

PRESIDENT'S LETTER

Presidency During the Pandemic



**Ernest Wang,
MD, FACEP**

“May you live in interesting times” is an English expression which purports to be a translation of a Chinese curse. Indeed, we are living in interesting times. But rather than looking at it from the lens of a curse, I choose to look at it for the opportunities it presents us with to become better people and a better society.

As I reflect on the past year serving as the president of ICEP, I have to say that all the issues that we thought were important (boarding, reimbursement, opioids etc.) took a backseat in January-March, when COVID-19 reached our shores and infiltrated our state and our collective consciousness. Since then, it's been “all COVID, all the time.”

As well, nine months ago, just before the pandemic hit, I stepped into my new role as the Chief of Emergency Medicine at NorthShore University HealthSystem. So in addition to all the usual stresses associated with that, I tell people that we've basically had to create an ED COVID “Start Up” in real time. Fortunately for me, I have great ED colleagues on our leadership team that made this possible.

COVID-19 has consumed my everyday life

for the past five months: watching what was happening in China, South Korea, Italy, Washington state, and then New York; working with my health system leadership to prepare ourselves for the inevitable coronavirus tsunami; tracking the daily testing data; following the regular IDPH and IHA updates; and most importantly, trying to reassure and communicate effectively every day with my physicians and staff. I am keenly concerned about the anxiety and uncertainty that COVID has caused.

People ask me often, “How are you doing?” My truthful reply is that COVID-19 has greatly impacted me — as I have sustained significant personal and professional loss. And I am sure the pandemic has touched each and every one of you in personal ways as well. However, I also reply that COVID has given me a real sense of purpose — to my family and friends, to my ED and hospital co-workers, to my patients, and to my ICEP colleagues. I am so inspired by the bravery, resolve, and compassion I see in my emergency departments every day, that it motivates me to bring my best to support them.

Similarly, I spent a great deal of time thinking about how I could use this situation to help advance the mission of ICEP to benefit our members in their own local battles to manage the pandemic. I heard from many of our members that they felt like they would benefit from hearing from other emergency physicians in the state and learning what they were struggling with with respect to preparations, protocols, ventilators, ICU beds, PPE, staffing, and

testing. So I started a webinar series to bring ICEP members together to discuss these very important topics. By sharing what we've done with others, and hearing what others have done at their institutions, it gave me a lot of reassurance that we were on the right track, and I think it has done the same for other ICEP emergency physicians as well. The full webinar series is available at ICEP.org/covid19 and I recommend you watch if you have the time.

As we learned more about the disease, our focus on these webinars shifted to innovative treatment in the ED using tools such as high-flow nasal cannula oxygen delivery, proning, and the unique challenges of COVID-19 resuscitation. Our latest webinar (see story on Page 4) became a forum for raising awareness of the stark realities of racial disparities caused by the COVID-19 pandemic. Advocacy for our patients whose lives are adversely affected by social determinants of health is one of the most worthy causes that emergency physicians can undertake. I pledge to continue to help ICEP host these webinars as long as there is interest.

ICEP has also had to pivot quickly when it became obvious that in-person CME and advocacy events would be canceled due to COVID-19. Advocacy Day was canceled. The Spring Symposium was quickly restructured to a recorded online format, and we are grateful to our speakers and committee members who made this happen so seamlessly. Additionally, the ICEP Board has had to take a hard look at how to best re-imagine and offer important

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courses such as the Oral Board Review Course. This course, and many others, are vital to the continued viability of ICEP and a blend of remote and safe social distancing live activities have to be developed. These discussions are still in progress but we look forward to sharing more with you soon.

I am also proud of the advocacy work ICEP has done with ACEP that has focused on helping emergency physicians get what they need to help them continue to practice safely and effectively. These issues include advocating for the continued widespread availability of PPE, liability coverage (in Illinois, we were fortunate that Governor Pritzker signed the Executive Order providing civil immunity for healthcare workers providing medical assistance in the pandemic, but many states do not have this type of protection), and hazard pay.

Since we are still very much in the midst of the pandemic as my presidency concludes, I'd like to end my EPIC presidential addresses with my top 5 "COVID-19 revelations" as it pertains to the specialty of emergency medicine:

1. The pandemic has highlighted the real value of emergency medicine, not only in our state, and our country, but around the world. The outpouring of positivity and respect from patients, other physicians, and society has been truly unbelievable. I have personally received dozens of examples and emails from patients about the heroic acts of medicine my colleagues have provided for patients whose lives depended on their expertise. The world has witnessed emergency physicians swallow their fear, put on their gear, and save lives, at first even while not knowing fully all the risks they exposed themselves to.

According to Dr. Philip Zimbardo, the definition of a hero is someone whose actions meet this criteria: "First, it is performed in service to others in need—whether that's a person, group,

or community—or in defense of certain ideals. Second, it's engaged in voluntarily, even in military contexts, as heroism remains an act that goes beyond something required by military duty. Third, a heroic act is one performed with recognition of possible risks and costs, be they to one's physical health or personal reputation, in which the actor is willing to accept anticipated sacrifice. Finally, it is performed without external gain anticipated at the time of the act. Simply put, then, the key to heroism is a concern for other people in need—a concern to defend a moral cause, knowing there is a personal risk, done without expectation of reward."¹

Yes, emergency physicians are heroes in the truest sense of the word. People will always remember that, when the stakes were the highest, emergency medicine showed up big time and answered the call.

2. COVID-19 has provided us all with a very useful lesson in public health. We now are all becoming familiar with testing, test positivity percentage, doubling time, R_0 , contact tracing, transmissibility, PCR and antibody testing, and asymptomatic spread. We now understand the effectiveness and challenges associated with social distancing, stay-at-home orders, mask wearing, assiduous hand-washing, self-isolation, and quarantine in congregate living facilities as strategies to flatten the curve and prevent excess deaths.

When it comes to mitigation, we have seen that timing matters greatly — one health system was overwhelmed (New York) and one was not (Chicago). Workplace protection of essential workers has risen to a level of urgency that has not been seen in over a hundred years.

The tension between public health and economic health is complex and regionally variable, and so reopening is not a one-size-fits-all proposition. We have been acutely reminded of the dangers that our communities at risk face,

not because the virus is prejudiced (it clearly is not) but because our society's values and choices over generations have created a system in which these groups are susceptible to COVID-19 disparities because of "...material resource deprivation caused by low SES, chronic stress brought on by racial discrimination, or place-based risk."² Different disease, same outcome.

3. COVID-19 has reminded us that we can make a huge impact with our words and actions. When there is no cure or vaccine, the most meaningful care may be the kind and reassuring word, providing hope, or holding a hand. In these times, physicians and nurses have become surrogate family members for patients whose own kin cannot be with them for fear of contracting the infection.

Patients' fears, accentuated even more by doctors whose faces are hidden behind masks and face shields, can be alleviated by an empathetic doctor at the bedside. Most of us who have taken care of COVID patients know what it's like to understand that for many, the sight and sound of our words may be the last they every see or hear.

4. COVID-19 has fundamentally changed our approach to resuscitation, critical end-of-life discussions, and PPE for the foreseeable future. We need to mentally prepare for the long haul — the tunnel is long, but there is light at the end. This is a marathon, not a sprint. And expect several peaks and valleys along the way. We now incorporate pauses to protect ourselves before initiating CPR. We think cautiously about the risk of aerosol-generating procedures and have already come up with a variety of ways to mitigate the dangers. We have probably all had to have a critical and frank discussions with patients and their families about the course of their disease, often when minutes mattered.

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Illinois College of Emergency Physicians
3000 Woodcreek Drive, Suite 200
Downers Grove, IL 60515
Phone 630.495.6400 Fax 630.495.6404
www.icep.org

Editor

Cai Glushak, MD, FACEP
Outgoing ICEP President
Ernest Wang, MD, FACEP

Incoming ICEP President

Henry Pitzele, MD, FACEP

Executive Director

Virginia Kennedy Palys

Managing Editor

Kate Blackwelder

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Congratulations to Newly Elected ICEP Officers, Board of Directors Members



Dr. Henry Pitzele
President



Dr. Christine Babcock
President-Elect



Dr. Napoleon Knight
Secretary-Treasurer



Dr. Jason Kegg
Member-at-Large



Dr. Ernest Wang
Past President

Incoming president Henry Pitzele, MD, FACEP accepted the virtual gavel from outgoing president Ernest Wang, MD, FACEP, during the Board meeting May 7.

The results of the ICEP Board of Directors elections were also announced, and the officers for the 2020-2021 term were elected.

Elected were:

- Sunil Arora, MD, MBA, FACEP
- Janet Lin, MD, MPH, MBA, FACEP
- Howie Mell, MD, MPH, CPE, FACEP
- Adam Rodos, MD, FACEP
- Jack Wu, MD, FACEP
- Nupur Shah, DO - Resident Member

Serving as officers are:

- President: Henry Pitzele, MD, FACEP
- President-Elect: Christine Babcock, MD, MS, FACEP
- Secretary-Treasurer: Napoleon Knight, MD, MBA, FACEP, FAAPL
- Member-at-Large: Jason Kegg, MD, FACEP
- Immediate Past President: Ernest Wang, MD, FACEP

Arwindekar, MD, MBA, FACEP, Paul Casey, MD, FACEP, Chris McDowell, MD, M.Ed, FACEP, and Regina Royan, MD, MPH. Thank you as well to outgoing president Ernest Wang, MD, FACEP.

Councillors representing Illinois at the ACEP20 Council Meeting were also selected, although the future and format of the Council Meeting and Scientific Assembly remains somewhat uncertain.

ICEP Councillors are:

- Amit Arwindekar, MD, MBA, FACEP
- Christine Babcock, MD, FACEP
- E. Bradshaw Bunney, MD, FACEP
- Shu Chan, MD, MS, FACEP
- Cai Glushak, MD, FACEP
- John Hafner, MD, MPH, FACEP
- Scott Heinrich, MD, FACEP
- Jason Kegg, MD, FACEP
- Napoleon Knight, MD, MBA, FACEP, FAAPL
- Janet Lin, MD, MPH, MBA, FACEP
- Christopher McDowell, MD, MBA, MS, FACEP
- Henry Pitzele, MD, FACEP
- Yanina Purim-Shem-Tov, MD, MS, FACEP

- Ernest Wang, MD, FACEP

ICEP Alternate Councillors are:

- George Hevesy, MD, FACEP
- Adnan Hussain, MD
- Laura Napier, MD, FACEP
- Kurtis Mayz, MD, JD, MBA
- Regina Royan, MD, MPH
- Will Sharp, MD, PhD, FACEP
- Deborah Weber, MD, FACEP

Call for Resolution Submissions

At the June 8 meeting, the ICEP Board of Directors will consider submissions from members for resolutions to be brought before the ACEP Council this fall.

If you would like to make a suggestion for consideration, please draft the proposed resolution or topic and submit it Ginny Kennedy Palys at ginnykp@icep.org.

The Board will discuss, make decisions, and request any necessary revisions be made in order to submit the draft resolution to ACEP by the Sunday, July 26 deadline. For more information from ACEP about authoring a resolution, read: www.acep.org/how-we-serve/council/guidelines-for-writing-resolutions/



Dr. Sunil Arora



Dr. Janet Lin



Dr. Howie Mell



Dr. Adam Rodos



Dr. Jack Wu



Dr. Nupur Shah



Latest ICEP COVID-19 Webinar Focuses on Healthcare Disparities: Watch Now

The most recent in ICEP's COVID-19 webinar series was presented May 13 and featured speakers Garth Walker, MD, MPH, Keri Robertson, DO, and Ashley Magda, DO, joining Past President Ernest Wang, MD, FACEP, to examine the impact of the pandemic on healthcare disparities.

Drs. Walker, Robertson, and Magda shared their experiences at their hospitals in Chicagoland with data to demonstrate the implications of socioeconomic status and race on how the disease is both transmitted and treated.

The recording of the hour-long discussion is available at [ICEP.org/covid19](https://www.icep.org/covid19). Recordings of the previous three webinars, which included guest speakers Thomas Spiegel, MD, MBA, FACEP, of the University of Chicago, and Edward Ward, MD, MPH, FACEP, of Rush University Medical Center, are also available, as are many other COVID resources for members.

Dr. Spiegel's presentation focused on the University of Chicago's use of high-flow nasal cannula as an option to treat Covid patients in respiratory distress. Dr. Spiegel shared U of C Medicine protocols for the procedures.

Dr. Ward shared Rush University Medical Center's playbook for treating COVID patients and walked through the ways in which the Rush ED has modified its protocols to adapt to the influx of Chicago patients with suspected COVID.

The inaugural webinar in the series in March featured Dr. Wang sharing his own data and



experiences leading NorthShore University HealthSystem hospitals. Additional webinars will be presented by Dr. Wang as long as there is interest; watch your email for information about the next in the series.

IDPH Offers Guidance on Managing Sexual Assault, Domestic Violence Emergency Services During Pandemic

Illinois hospitals work closely with Illinois Coalition Against Sexual Assault (ICASA) rape crisis centers across the state to provide trauma-informed care and treatment for sexual assault survivors pursuant to the Sexual Assault Survivors Emergency Treatment Act (SASETA), 410 ILCCS 70. Hospitals also play an integral part in delivering treatment and care for domestic violence survivors.

In order to reassure survivors that hospital emergency departments (EDs) are safe, equipped, and ready to provide treatment for sexual assault and domestic violence during the COVID-19 outbreak, the Illinois Department of Public Health, in consultation with ICASA, the Illinois Health and Hospital Association, and the Illinois Coalition Against Domestic Violence, offers the following guidance.

Safety Is Top Priority in the Emergency Department

As hospitals continue to implement enhanced safety modifications in treatment areas in response to the COVID-19 pandemic, including the ED, they should work closely with rape crisis centers and domestic violence organizations to reassure sexual assault and domestic violence survivors that EDs are prepared to deliver safe care. Advocates will continue to encourage sexual assault survivors to seek medical treatment and evidence collection at hospitals pursuant to SASETA.

Provide Care to Sexual Assault and Domestic Violence Survivors in an Alternate Location Within the Hospital in Proximity to the Emergency Department

Hospitals have already reorganized aspects of

their ED in an effort to handle an increase in COVID-19 patients and ensure the safety of all patients. Hospitals should also implement reorganization strategies, as appropriate, within the ED with a focus on effectively managing the delivery of medical forensic services under SASETA, particularly as to the location within the hospital where medical care and evidence collection is provided for a sexual assault and domestic violence survivor. In compliance with the federal Emergency Medical Treatment and Labor Act, 42 CFR 489.24, each hospital can evaluate its facility's layout to extend triage and care for sexual assault and domestic violence survivors, within proximity of the ED, to provide the required medical emergency examination, treatment, and evidence collection away from the main ED.

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Congratulations to ACEP Leadership, EMRA Med Student Award Winners

Two ICEP members have been honored at the national level in 2020 with awards from ACEP and EMRA. Congratulations to Adnan Hussain, MD, of Chicago, and Lena Carleton, MS-4, also of Chicago.

Community Emergency Medicine Excellence Award

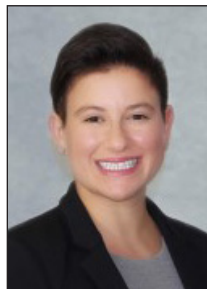
The recipients of ACEP's Leadership and Excellence awards for 2020 have been announced, and ICEP is proud to congratulate Dr. Hussain for receiving the Community Emergency Medicine Excellence Award.

The Community Emergency Medicine Excellence Award was created in 2018 to recognize individuals who have made a significant contribution in advancing emergency care and/or health care within the community in which they practice.

Dr. Hussain is a community-based ED medical director at Amita Health Saint Joseph Medical Center. His experiences unite perspectives of local and health system environment challenges,



**Adnan Hussain,
MD**



**Lena Carleton,
MD**

es, candid views from community doctors, and associated constructive countermeasures.

Dr. Hussain studied health policy while attending the George Washington University School of Medicine and Health Sciences in Washington, DC, and has worked within the CMS Innovation Center and the U.S. Department of Health and Human Services. He completed his emergency medicine residency at Northwestern, graduating in 2017.

Outstanding Medical Student Award

The recipients of the ACEP/EMRA National Outstanding Medical Student Award were also announced. Lena Carleton, MD, who is starting at the University of Illinois EM residency this summer, is one of the five recipients in 2020. This award honors exceptional fourth-year medical student ACEP/EMRA members who demonstrate humanism, leadership, service, research and academic excellence.

Dr. Carleton graduated from Florida International University Herbert Wertheim College of Medicine this spring. Dr. Carleton is the assistant vice chair of the EMRA Social EM Committee for 2020-2021.

The awards are planned to be presented in the fall, at the ACEP20 awards ceremony and the EMRA Medical Student Forum in October (pending pandemic modifications). The full list of ACEP's 2020 awards recipients is available at: ACEP.org/who-we-are/acep-awards/leadership-and-excellence/acep-leadership-and-excellence-awards/2020-award-winners/

IDPH Offers Guidance on Managing Sexual Assault, Domestic Violence Emergency Services During Pandemic

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Advocates at rape crisis centers and domestic violence agencies, when possible, will telephone the hospital ahead of the survivor's ED visit to give notice of the need for a sexual assault forensic examination or evidence collection. This enables the hospital to prepare to ensure a private, smooth, and timely transition of the survivor to the prescribed treatment area.

When possible, hospital personnel will connect survivors with the closest rape crisis center or domestic violence agency if the survivor has not already done so.

Consult Visitor Guidance and Availability of Personal Protective Equipment (PPE) for Advocate Visitation

Hospitals are encouraged to determine the practicality of onsite visitation by the advocates from the rape crisis center or domestic violence organization based on public health guidance relating to visitors and the availability of PPE supplies. If the advocate cannot accompany the survivor, hospitals should arrange for telephone support during the survivor's hospital visit. Hospitals and advocates should stay in close contact regarding the hospital's visitation policy during the pandemic.

RESOURCES

List of hospitals identified as treatment hospitals for Sexual Assault Survivors:

<http://www.dph.illinois.gov/sites/default/files/publications/saseta-hospital-listing-feb-2020.xlsx>

List of rape crisis centers:

<http://icasa.org/crisis-centers>

List of domestic violence service providers:

<https://ilcadv.coalitionmanager.org/contact-manager/contact/publicdirectory?SearchProgramTypes=14>



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www.ilpmp.org

ICEP Physician Featured in ABC7 Chicago Documentary Set to Air This Weekend

Members Interviewed for Local, National Media COVID Coverage

ICEP member Shu Chan, MD, MS, FACEP, is one of the featured individuals in a new documentary produced by ABC7 Chicago that will air on Saturday, May 23 and again Sunday, May 26.



**Shu B. Chan,
MD, MS, FACEP**

The documentary, “ASIAN INFLUENCES: STANDING STRONG,” shines the spotlight on Chicago’s Pan-Asian American community and the uplifting ways the community is leading the way during the COVID-19 Pandemic.

This edition of ASIAN INFLUENCES focuses on the many positive stories in the time of COVID – Asian American heroes and organizations- stepping up and helping out during a crisis.

Dr. Chan, who has worked at AMITA Health Resurrection Medical Center for 40 years, will talk about what it’s like to be on the frontlines in the fight against COVID-19. The segment includes footage of Dr. Chan working an intense ER shift. Dr. Chan also recounts how his wife and the Chinese community rallied to bring \$80,000 of PPE to AMITA and other Chicago

area hospitals.

ASIAN INFLUENCES: STANDING STRONG will be available on-demand at abc7chicago.com.

Member Media Round-Up

Dr. Chan’s feature is the latest media spot featuring ICEP physicians talking about a wide variety of issues related to the COVID-19 pandemic.

Other recent pieces in both local and national media sources include:

- WBEZ Investigation on delays in seeking health care – with Yanina Purim-Shem-Tov, MD, MS, FACEP
- WGN-TV, WBEZ Reset, The 21st by Illinois Public Media Panel, and Illinois Newsroom interviews with Dr. Wang
- ABC7 Chicago feature on mental health stresses for health care workers – featuring Christopher Colbert, DO, FACOEP, FACEP
- Daily Herald feature on Dr. Kaleem Malik
- NBC 5 Chicago on high-flow nasal cannula at U of C – featuring Tom Spiegel, MD, MBA, MS, fACEP
- ABC News on disparities faced by black communities – featuring Garth Walker, MD, FACEP



- Chicago Tribune feature on Rush University Medical Center – featuring Paul Casey, MD, FACEP, and Dr. Purim-Shem-Tov
 - CBS This Morning – featuring Scott Samlan, MD, FACEP
 - Chicago Tribune ‘Perspective’ article – written by Carrie Mendoza, MD, FACEP
- For a list and links to these interviews and articles, visit ICEP.org/covid19.

ICEP wants to create a more complete media round-up! We know many members have been interviewed that haven’t come to our attention. If you have been featured in a media spot, please send the link to Kate Blackwelder at kateb@icep.org. It will be added to the ICEP website and shared on social media.

World Emergency Medicine Day is May 27

World Emergency Medicine Day is May 27. Its mission to “build awareness about the need for well developed, well prepared and well organized emergency medical systems everywhere in the world” has never been more timely.

The aim of this day, as introduced and promoted by the European Society for Emergency Medicine (EUSEM), is to unite the world population and decision makers to think and talk about emergency medicine and emergency medical care.

The theme of EM Day 2020 focuses on the shortage of emergency medicine professionals

and services. The Covid-19 pandemic has made this shortage even more evident.

Get involved in the mission by visiting <https://emergencymedicine-day.org> and uploading an end-of-shift selfie that includes your name and shift clock-out time to show your endurance and “ask for more” — more doctors, more nurses, and more services for better emergency care worldwide. Share your post on social media with hashtag #emergencymedicineday.

Although the campaign originated in Europe, it is supported in the United States by partners that include ACEP and SAEM.



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For more information, contact:

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ACEP's Virtual Hill Day a Success

Eighteen ICEP members participated in ACEP's Virtual Hill Day on April 28 and discussed PPE, liability protection, hazard pay and coverage for emergency services with legislators including Sen. Tammy Duckworth and her staff. Virtual Hill Day replaced the Leadership and Advocacy Conference that usually takes place in Washington, D.C. LAC will reconvene in D.C. in 2021.

Thank you to Drs. Alejandro Palma, Adnan Hussain, John Mulligan, Adam Rodos, Ernest Wang, Viktoria Tannenbaum, Howie Mell, Justine Seidenfeld, Zach Jarou, Samantha Hay, Sheila Bonaguro, Elizabeth Giblin, Emily Ollman, and Sarah Iqbal for being part of this special event. The program was held via Zoom.



Spring Symposium Online Course Available

The educational content of the Spring Symposium is available now in a pre-recorded online format, free for all ICEP members, to allow you to complete the course and earn CME hours on your own time and schedule. Register now at [ICEP.org/2020spring](https://www.icep.org/2020spring).

The program focuses on emerging effects of legalized drugs of recreation, featuring keynote speakers Trevonne Thompson, MD, FACEP, FACMT, on cannabis legalization, and Dan McCabe, MD, on vaping-

associated lung injury. The program also includes an ICEP update and the statewide research showcase.

The virtual program is presented as 5 narrated PowerPoint-based videos and 15 post-test assessment questions with 5 knowledge check questions to earn 2.50 hours of *AMA PRA Category 1 Credits*[™]. The CME will be available to claim now through May 2021. To register at [ICEP.org](https://www.icep.org), you will need to create a new account (your ACEP login will not work).





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Presidency During the Pandemic

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Finally, it is critically important that we use a strong singular voice to continue to push our elected officials and health systems to work harder ensure that all of our health care workers have better access to the PPE we need to safely take care of patients. Healthcare workers have the fundamental right to the armor they need to do their heroic work.

5) The disease continues to change and will change health care in ways we do not yet even know. Remember when we were being told that COVID-19 only affected the old and the infirm with pre-existing conditions? By now, most of us know that there is a unsettling randomness to the way this virus affects its hosts. And now with the development of pediatric multisystem inflammatory syndrome, children are at risk as well. With a second wave of disease outbreak likely in the fall/winter, there are so many uncertainties as to how big, how severe, and how potentially deadly it might be.

One thing is clear: COVID-19 has ripped the frayed bandages off the U.S. health care system, exposing its strengths and significant weaknesses. My hope is that our society and profession will come out on the other side stronger, more patient focused, more empathetic, and motivated to improve health care delivery for all.

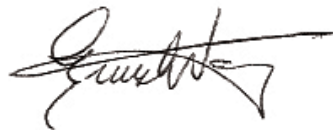
As I conclude my presidency, I would like to thank the Illinois College of Emergency Physicians for the opportunity to serve the emergency physicians in the state of Illinois this year.

Thanks to Lora Finucane, Kate Blackwelder, Mary McNicholas, Tammy Swanson, Sandy Liu, and Sue McDonough for all their administrative support. Special thanks to Executive Director, Ginny Kennedy Palys, for her years of leadership, perspective, and guidance.

The novelist James Allen wrote that “adversity does not build character, it reveals it.” I could not be more proud of what this global crisis has revealed about our profession and about this organization.

I know we will be in good hands under the leadership of Dr. Henry Pitzele, the ICEP officers, and the Board of Directors and I am unequivocally bullish about their ability to lead the way forward.

Respectfully,



— **Ernest Wang, MD, FACEP**
Past President, ICEP

Alvin H. Baum Family Fund Chair of Simulation and Innovation
Assistant Dean for Medical Education
Chief of Emergency Medicine
NorthShore University HealthSystem
Professor, Emergency Medicine
University of Chicago Pritzker School of Medicine

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ICEP Calendar of Events 2020

POSTPONED EVENTS

(ICEP is working to reschedule cancelled courses and will announce new dates ASAP)

April 6-7, 2020

Oral Board Review Courses

April 17, 2020

**Emergent Procedures
Simulation Skills Lab**

UPCOMING EVENTS

(Subject to change)

June 1, 2020

**Deadline to Submit
Resolution Proposals for
ICEP Board Consideration**

June 8, 2020

**ICEP Board of Directors
Meeting**
Via Zoom

August 27, 2020

Resident Career Day
Northwestern Memorial
Hospital, Chicago
Via Zoom - details to be
announced in June issue
of EPIC!

September 10-11, 2020

Oral Board Review Courses
Chicago O'Hare Marriott
Hotel, Chicago

October 2, 2020

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

November 17, 2020

**2020 EM4LIFE LLSA Article
Review Course**
ICEP Conference Center,
Downers Grove

December 2, 2020

**Ultrasound for Emergency
Medicine**
ICEP Conference Center,
Downers Grove

**See the latest information about ICEP offerings at
ICEP.org and follow on Facebook and Twitter!**





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together on the
front lines.

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Stronger together means leadership by front-line physicians and advanced providers. We are a physician-led and -owned partnership united by compassion and collaboration. Our clinicians deliver integrated acute care at practice sites across the nation, working together to achieve our greatest goal: *saving lives*.

Learn how Vituity's clinicians are fighting
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