

## 2022 ICEP Board of Directors Candidate Profile

### Doreen Agboh, M.D.

**Title and Place of Practice:** PGY-2 Emergency Medicine Resident, the University of Chicago

**Medical School (institution, city, state):** Rutgers New Jersey Medical School, Newark, NJ

**Residency (institution, city, state):** The University of Chicago, Chicago, IL

**ICEP Activities:** General Body Member

**ACEP Activities:** General Body Member

**Other Relevant Activities:** SAEM Ethics Committee 2022-2023, SAEM Equity and Inclusion Committee 2022-2023, Chief Resident 2022-2023.

**Practice Time:** Full-time Resident

**Conflict of Interest Disclosure:** I have no conflicts of interest to disclose.

**Please respond to the following question:**

**As an ICEP Board member, how should ICEP unite physicians from around the state, increase involvement in membership, and engage with current and potential ICEP members.**

*(Response limited to 300 words)*

To unite physicians from around the state, it will be critical for ICEP to take the views of its members and make sure that they are not only heard but followed by positive and purposed action. Ultimately, buy-in and increased participation will lean on taking the voices of our peers and advocating for policies that adequately address the needs and concerns of Emergency Medicine physicians throughout Illinois. I believe the policies should start from the bottom up—by first addressing active concerns of the Illinois Emergency Medicine community and implementing tailored practices and plans that best address the contingent concerns of ICEP's constituents. Overall, advocacy is pivotal in creating an environment where individuals feel welcome, heard, and accepted as pivotal members of the ICEP community. This can best be accomplished by spearheading discussions with Illinois physicians to evaluate which issues most affect our community.

As a prospective board member, I believe that it is of utmost importance to actively facilitate fruitful conversations between the ICEP members and the board, to bridge the gap on concerns relevant to Emergency Medicine, and ultimately champion for policies that would benefit our



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profession. Because of my experiences in leadership and community engagement, I envision myself as an individual who will be an equitable resource for ICEP members. I believe that serving on the ICEP board will provide me the opportunity to serve as a change maker on a statewide level and make multidimensional impacts that adequately address the needs of ICEP stakeholders. I look forward to the prospect of working in conjunction with other board members to serve as a platform for the vested interests and forward progression of ICEP.

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### Christian Casteel D.O.

**Title and Place of Practice:** PGY-1 Rush University Medical Center

**Medical School (institution, city, state):** Kansas City University of Medicine and Biosciences, Kansas City, Missouri

**Residency (institution, city, state):** Rush University Medical Center, Chicago, Illinois

**ICEP Activities:** N/A

**ACEP Activities:**

- ACEP Diversity Mentorship Initiative.

**Other Relevant Activities:**

- Rush Diversity, Equity, and Inclusion Committee Programming Director
- EMRA Social Emergency Medicine Committee Assistant Vice-Chair

**Practice Time:**

NA

**Conflict of Interest Disclosure:**

None.

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*(Response limited to 300 words)*

In the digital and pandemic age, I believe an important and useful medium for this would be social media. It is hands down the most practical and efficient way to engage and reach the largest amount of people scattered across a large geographic region. The large portion of my academic accomplishments/memberships were achieved in part by discovering them on social media or connecting with others via social media who were involved. Membership, important dates, timelines, medical student opportunities, all can be published on social media platforms and shared individually by members reaching the largest possible audience. There is also utility for ICEP to mediate communication between EMRA as well as individual IL based medical school through an ICEP medical student council (if one does not already exist). This way



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communication can be off loaded and distributed among multiple sub-sections of ICEP to reach more people. Each medical school having an ICEP liaison that communicates to the ICEP medical student council that communicates with the ICEP Board etc.

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### Jose Reyes, MD

**Title and Place of Practice:** Resident Physician, Cook County Health and Hospital Systems

**Medical School (institution, city, state):** Johns Hopkins University School of Medicine, Baltimore MD

**Residency (institution, city, state):** Cook County Health and Hospital Systems, Chicago IL

**ICEP Activities:** Advocacy Day participant

**ACEP Activities:**

- 1) EMRA Advocacy Handbook Chapter Author
- 2) ACEP 911 Network Member
- 3) EMRA Health Policy and Diversity and Inclusion Committee Member

**Other Relevant Activities:**

- 1) House Staff Association of Cook County Secretary followed by Vice President
- 2) Cook County EM Diversity and Inclusion Committee Member
- 3) Founder of the Cook County Initiative on Quality Improvement Project for Survivors of Sexual Assault
- 4) Cook County EM Book Club Founder and Leader

**Practice Time:** 2 Years (PGY-2)

**Conflict of Interest Disclosure:** Attached. No disclosures to report.

**Please respond to the following question:**

As an ICEP Board member, how should ICEP unite physicians from around the state, increase involvement in membership, and engage with current and potential ICEP members.

*(Response limited to 300 words)*

With many graduating Illinois EM residents staying within the state, I believe an effective method of maintaining membership is through early engagement. To increase engagement throughout the state, I would like to make the following changes. First, I would update the Resident and Young Physicians section of the ICEP website to include new EMRA/ACEP



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activities, and I would add a section describing state-wide volunteer activities or projects which would benefit from resident support, such as assisting in the implementation of the new 988 legislation. This would allow for recruitment of residents and a mechanism by which community leaders and attendings could interact with learners throughout the state. Secondly, I would implement a series on social media which would highlight residents and faculty from throughout the state, which would allow for ICEP members to discuss the work and successes of their colleagues state-wide. Thirdly, I would propose the development of an ICEP mentorship program surrounding ICEP's current committees which include Education, EMS, Finance, Patient and Physician Advocacy, Research, and Social EM. This would promote the professional interests of residents and allow for collaboration unhindered by location or institution. Additionally, this would allow the potential to grow volunteer and professional opportunities already in existence. Cumulatively, these activities would increase engagement throughout the year, increasing our presence outside of seasonal activities such as regional and national conferences. With these activities creating opportunities for partnership, ICEP further becomes a resource for growing professional and personal goals of individual members, and together promoting our state as a leader in emergency medicine.