clinicians and patients about the benefits and risks of using prescription opioids for chronic pain; and
- Help reduce opioid use disorder and overdose.

The workgroup began work in April 2017 and reviewed other state guidelines, CDC and AMA guidelines, ACEP Policy Statements, and the Joint Commission's 2018 Pain Standards to develop their recommendations. ICEP was represented on the workgroup by Steven Aks, MD FACMT, FACEP. Illinois ED directors were given the opportunity to review and comment on the draft guidelines.

Overall, the only recommendation met with controversy regarded naloxone co-prescribing; the workgroup addressed the concerns by stipulating the creation of an educational program on co-prescribing of naloxone. IDPH has stated that grant funding is available to create the program.

Specific recommendations in the guidelines focus on three unique ED/immediate care patient populations:

- Acute pain in opioid-naïve patients
- Chronic pain in patients receiving long-term opioid therapy
- Patients with opioid use disorder and addiction

Dr. Aks in consultation with Michael Wahl, MD, FACEP, is at work on more information that will be released to ICEP members soon. Join us for Dr. Aks' lightning-rounds presentation on naloxone at Spring Symposium on May 3.

## REBEL EM Creator Dr. Salim Rezaie to Present Keynote Lecture at Spring Symposium May 3

ICEP is proud to welcome Salim R. Rezaie, MD, FACEP, founder and creator of the popular REBEL EM podcast, as the keynote presenter at the 2018 Spring Symposium and Annual Business Meeting.



**Salim R. Rezaie, MD, FACEP**  
**REBEL EM Creator**

Dr. Rezaie will present "Getting Things Done - Working in a Distracted World," illustrating the concept of "Deep Work" and demonstrating a mental construct that helps to eliminate technology-focused hyper-distraction.

Register now to attend the Symposium at Northwestern Memorial Hospital on Thursday, May 3. Registration is open online at ICEP.org.

Spring Symposium is the member-favorite annual event for physicians, EM residents, and medical students. The half-day event provides clinical education that focuses on the big issues that will change your practice, including lightning rounds on innovations in emergency medicine.



Lightning rounds will tackle some of the hottest topics in emergency medicine in a short, rapid-fire format designed to help you learn and retain more. Topics include FAST, damage control resuscitation and TXA for pediatric patients; naloxone; anti-coagulation reversal; blunt chest trauma; EMR; and advocacy. A full agenda of speakers and topics will be released shortly.

Also on the agenda at 2018 Spring Symposium are:

The Resident Speaker Forum will showcase novice speakers from each residency in a lecture competition. If you are interested in representing your residency, please talk to your residency coordinator or director for full details.

A Statewide Research Showcase will spotlight the best in Illinois emergency medicine research. Abstracts are due March 2; see story on Page 8 for details.

The Annual Business Meeting will include presentation of ICEP's annual awards and Resident Podcast Competition, introduction of the Leadership Scholarship recipients, and announcement of the Board of Directors election results.

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.



# Advocacy Activities on the Agenda at ICEP

Make the future of emergency medicine a priority in 2018 and join us for advocacy activities this spring. ICEP is offering an introduction to advocacy with a Advocacy Bootcamp on March 9, followed by Advocacy Day in Springfield on April 26.

Registration for both events is open online now at [ICEP.org/advocacy](http://ICEP.org/advocacy) and free for members. Advanced registration is required.

## Advocacy Day

Join ICEP members and ICEP's lobbyists on Thursday, April 26 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.

Participants outside of Springfield may wish to take Amtrak for convenience. The Amtrak station is within walking distance of the Sangamo Club.

## Advocacy Bootcamp

Interested in Advocacy Day but need a primer on successful EM advocacy? ICEP Advocacy Bootcamp is for you!

Join us March 9 for a two-hour program focused

on successful advocacy efforts and understanding the legislative process. This bootcamp will teach you how to be a better advocate for emergency medicine issues. Registration is free for ICEP members to attend.

The program runs from 10 AM to noon at the ICEP Conference Center in Downers Grove and features ICEP lobbyist Molly Rockford of Illinois Strategies among other speakers. The full agenda will be released shortly.

You may register for one or both events online at [ICEP.org/advocacy](http://ICEP.org/advocacy). Together we can make a difference.

# Still Time to Register for EM Update in Peoria

Emergency Medicine Update is just one week away, but there is still time to register and join ICEP on Thursday, February 15 at the Jump Trading Simulation & Education Center in Peoria.

ICEP's winter CME program is a multi-faceted educational program open to all levels of emergency care providers and provides a great opportunity to earn pediatric and trauma hours that help fulfill state licensing requirements. Register online now at [ICEP.org](http://ICEP.org).

On the 2018 agenda:

- Out of Hospital Hemorrhage Control, presented by Brandon B. Bleess, MD, EMT-T
- Cardiopulmonary Resuscitation - From the Past into the Future, presented by Yanina Purim-Shem-Tov, MD, MS, FACEP
- The Top 10 EM Articles from 2017, presented by John W. Hafner, Jr., MD, MPH, FACEP
- Pediatric Trauma Pearls, presented by Greg Podolej, MD

Sponsors and exhibitors include:

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After the conclusion of the morning program, join ICEP in the afternoon in the sim lab for hands-on skills practice on simulated patients. Spend 90 minutes at each module and earn a maximum of 3 *AMA PRA Category 1 Credits*<sup>™</sup>. Modules focus on pediatric trauma and pediatric resuscitation. The cost of the Simulation Skills Lab is \$99 for all providers, and you may register for this program without attending EM Update.

## EMERGENCY MEDICINE *Update*

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# ACEP Celebrating 50th Anniversary

January kicked off a year-long celebration of ACEP's 50th anniversary. For 50 years, America's emergency has been our specialty. Comforting our patients through some of their most frightening moments, emergency physicians are there 24 hours a day, 365 days a year.

ACEP's 50th anniversary reflects on the moments that matter most for our specialty, our members, our patients — moments that matter most to our members.

Throughout 2018, ACEP will honor the titans of emergency medicine who blazed the trails so others could follow. We'll recognize the mavericks who practice each day with tenacity, excellence and the highest regards for their patients. And we'll highlight the pioneers who will lead us into the next era of practice. Numerous activities are planned throughout the year to mark



this tremendous milestone. Plan to participate in social media campaigns that highlight the highs, lows and life-changing moments in EM. Get hyped for a historical timeline following the history of our specialty as well as anniversary-themed podcasts, and much more.

Watch for anniversary editions of ACEP Now and Medicine's Frontline in addition to proclamations from members of Congress and sister medical societies. Don't forget to order a copy of our commemorative coffee table book featuring the breath-taking photographs that capture a day in the life of emergency physicians collected by famed photographer Eugene Richards.

Plan now to attend ACEP18 in October in San Diego for our blow-out anniversary celebration featuring an interactive history museum showcasing the journey of emergency medicine from battlefield to inner city to rural America to every spot in between. This is one special Scientific Assembly you can't afford to miss.

The celebration of 50 years of saving lives and pushing boundaries has already begun. Are you on call for 50 more?

## Submission Period Open Now for Resident Podcast Competition at Spring Symposium

ICEP is seeking submissions for the Podcast Competition that will be presented at the 2018 Spring Symposium on May 3, 2018. The ICEP Podcast Competition is open to Illinois emergency medicine residents to address a variety of topics in emergency medicine. The entries may vary from literature review, to procedural techniques, to current topics of interest. The most creative entry will be recognized at the Symposium.

The deadline to submit podcasts is Monday, April 2, 2018. The Podcast Workgroup of the Education Committee will make selections and notify applicants by April 18, 2018.

### Goal of ICEP EM on Tap Podcast:

The goal of the ICEP EM on Tap podcast is to provide an online resource of up-to-date and relevant information as it pertains to the practice of emergency medicine. By way of podcast medium, ICEP will expand the conversation on various emergency medicine topics while offering a resource of insightful feedback and dialogue from the ICEP community.

### Content, Format and Deadlines:

The content of each submission must reflect at



least two of the criteria below:

1. Evidence based medicine
2. Direct reference of literature review or resource
3. Cutting-edge emergency management

Podcast submissions must be 6-10 minutes in length. Submissions outside of this length requirement will not be considered.

All podcast must be submitted in MP3 format.

Each submission must include the podcast file (MP3 format), a completed Podcast Submission Form, and documented references and copyright permissions for review by the Podcast Workgroup. Download the Podcast Submission Form from [ICEP.org/empodcast](http://ICEP.org/empodcast).

Submit all materials electronically to [ICEP.org/podcastsubmit](http://ICEP.org/podcastsubmit).

The deadline for submission is Monday, April 2, 2018 at 4:30 pm Central Time. This deadline will be strictly enforced.

### Podcast Submission Scoring Guidelines:

Entries will be judged based on topic, content, and delivery. The competition winner will be featured on the ICEP EM on Tap podcast.

Each podcast submission will be judged based on three categories:

1. Content
2. Delivery of content
3. Medical relevance to the practice of emergency medicine

All submissions will receive written feedback from the Podcast Workgroup.



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# Defining the Research Question

## Submissions for ICEP Statewide Research Showcase Due March 2

ICEP is seeking submissions for the annual Statewide Research Showcase held at the 2018 Spring Symposium on Thursday, May 3 at Northwestern Memorial Hospital. 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. All abstracts will be considered, even if previously presented at other meetings.

The deadline to submit abstracts is Friday, March 2. The Research Committee will make selections and notify applicants in March. Abstract guidelines and scoring system remain the same as in previous years. The maximum word count for the abstract is 350 words. 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](mailto:loraf@icep.org) with the completed Abstract Submission Form, available at [ICEP.org/research](http://ICEP.org/research). Abstracts must conform to the guidelines listed in the form in order to be considered. A blinded copy of the abstract must be included for judging purposes.

*As you prepare your submission, read on for helpful tips from the ICEP Research Committee.*

### Defining the Research Question

**Submitted by: Karis Tekwani, MD, FACEP  
ICEP Research Committee**

One of the first, and most important, steps in conducting clinical research lies in defining the research question. It is the responsibility of the research community to attempt to answer questions that are both well thought out as well as clinically relevant. The objectives of this article are to give the reader tools for constructing a good research question.

#### Interest and Knowledge

Interest in a particular subject generally initiates clinical research. This may stem from a perceived deficiency in the medical literature in a particular area of study or from familiarity with a subject.<sup>1</sup> One can gain subject familiarity through several avenues including literature searches, awareness of current trends, as well as interviews with experts in the field.<sup>1</sup> It is essential to fully

understand what has been studied about a topic to date, which allows the investigator to identify any potential gaps in knowledge. Advanced knowledge about a particular subject will likely generate curiosity that can be used as a starting point for a research question.

In-depth knowledge about a subject may generate several questions and it is necessary to lay out and develop both primary and secondary questions in the early stages of planning.<sup>1</sup> It is advisable to always focus on one primary research question. Incorporating more research questions will likely increase the complexity of the study design and statistical analysis.<sup>1</sup> One will have more success in completing a study with a narrow rather than broad scope.

#### FINER Criteria

Hulley and colleagues propose the use of the FINER criteria in the development of a good research question.<sup>2</sup> The FINER criteria (feasible, interesting, novel, ethical, and relevant) will give the investigator a framework for the research question that sets the investigator up to draw meaningful conclusions from the study.<sup>2</sup>

#### Feasibility

Feasibility is arguably the most important criteria to consider when defining a research question. One must be familiar with the resources and practicality of conducting clinical research in a given setting. An early estimate of sample size, will help the investigator to ascertain whether the study is feasible with given resources. As a general rule, for a novice investigator, it is advisable to stick to commonly seen pathology and aim to detect a larger difference between groups. Rare pathology and the desire to detect small clinical differences will increase sample size and potentially impact feasibility. Also keep in mind the time, personnel, and money that will be necessary to conduct the study.<sup>2</sup> Some study sites may be able to conduct randomized controlled trials, whereas at other study sites, a retrospective, before and after, or observational study may be more feasible.

#### Interesting

When designing your study, make sure to choose something that is both interesting to you as well as the scientific community. Choosing something that is of personal interest will keep you excited, motivated, and give you the endurance to see the project through to completion. Run your idea and study design past multiple colleagues. Seek out

experts in the field to give input.<sup>2</sup> This will ensure that you have an outside perspective on the interest in your study.

#### Novel

Before investing time and effort moving forward with a particular study question, ensure that the question you intend to answer will further knowledge on the subject. This is generally accomplished through a very thorough review of current literature and trends.<sup>2</sup> Also, be cognizant of ongoing studies, which may aim to answer the same question. Again, experts in the field are great resources, as are attending conferences and lectures on the given area of interest. Don't get discouraged if your idea is not entirely novel. Some questions are still worth investigating further, especially if previous investigations have had mixed results or there were inherent flaws in particular study designs.<sup>2</sup>

#### Ethical

It is a requirement that a study question be answerable in an ethical way. Ensure that your question and study design would not impose unacceptable physical harm or invasion of privacy for the subjects.<sup>2</sup> When in question, consult with your Institutional Review Board.

#### Relevant

When developing your research question, ask yourself if your question answers the "so what?" test. Why should others care about your study, and what is it going to add to the medical literature? Ask yourself how potential outcomes of your study would influence guidelines or guide further research.<sup>2</sup> If you are unsure, ask a colleague or expert to give input.

#### Mentor

Finally, for the novice investigator in the early stages of planning a study and developing the research question, be sure to choose a mentor who can guide you through the process. Attempt to choose a mentor who is experienced and has the time and desire to work closely with you.<sup>2</sup> Ideally, your mentor has similar areas of interest, which can open doors for potential networking and funding opportunities.

#### Resources

1. Farrugia P, Petrisor B, Farrokhyar F, et al. Research questions, hypotheses and objectives. *Can J Surg.* 2010;53(4):278–81.
2. Hulley S, Cummings S, Browner W, et al. *Designing clinical research.* 3rd ed. Philadelphia (PA): Lippincott Williams and Wilkins; 2007.







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# News & Notes from ACEP

The latest from national ACEP:

## ACEP Seeking Success Stories for Opioid Use, End-of-Life Care

ACEP wants to recognize innovative and successful approaches to managing two of the most vexing issues facing emergency departments across the country: end-of-life care and opioid use. ACEP's Leadership and Advocacy Conference in May 2018 will feature a day-long Solutions Summit in which select success stories in these areas will be highlighted.

The Solutions Summit is a new initiative spearheaded by ACEP President Paul Kivela, MD, FACEP.

Any physician or emergency department that has developed a new approach to better address these problems is encouraged to submit their story. Some of the successes submitted will be recognized in the Summit program. A few who submit notable success stories will also be given an opportunity to present live at the Summit.

For end-of-life care, examples of innovative programs could include expanded use of POLST, enhanced coordination with hospice, palliative care initiatives, etc.

For opioids, we're interested in recognizing programs designed to curtail the use and prescribing of opioids in the emergency department as well as programs to help treat patients of opioid abuse.

To submit your story, go to <https://www.acep.org/solutionssummitideas> to fill out the brief online submission form. The deadline for submissions is February 10.

## Show Your Commitment to High Standards for Clinical Ultrasound

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- Ensure safety and efficacy of patient care
- Meet ACEP's high standards for point-of-care delivery
- Use your own policies or draw from expert-reviewed sample documents

## Geriatric Emergency Department Accreditation Program

ACEP has just begun to accredit geriatric emergency departments. The Geriatric Emergency Department Accreditation Program is now accepting applications. There will be 3 levels of accreditation ranging from a minimal commitment to better elder care to a comprehensive well-rounded robust program. Accreditation shows your patients, your institution and your payers that your ED is ready to provide care to seniors and is a quality program that meets the high standards of the American College of Emergency Physicians. Find out more at [ACEP.org/geda](http://ACEP.org/geda).

## Policy Statements and PREPs Approved by the ACEP Board

The following policy statements and PREPs were approved by the ACEP Board of Directors at their October 2017 meeting.

### Policy Statements

- Medical Transport Advertising, Marketing, and Brokering – revised
- Clinical Emergency Data Registry Quality Measures – new
- Mechanical Ventilation – new
- Hospital Disaster Physician Privileging – revised
- Unsolicited Medical Personnel Volunteering at Disaster Scenes – revised
- Sub-dissociative Dose Ketamine for Analgesia – new
- Writing Admission and Transition Orders – revised
- The Clinical Practice of Emergency Medical Services Medicine – new
- The Role of the Physician Medical Director in EMS Leadership – new
- State Medical Board Peer Review – new
- Pediatric Medication Safety in the Emergency Department – new
- Distracted and Impaired Driving – revised

### PREPs

- Sub-dissociative Dose Ketamine - new
- Writing Admission and Transition Orders – new

## Survey Seeks EM Physician Responses to Research Study

A survey research study of emergency medicine physicians in Illinois is being conducted out of Northwestern University. The survey should take 10 minutes or less and can be completed entirely online. The brief survey can be completed anonymously, or interested participants may provide their email address to be entered into a drawing for a \$100 Amazon gift card to be drawn June 1, 2018.

Questions will include information about training, experience, and current clinical practice setting.

All emergency physicians practicing clinically are encouraged to participate by going to <http://bit.do/EMSsurvey> to complete the survey, which is available now.

PI: Dr. Zachary Pittsenbarger, Northwestern University Feinberg School of Medicine IRB study number: STU00202932.

## 2018 ACEP Leadership Awards Nominations Due April 2

The ACEP Awards Program recognizes leadership and excellence. It provides an opportunity to recognize all members for significant professional contributions as well as service to the College. All members of ACEP are eligible to participate.

Submit your nomination online at: [ACEP.org/awardnomination](http://ACEP.org/awardnomination). All entries must be submitted by April 2 to be considered by the Awards Committee. Receipt of each nomination will be confirmed by email. Award recipients will be informed by June 1, 2018 and will be announced publicly at the President's Awards Gala during the College's annual meeting. In addition, ACEP will publicize the winners in ACEP Now and will recognize them at various venues during the annual meeting.

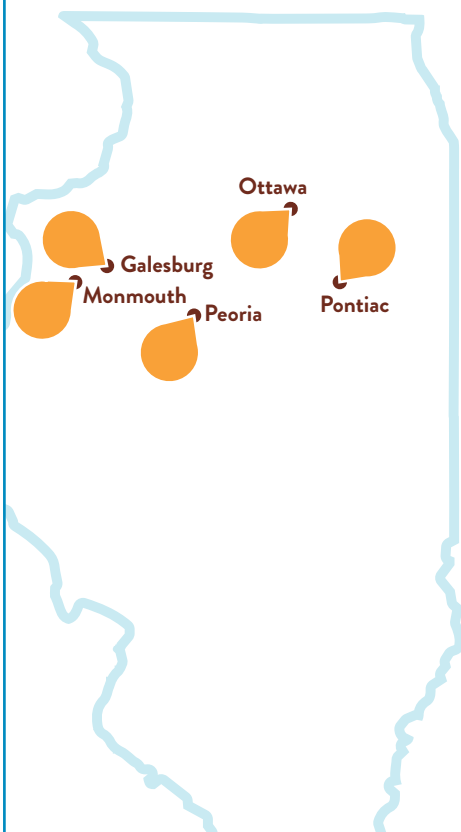
If you have any questions, please contact ACEP staff member Mary Ellen Fletcher at [mfletcher@acep.org](mailto:mfletcher@acep.org) or 800-798-1822, extension 3145.





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For more information about OSF, visit us on the web at [osfhealthcare.org](http://osfhealthcare.org).

**Please contact or send CV to:**

Stacey Morin, Senior Physician Recruiter  
Phone: (309) 683-8354  
Email: [stacey.e.morin@osfhealthcare.org](mailto:stacey.e.morin@osfhealthcare.org)

EOE/Minorities/Females/Veterans/Disabled



# ICEP Calendar *of* Events 2018

**February 12, 2018**

**Patient & Physician Advocacy  
Committee Conference Call**  
9:00 AM - 10:00 AM

**February 15, 2018**

**Emergency Medicine Update**  
Jump Trading Simulation &  
Education Center  
Peoria

**March 5, 2018**

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

**March 9, 2018**

**ICEP Advocacy Bootcamp**  
ICEP Conference Center  
Downers Grove

**March 11, 2018**

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

**March 11, 2018**

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

**March 19, 2018**

**ICEP Board of Directors  
Voting Opens Online**

**March 19, 2018**

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

**March 19, 2018**

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

**March 20, 2018**

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

**April 4, 2018**

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

**April 12-13, 2018**

**Oral Board Review Courses**  
Chicago O'Hare Marriott  
Chicago

**April 18, 2018**

**ICEP Board of Directors  
Voting Closes Online**

**April 20, 2018**

**Emergent Procedures  
Simulation Skills Lab**  
Grainger Center for  
Simulation and Innovation  
Evanston Hospital  
Evanston

**April 26, 2018**

**ICEP Advocacy Day**  
Springfield

**May 3, 2018**

**Spring Symposium & Annual  
Business Meeting**  
Northwestern Memorial Hospital  
Chicago

**May 22, 2018**

**EM4LIFE 2017 LLSA Article  
Review Course**  
ICEP Conference Center  
Downers Grove

**May 28, 2018**

**Memorial Day Holiday**  
ICEP Office Closed

**June 4, 2018**

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

**June 4, 2018**

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

**June 7, 2018**

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

**June 7, 2018**

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

**August 14-17, 2018**

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

**August 30, 2018**

**Resident Career Day**  
Northwestern Memorial  
Hospital

**Register for all courses online at [ICEP.org](http://ICEP.org)!**



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

