

WILEY



## ACEP14 Daily News

McCORMICK PLACE CHICAGO, ILLINOIS OCTOBER 27-30, 2014 WWW.ACEP.ORG/ACEP14

#### **MONDAY ISSUE**

## IGNITE! INFORMATION IN A FLASH

These short presentations are a great way to find out about ACEP member benefits and get updates on the latest issues facing the College and emergency medicine. Get the full schedule in your Onsite Program.

9:45 A.M.: *Think Like a Freak*Author Book Signing

Steven D. Levitt and Stephen J. Dubner

## 10:30 A.M.: Cardiovascular Emergencies Author Book Signing

Amal Mattu, MD, FACEP; William J. Brady, MD, FACEP; Michael J. Bresler, MD, FACEP; Scott M. Silvers, MD, FACEP; Sarah A. Stahmer, MD; Jeffrey A. Tabas MD, FACEP

## 11:30 A.M.: Member Benefit Spotlight: Medical Translation Apps

Raj Jhaveri, Canopy Apps

### 2:30 P.M.: Being an Ethical and Effective Expert Witness

Jennifer L'Hommedieu Stankus, MD, JD

3 P.M.: Five Strategies to Effectively Use Online Resources in Emergency Medicine

Nikita Joshi, MD

## DON'T BE CAMERA SHY-COME ON BY!



Studio ACEP14 opens Monday at 8 a.m. just outside the Exhibit Hall and doesn't shut down until the camera calls it quits at 4 p.m.

Get your picture taken by a professional photographer, and we'll send you the finished digital

rapher, and we'll send you the finished digital headshot after the convention, absolutely free. Use it for your LinkedIn page, Facebook profile, or however you would like. While you're there, please help ACEP with some promotional images. If you've seen some of your colleagues in our advertisements or conference promotions throughout this past year, it's because they stopped by the studio and spent a couple of minutes with our marketing team.

While you're there, please give us a video testimonial as well. If you saw our "Most Interesting Emergency Physician in the World" videos over the summer, you've seen that our video team likes to have fun. What's on your mind? What's your favorite ACEP member benefit? What do you love about emergency medicine? Say it for the camera. We very much appreciate the help.



**WELCOME FROM THE PRESIDENT** 

## Mental Health Resources, Liability Reform, and More on Tap for Coming Year

by MICHAEL J. GERARDI, MD, FAAP, FACEP

**ELCOME TO CHICAGO AND ACEP14!** This meeting is the one time each year that we take a moment to network with our colleagues from all over the United States and around the world. It is a time for outstanding CME, and more important, it is a time to be reenergized to practice, manage, and promote our fantastic specialty.

As your new President, I personally want to invite you to try to attend as many Section and Committee meetings as possible so that you can appreciate the breadth and depth of the interests of our members and colleagues from other disciplines. Please also note that I am gratefully accepting the baton of leadership from Immediate Past President Alex Rosenau, DO, CPE, FACEP, in a continuous, sustained, multiyear effort on our specialty's behalf to attain our goals.

**CONTINUED** on page 2

#### **COLIN C. RORRIE, JR. LECTURE**

#### ACA UNRAVELED: Obamacare From the Emergency Medicine Perspective

by RICHARD QUINN

f anyone can communicate to a room full of emergency physicians the importance of the Affordable Care Act (ACA) and what it means to the specialty, it's Steven Stack, MD, FACEP, an emergency department medical director in two states who currently practices in Lexington, Kentucky, and president-elect of the American Medical Association (AMA). He will deliver the Colin C. Rorrie, Jr. Lecture at ACEP14. "In the United States if you have no health insurance, it's a cash economy for health

**CONTINUED** on page 2



CELEBRATE YOUR SPECIALTY ON MONDAY NIGHT

SEE PAGE 3

## See the Latest at innovatED

CEP14 attendees, get ready for a treat in the Exhibit Hall Monday through Wednesday-innovatED is amped up and ready for a successful sophomore campaign. Presented by Janssen Pharmaceuticals and Durata Therapeutics, this space features more than 40 companies in a self-guided tour of the latest emergency medicine technology and services. To make this experience even more enjoyable, download the innovatED mobile app, available in the App Store, via Google Play, or through the ACEP14 mobile guide app. The Exhibit Hall opens at 9:30 a.m. each day and closes at 3:30 p.m.

TURN TO PAGE 6
for a guide to the
emergency medicine
cutting-edge
innovators and
thought leaders
making innovatED
the place to be in
Chicago.

#### **OPENING SESSION**



FREAKY OR FACTS:
The
Economics
of Health
Care

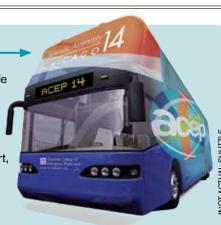
#### Back and Forth

huttles will be available at all ACEP14 hotels except the Hyatt Regency, which is within a short walk of the McCormick Place convention center. Signs will indicate the location of shuttle pickup each day. Shuttles will be available:

Monday: 6:30 a.m.-6:30 p.m. Tuesday: 6:30 a.m.-6:15 p.m. Wednesday: 6:30 a.m.-6:15 p.m. Thursday: 6:30 a.m.-1:30 p.m. Shuttles will also be available for the kickoff and closing parties. Check the ACEP14 mobile app for the most current schedules.

When returning to the airport, be sure to take advantage of travel discounts with ShuttleExpress.

Find out more at www.acep.org/saContent.aspx?id=91034.





#### FROM THE PRESIDENT | CONTINUED FROM PAGE 1

Let me take this opportunity to share with you some of the major initiatives that our College supported by Committee members, staff, the Board of Directors, and perhaps your assistance will be working on this year as we adjust to health care reform and the Affordable Care Act (ACA).

- In accordance with the ACEP strategic plan, we want our members to receive great benefits and services that are personalized for our interests and where we are in our careers. We also want to find ways to enhance emergency department operations to ensure long, fulfilling careers. This includes ways to support emergency physicians moving to and working in relatively underserved areas, such as rural and inner-city sites.
- Our members have been decrying the lack of access to mental health resources for psychiatric and drug-dependent patients. We have already begun to convene a coalition of specialists and medical societies to investigate programs that have been successful in certain parts of the country. We will then build upon those models and attempt to promulgate them nationally.
- In an ACA era, it is paramount that ACEP delineates and promotes the incredible value we provide in caring for patients 24-7-365. We need to help drive health care reform in our role as incredibly adept diagnosticians who execute efficient workups and timely initiation of critical care. On the other hand, we also have to be stewards of resources and recognize when care would be considered ineffective and extraordinary, such as at the end of life.
- As we ride the tumultuous waves in the rapids of health reform, we have to advocate for our patients and ourselves to receive fair treatment from insurance payers. We will fight against balance-billing prohibitions for out-of-network care and work relentlessly for adequate compensation for our physicians negotiating in-network participation rates. ACEP will

There is no better time than now to discuss tort protections companies and federal/state government for emergency physicians who attempt to eliminate the wasteful expense created by defensive medicine.

- also be working with our Government Affairs Office and our Reimbursement Committee experts to have a reasonable and logical resolution to the confusing and inconsistent regula $tions\ created\ by\ the\ Centers\ for\ Medicare\ \&\ Medicaid\ Services\ regarding\ the\ two-midnight$ rule, the three-day-stay rule, and observation versus admission status.
- Finally, we will continue to work for meaningful tort reform by promoting the Health Care Safety Net Enhancement Act of 2013 (H.R. 36/S. 961), which will encourage physicians and on-call specialists to continue their lifesaving work and ensure that emergency medical care will be available when and where it is needed. Specifically, the legislation addresses the growing crisis in access to emergency care by deeming emergency and on-call physicians who provide EMTALA-related services as federal employees under the Public Health Safety Act only for the purpose of providing liability protection. In addition, with the ACA's stated goals to improve outcomes while decreasing costs, there is no better time than now to discuss tort protections for emergency physicians who attempt to eliminate the wasteful expense created by defensive medicine. We need to demand tort protections when we follow accepted standards of practice supported by clinical policies and guidelines promulgated by specialty societies such as ACEP.

This is an exciting time in medicine and a time with great challenges. Because of the critical and central roles our specialty plays in the acute and unscheduled care of 140 million patients every year, we have incredible opportunities to advance emergency medicine.

Please enjoy your educational courses at ACEP14, but also take time to engage with our members on committees and sections, as well as our colleagues supporting our specialty in the Exhibit Hall. Please make ACEP14 a catalyst for you to become an active member, promoting our specialty on behalf of our patients and colleagues. •

DR. GERARDI is President of ACEP and an emergency physician at Morristown Medical Center and Goryeb Children's Hospital in Morristown, New Jersey.

#### ACA UNRAVELED | CONTINUED FROM PAGE 1

care, which means no coverage, no care," he said. "And we know for an undeniable fact that people with no health insurance live sicker and die vounger."

Dr. Stack will talk about the ACA's impact on insurance coverage, current trends, and expected developments that affect emergency physicians. "What we should want as emergent specialists [is for] patients to have...the right care in the right place at the right time," Dr. Stack said. "Sometimes that's the emergency department, sometimes that's a primary care office, sometimes that's

**COLIN C. RORRIE, JR. LECTURE** 

The ACA: The Rocky

Monday, Oct. 27 12:30-1:20 p.m. Skyline Ballroom W375C

a specialist. Sometimes we bristle, often rightfully, in the emergency community when others say, 'The ER is too expensive. You just keep people out of the ER, and everything will be great.' Any competent emergency physician knows that that's a false way to look at that challenge." •

**RICHARD QUINN** is a freelance writer in New Jersey.

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Ask anybody who has been before-ACEP knows how to throw a party. This year, we've teamed up with Emergency Consultants, Inc., to kick off your week of fun and education.

KICK OFF A GREAT WEEK by visiting one of the most recognizable venues in all of Chicago: the renowned Navy Pier Grand Ballroom. Emergency Consultants, Inc., presents the ACEP14 Kickoff Party 7:30 p.m.-midnight on Monday and promises to give your social itinerary a jolt. This special night introduces you to part of the pier's original 1916 construction. The Grand Ballroom's sweeping 80-foot domed ceiling and panoramic lakefront views are the perfect backdrop for an unforgettable Windy City bash. ACEP14 registrants

are invited to enjoy live music, dancing, and hors d'oeuvres.

Drink tickets are available for this event, and shuttles will be provided to and from most hotels in the official ACEP14 hotel block.

#### OPENING SESSION

## **FREAKY OR FACTS:** The **Economics** of Health Care

by RICHARD QUINN

teven Levitt and Stephen Dubner, the famed authors of international best-seller Freakonomics and its successor, SuperFreakonomics, will talk about the unique nexus of health care and economics in the Opening Session of ACEP14.





Steven Levitt

Stephen Dubner

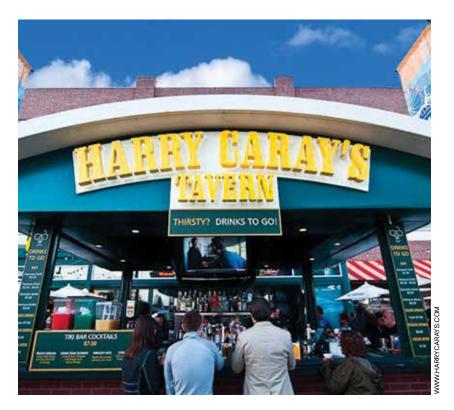
**OPENING SESSION** Monday, Oct. 27

8-9:30 a.m. Skyline Ballroom W375ABC

And who better to speak about economics and health care than these two? Levitt is the William B. Ogden Distinguished Service Professor of Economics at the University of Chicago, where he directs the Becker Center on Chicago Price Theory. In 2006, he was named one of Time's 100 People Who Shape Our World. Dubner is an award-winning author, journalist, and TV and radio personality who has been published in The New York Times Magazine, The New Yorker, and Time. •

**RICHARD QUINN** is a freelance writer in New Jersey.





## ICEP and SEMPA Reception Set for Monday at Harry Caray's

oin the Illinois College of Emergency Physicians (ICEP) and the Society of Emergency Medicine Physician Assistants (SEMPA) on Monday, 6–7:30 p.m., at Harry Caray's Tavern at the historic Navy Pier for their reception. Past, present, and prospective ICEP and SEMPA members are welcome.

Network with colleagues and leaders from each organization to learn more about what they have to offer you.

ACEP leaders are also encouraged to join this must-attend event. There is no need to RSVP. Simply come by and spend some time with ICEP and SEMPA before the ACEP Kickoff Party. Hors d'oeuvres will be served and a cash bar will be available.

ICEP and SEMPA look forward to seeing you there!





## Put Cocktails & Culture on Monday's Agenda

#### MONDAY, 6:30-8 P.M. ART INSTITUTE OF CHICAGO

Join major donors and VIPs of the Emergency Medicine Foundation (EMF) for private access to the number-one museum in the United States: the Art Institute of Chicago. This event features docent-led tours with exclusive access to exhibits and a first-class reception with wine and hors d'oeuvres. ACEP members and exhibitors may purchase Cocktails & Culture tickets for \$150 at the Resource Center inside the Exhibit Hall, at the ACEP14 registration desk, or at the EMF Major Donor Lounge. Shuttle buses will pick up from the Chicago Hilton, Hyatt Regency McCormick Place, and Palmer House the Hilton from 6–7 p.m. every 15–20 minutes. The buses will depart the Art Institute for the ACEP Opening Party at Navy Pier from 7:30–8:30 p.m. every 15–20 minutes. To learn more about becoming a VIP donor or about the Wiegenstein Legacy Society, contact Tanya L. Downing at tdowning@acep.org or call 800-798-1822, ext. 3216.

#### Don't Forget These EMF Offerings

## EMF MAJOR DONOR LOUNGE (BY INVITATION)

MONDAY, OCT. 27-WEDNESDAY, OCT. 29 7:30 A.M.-4:30 P.M.

McCormick Place West, Central Concourse, Level 3

EMF donors who have given \$1,000 or more since Jan. 1, 2014, and Wiegenstein Legacy Society Members are invited to enjoy this relaxing private setting with refreshments, a computer, printer, and charging stations. Donors also can receive financial-planning advice and pick up donor ribbons and pins.

#### **EMF SILENT AUCTION**

MONDAY, OCT. 27-WEDNESDAY, OCT. 29

7:30 A.M.-5:30 P.M.

McCormick Place, Level 3

Stop by the EMF Silent Auction to bid on hundreds of items, with proceeds benefiting EMF. Items include once-in-alifetime experiences; sports, music, and celebrity memorabilia; jewelry; vacation getaway packages donated by members; and more.

### MEMBERS, YOU'VE BEEN CHALLENGED

Just because the Council Meeting ended Sunday doesn't mean that attention to EMF diminishes—quite the contrary! EMF encourages the ACEP membership to meet or beat the amount of donations pledged to EMF during the Council Challenge.



#### **FACEP Means More**

You have to get up pretty early in the morning to be a Fellow of the College. In an invitation-only ceremony at 7 a.m., the 2014 Class of Fellows will be honored at the Fellows Convocation breakfast in the Hyatt McCormick Place Regency Ballroom, Second Floor. The event rec-



Dr. Rosenau

ognizes those who put in the work, joined their mentors and colleagues, and earned the FACEP designation.

ACEP Immediate Past President Alex M. Rosenau, DO, FACEP, is scheduled to speak. This event also will feature a video about the FACEP designation, and 2014 Fellows will be presented

with their medals. Fellows also will be recognized during the Opening Session and will have reserved seating. Congratulations to the 2014 Class of Fellows!



## **CONNECT YOURSELF**

Wireless access is free. Join the "ACEP14" network.

#### **FACEP Lounge Open**

Take a break during your busy days at ACEP14 with a few minutes in our exclusive FACEP Lounge. Relax with light refreshments,



get some work done with access to a printer and electrical outlets for charging, and use the quiet space as a respite or a meeting place to gather with friends. Located in W182, the FACEP Lounge is open 7:30 a.m.–4:30 p.m., Monday through Wednesday, and 7:30 a.m.–1:30 p.m. Thursday.



## **Get Social at** ACEP14

e don't drive the social media train at ACEP14you do. How was that session? What's coming up next? Can you believe what that speaker just said? Fill our social media with great information by posting tweets using #ACEP14. Follow @ACEPnow, and remember to check out www.facebook. com/ACEPfan for updates and images from parties and special sessions.

This year, your posts mean even more. We will be monitoring social media and other instant feedback channels today, and the course that has the most buzz will be delivered as an encore presentation tomorrow at 3:30 p.m. in the Skyline Ballroom, W375A. Never miss the day's most popular session again!

#### **ACEP14 TWEETS**

#### **GEMA (@GEMAsocial)**

Check out a full list of all the international happenings at ACEP 14! http://globalem.net/content/international-meetings-acep14 #ACEP14 #internationalEM

#### **Bryan D. Hayes** (@PharmERToxGuy)

Will be attending ACEP for the first time this year. Looking forward to meeting all of those I've learned from along the way. #ACEP14

#### Edward Lew (@elewMD)

Sneak peak ACEP with @njoshi8 analog to digital. We are in the "creative class" in medicine. #emconf #ACEP14 #FOAMed

#### **EM Residents (EMRA)** (@emresidents)

Dr. Chris Ziebell will participate in EMRA Res Lunch Panel at #acep14. He was featured in Austin news @ ebola http://kxan.com/2014/10/01/ austin-hospitals-prepare-for-ebola put-new-steps-in-place/

#### David Mahvi, MD (@DavidMahviMD)

Congrats Dr. Jordan Kaylor NUEM '16 for earning the #ACEP14 QIPS Resident QI Award for his project, "Airway & Sedation QI in the ED"



Dave Pomeranz, MD, Ryan McGarry, MD, at bedside.

the offering of gifts, gratuities, or meals to federal government

information in compliance with FDA requirements for communications at

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Pharmaceuticals Inc.

#### Code Black Movie Shown at ACEP14

ACEP14 guests attend an get exclusive viewing of the emergency department documentary, Code Black. Screenings will take place at 2:30 and 4:30 p.m. Monday in Room W470B in McCormick Place West, and at 3 and 5 p.m. Monday in Continental B at the Chicago Hilton. Code Black is the story of emergency physician and documentary filmmaker Ryan McGarry, MD. The film, which chronicles life in the ED at University of Southern California Los Angeles County General Hospital, has been featured in several news outlets, and a pilot based on the film is being considered by a national television network.

#### PLEASE JOIN US FOR A Lunch Product Theater Presentation

**During the ACEP14 Scientific Assembly** 

## **Closing the Gap** on Thrombotic **Events**

Wednesday, October 29, 2014 11:30 AM - 12:15 PM

McCormick Place West **Exhibit Hall** Chicago, Illinois

#### **PRESENTER**

Gregory J. Fermann, MD, FACEP Professor and Executive Vice Chairman **Director, Clinical Trials Center Department of Emergency Medicine** University of Cincinnati Cincinnati, Ohio

#### PROGRAM DESCRIPTION

This lecture will discuss treatment options for patients with deep vein thrombosis and pulmonary embolism, and how they can reduce the risk of recurrent thrombotic events.



October 2014

020410-140822

SPECIAL ADVERTISING SECTION



# WHO'S DRIVING CHANGE AT

## innovatED?

omebody has to take charge, lead, come up with something new. Where is that person? You can find several of the trailblazers in the Exhibit Hall at innovatED. This space features products and services vetted by a team of emergency physicians and showcased working together in a true-to-life environment. Engage in dialogue with the companies and experience the current thinking, departmental design solutions, cutting-edge products and services, and best practices driving change in the ED. This experience is particularly valuable for those looking to rebuild their emergency medicine services or bring their facility up to speed on new technologies.

Who's driving change in EM? The people and companies listed here.

Presenting Supporters





## **Janssen Pharmaceutical Companies** of Johnson & Johnson

#### www.janssenpharmaceuticalsinc.com

As a member of the Janssen Pharmaceutical Companies, Janssen Pharmaceuticals, Inc., is dedicated to addressing and resolving the major unmet medical needs of our time. Driven by our commitment to patients, health care professionals, and caregivers, we strive to develop sustainable and integrated health care solutions by working in partnership with all stakeholders on the basis of trust and transparency. Our daily work is guided by meeting goals of excellence in quality, innovation, safety, and efficacy in order to advance patient care.

#### **Durata Therapeutics**

#### www.duratatherapeutics.com

Durata Therapeutics, Inc. is an innovative new pharmaceutical company focused on the development and commercialization of differentiated therapeutic solutions for physicians and other providers to advance patient care in infectious disease and acute illnesses.

Durata's lead product, DALVANCE (dalbavancin) for injection, was approved by the U.S. Food and Drug Administration (FDA) on May 23, 2014, for the treatment of adult patients with acute bacterial skin and skin structure infections (ABSSSI). It was the first drug approved as a qualified infectious disease product, and became available for order on July 18, 2014.

"DALVANCE's unique dosing regimen offers a new alternative for the treatment of serious skin infections by allowing patients, healthcare professionals, and hospitals to move beyond the standard daily or twicedaily IV antibiotic infusions," said Paul R.

See the latest technology and patient care services in a real-life setting at innovatED.

Edick, Durata's CEO. "We are very pleased that DALVANCE is now available to millions of Americans who may benefit from this innovative treatment option for ABSSSI."

## IMPORTANT SAFETY INFORMATION

#### **Contraindications**

DALVANCE is contraindicated in patients with known hypersensitivity to dalbavancin.

#### **Warnings and Precautions**

Serious hypersensitivity (anaphylactic) and skin reactions have been reported with glycopeptide antibacterial agents, including DALVANCE; exercise caution in patients with known hypersensitivity to glycopeptides.

Rapid intravenous infusion of glycopeptide antibacterial agents can cause reactions, including flushing of the upper body, urticaria, pruritus, and rash.

ALT elevations with DALVANCE treatment were reported in clinical trials.

Clostridium difficile-associated diarrhea (CDAD) has been reported with nearly all systemic antibacterial agents, including DALVANCE. Evaluate if diarrhea occurs.

#### **Adverse Reactions**

The most common adverse reactions in patients treated with DALVANCE in Phase 2/3 clinical trials were nausea (5.5 percent), headache (4.7 percent), and diarrhea (4.4 percent).

#### **Use in Specific Populations**

In patients with renal impairment whose known creatinine clearance is less than 30 mL/min and who are not receiving regularly scheduled hemodialysis, the recommended two-dose regimen for DALVANCE is 750 mg followed one week later by 375 mg. No dosage adjustment is recommended for patients receiving regularly scheduled hemodialysis, and DALVANCE can be administered without regard to the timing of hemodialysis.

For more information about DALVANCE and for full prescribing information, visit www.dalvance.com.

#### Diamond Supporters

#### Covidien

#### www.covidien.com

Covidien is a leading global health care company innovating medical solutions focused on patient outcomes. Our comprehensive technologies for emergency medicine include intubated and nonintubated capnography, pulse oximetry, noninvasive positive pressure ventilation, airway accessories, and wound management supplies. Covidien Neurovascular offers technologies for specialists treating ischemic and hemorrhagic stroke,

#### SPECIAL ADVERTISING SECTION

including stentrievers, embolization coils, and flow diversion. Covidien is committed to providing clinicians the latest technology to treat patients. *Please visit www.covidien.com to learn more about our businesses*.

"Reducing disability and mortality for acute ischemic stroke is dependent upon rapid neurologic assessment by the emergency room physician and fast treatment to reverse ischemia to reperfuse at-risk brain tissue."

-Sam O. Zaidat, MD, MS, FAAN, FAHA, professor of neurology, neurosurgery, and radiology; director, Comprehensive Stroke Center; and chief, neuro-interventional division, Medical College of Wisconsin/Froedtert Hospital, Milwaukee

"I know because of what has not happened during the six years of using capnography; we have not only saved money, we've saved lives."

-Ray Maddox, MD, St. Joseph's/Candler Health System, Savannah, Georgia

## HKS, Inc. innovatED Designer

#### www.hksinc.com

For 74 years, HKS has nurtured a culture that reveres both innovation and customer focus. The firm's experience includes health care, commercial, sports, hospitality, government, aviation, educational, and retail projects. HKS has expanded its specialized health care design services by incorporating HKS Team ED into its offerings. Team ED provides health care clients with a full array of specialized services for emergency department design, including predesign consulting, operational and strategic planning, and simulation modeling.

#### **FUJIFILM SonoSite, Inc.**

#### www.sonosite.com

FUJIFILM SonoSite, Inc., is the innovator and world leader in bedside and point-of-care ultrasound and an industry leader in ultrahigh-frequency micro-ultrasound technology. Headquartered near Seattle, the company is represented by 26 subsidiaries and a global distribution network in more than 100 countries. SonoSite's portable, compact systems are expanding the use of ultrasound across the clinical spectrum by cost-effectively bringing high-performance ultrasound to the point of patient care. For more information, go to www.sonosite.com.

#### Genentech

#### www.genentech.com

Considered the founder of the industry, Genentech, now a member of the Roche Group, has been delivering on the promise of biotechnology for more than 35 years. At Genentech, we use human genetic information to discover, develop, manufacture, and commercialize medicines to treat patients with serious or life-

threatening medical conditions. Today, we are among the world's leading biotech companies, with multiple products in the market and a promising development pipeline.

#### **Masimo Corporation**

#### www.masimo.com

Masimo is a global medical technology company that develops and manufactures innovative noninvasive monitoring technologies, including medical devices and a wide array of sensors that may enable earlier detection and treatment of potentially life-threatening conditions. A key medical technology innovator, Masimo is responsible for the invention of award-winning noninvasive technologies that are revolutionizing patient monitoring, including Masimo SET® pulse oximetry, Masimo rainbow® noninvasive and continuous hemoglobin (SpHb)<sup>®</sup>, acoustic respiration rate (RRa)<sup>™</sup>, Masimo Patient SafetyNet™, SedLine® (EEGbased) Brain Function Monitors, and Phasein™ respiratory monitors.

## Mitchell Planning-Logistical Planning Services

#### www.mitchellplanning.com

Mitchell Planning Associates is the nation's oldest and largest independent equipment-planning firm, specializing in medical equipment planning, procurement, installation, and relocation services for health care providers across the United States and abroad. Mitchell leads clients through visioning of future technology and implementing innovative equipment solutions to meet design and construction schedules and budget goals.

#### Stryker

#### www.stryker.com

Stryker is one of the world's leading medical technology companies, and together with our customers, we are driven to make health care better. The company offers a diverse array of innovative medical technologies, including reconstructive, medical and surgical, and neurotechnology and spine products to help people lead more active and satisfying lives. Stryker products and services are available in more than 100 countries around the world.



Emergency physicians can test the newest innovations in this space at innovatED.

#### The Medicines Company

#### www.themedicinescompany.com

The Medicines Company's purpose is to save lives, alleviate suffering, and contribute to the economics of health care by focusing on 3,000 leading acute/intensive care hospitals worldwide. Its vision is to be a leading provider of solutions in three areas: acute cardiovascular care, surgery and perioperative care, and se-

rious infectious disease care. The company operates in the Americas, Europe, the Middle East, and Asia Pacific regions, with global centers in Parsippany, New Jersey, and Zurich, Switzerland.

"Our purpose takes us into the world of emergency and intensive-care medicine where our R&D is deeply focused. At innovatED, The Medicines Company has an exciting opportunity to demonstrate our simulations for treating certain skin infections and the reduction of blood pressure. We are enjoying our growing partnership with the American College of Emergency Physicians and look forward to a range of collaborations that enable us to together save lives, alleviate suffering, and improve health care efficiency."

-Clive Meanwell, MD, PhD, chairman and chief executive officer, The Medicines Company

#### **The Shams Group**

#### www.ShamsGroup.com

The Shams Group (TSG), a health care software and service provider, has served more than 400 hospitals and health care systems worldwide. It is headquartered in Dallas, with clients and operations in the United States, Canada, Asia, and the Middle East. With more than 25 years of health/IT experience, TSG offers both services and enterprise-wide solutions in areas of Meaningful Use–certified electronic health record (EHR) portals, business intelligence, speech recognition, and various smartphone/tablet-based mobile solutions to enhance your bottom line and improve your clinical outcomes.

#### Gold Supporters

#### **Elite Medical Scribes**

#### www.elitemedicalscribes.com

Elite Medical Scribes is the nation's preeminent vendor of fully integrated scribe services. Our above-industry-standard programs are tailored to the individual needs of every provider and location and are continuously optimized to deliver results. From recruitment to ongoing quality assurance management, Elite puts you—and, by design, your patient—first!

#### FreemanWhite, Inc.

#### www.freemanwhite.com

With experience in more than 280 emergency departments, FreemanWhite's ED planning and design expertise is unmatched. We partner with ED clinicians to create efficient, safe, beautiful facilities supported by lean operations. Our process mapping, computer simulation, scenario planning, budgeting, and

decision dashboard tools are unique to the industry and help clients prioritize investments.

#### **Innovative Trauma Care**

#### www.innovativetraumacare.com

The iTClamp $^{\mathbb{T}}$  is a hemorrhage control device used in the extremities, axilla, inguinal, and scalp. The device seals a wound to create a stable clot and stops bleeding. Preclinical trials showed the iTClamp to be superior to wound packing in patient survival, survival time, and total blood loss.

#### **MEDHOST, Inc.**

#### www.medhost.com/news-and-events/acep14

MEDHOST, Inc., is a provider of market-leading enterprise, departmental, and health care engagement solutions to approximately 1,000 health care facilities. Our solutions include intuitive, easy-to-use, and SaaS-enabled solutions that are changing how clinicians and hospital leaders work and communicate while generating notable operational, patient flow, care, and revenue improvements.

## National Association of Boards of Pharmacy

#### www.narxcheck.com

NARxCHECK is an automated prescription drug abuse assessment and management tool. The technology supports practitioners by accessing patient prescription information from dispensed prescription databases, analyzing the data, and providing a risk-based score to assist practitioners in their health care decision making.

#### **T-System Inc.**

#### www.tsystem.com

 $\mathrm{EV^{TM}}$  for physicians is designed for physicians struggling with the workflow and design of enterprise EHRs. With EV for physicians, nurses can continue documenting in the enterprise system while physicians can document in a solution with intuitive workflow, gold-standard clinical content, and integrated clinical decision support.

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#### www.airstrip.com

AirStrip® provides a complete, vendor- and data-source agnostic, enterprise-wide clinical mobility solution, which enables clinicians to improve the health of individuals and populations. AirStrip is empowering the nation's leading health systems as the industry continues to evolve to new business models, accountable care, and shared risk.

#### **Amico Accessories**

#### www.amico.com

Amico Corporation, founded in 1974, designs, manufactures, and markets a broad range of products for virtually every department in the health care facility. Our mission is to design and deliver state-of-the-art products that facilitate the caregiver's role in providing the best outcomes for patients.

#### Cardiomedix

#### www.cardiomedix.com

Cardiomedix, a telehealth technology and ambulatory cardiac monitoring company,

**CONTINUED** on page 8

#### CONTINUED FROM PAGE 7

was founded in 1988 by its medical director, Daniel David, MD, a renowned cardiologist. Cardiomedix's mission is to improve quality of care and reduce morbidity and mortality while lowering costs by providing access to cutting-edge solutions and novel telehealth technologies.

#### ccrd Consulting Engineers

#### www.ccrd.com

ccrd is an industry-leading mechanical, electrical, and information technology engineering design and commissioning firm with offices across the United States. Established in 1980 with a goal of providing innovative and technically advanced engineering solutions for complex facilities, the firm has grown to include more than 180 highly skilled professionals and support staff.

#### Christie Medical Holdings, Inc.

#### www.ChristieMed.com

VeinViewer® by Christie is a near-infrared vein visualization device proven to increase first-stick success by up to 100 percent, increase patient satisfaction 100 percent, and decrease the number of medically unnecessary peripherally inserted central catheter lines placed by more than 30 percent. The real-time high-definition image helps clinicians start a peripheral intravenous line on even difficult-access patients.

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#### www.corian.com

In today's health care facilities, every surface needs to deliver both beautiful design and high performance. DuPont Corian accepts the challenge. DuPont pioneered the science behind solid surfaces, a true innovation in technology that spurred an entire industry. Corian is a nonporous surface that is both heat- and scratch-resistant. It can be thermoformed, milled, carved, and routed, creating innovative designs limited only by the imagination.

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#### www.gcx.com

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IOA Healthcare Furniture designs and manufactures the widest collection of specialty recliners, sleepers, and seating for the demands of today's health care facilities. Our furniture is built to deliver unmatched comfort and durability, is customized to meet the specific needs of each specialty of care, and has been designed and manufactured in the United States for more than 30 years.

#### kaléo, Inc.

#### www.kaleopharma.com

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a new generation of lifesaving personal medical products to patients. In every therapeutic area, the kaléo goal is the same: to work together with patients and other users in order to develop better alternatives to the currently available standard of care.

#### KARL STORZ Endoscopy-America, Inc.

#### www.karlstorz.com

KARL STORZ is the only company to offer a one-stop-shop airway management system. Our video laryngoscope, 5.5 mm and 4.0 mm flexible intubation video endoscopes, and optical stylets can all be connected to our C-MAC® monitor to cover routine and difficult intubations. All scopes and laryngoscopes are available in neonatal/pediatric and adult sizes.

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SMARTSafe secures and tracks a patient's possessions from admission into the hospital until release. The unique design allows for security, and the bar code and numbering system allows the property to be tracked alongside the patient. This creates peace of mind for the patient and massive dollar savings for the hospital.

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#### www.konicaminolta.com/medicalusa

Konica Minolta Medical Imaging is a worldclass provider and market leader in medical diagnostic primary imaging. With more than 75 years of endless innovation, Konica Minolta is globally recognized as a leader, providing cutting-edge technologies and comprehensive support aimed at providing real solutions to meet customers' needs.

#### LIVENGOOD

#### www.livengoodmed.com/surge-capacity

LIVENGOOD focuses on keeping high-level clinical care centered on patients. The Capacity Plus consolidates all medical equipment and safely extends gasses from existing headwalls. Our solutions grant unmatched flexibility in converting any space into patient space. Applications include daily overflow, bed-capacity expansion, and disaster-response situations.

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#### www.maxlifelive.com

Max Life<sup>TM</sup>, Advanced Telemedicine for Pre-Hospital Diagnosis and Care, is the latest in advanced mobile ambulatory telemedicine technology. Originally designed for pediatric/neonatal emergency transportation, it is ideal for any emergency transportation services. Any facility that wants to promote itself as cutting edge will want to have this technology available to all its patients.

#### **McGraw-Hill Education**

#### www.clinicalaccess.com

Clinical Access is a one-of-a-kind clinical decision support tool offering targeted answers to more than 120,000 questions encountered at the point of care. Nowhere else will you find a targeted, authoritative answer as quickly as at Clinical Access, which helps physicians, residents, nurse practitioners, and physician assistants provide superior patient care while maintaining maximum speed and efficiency.

#### **McKesson Technology Solutions**

#### www.mckesson.com

Visit McKesson in innovatED to learn about these robust solutions:

- McKesson Patient Folder Mobile Media Capture<sup>™</sup>: Capture structured documents directly into McKesson OneContent Patient Folder<sup>™</sup>.
- McKesson Intelligent Coding: Helps optimize revenue and reduce compliance risk for coding and charge capture in ED and observation areas, as well as physician (professional fee) coding.

#### MedStar Institute for Innovation (MI2)

#### www.mi2.org

The mission of MI2 is to catalyze innovation that advances health. MI2 has ongoing initiatives in human factors and usability, simulation training and education, digital and personalized health, technology invention and commercialization, systems of care delivery, and the application of influence and complexity science.

#### **Modular Services Company**

#### www.modularservices.com

Modular Services Company is a medical products design company that creates, manufactures, and services advanced prefabricated products, including medical headwalls, footwalls, sinkwalls, fixed and movable columns, movable boom systems, and more. Our products generate meaningful solutions for the patient environment and are designed to help nurses provide care with greater ease and efficiency.

#### NeuroLogica

#### www.NeuroLogica.com

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#### www.paladinmp.com/paladin/index.htm

Paladin Medical Products manufactures an extruded aluminum antimicrobial equipment management rail. This Fairfield-style rail ensures continuity and flexibility for the life of patient-care environments while maintaining the integrity and preserving the value of the wall system and panel, making it adaptable and effective in an ever-changing clinical environment.

#### **Philips Healthcare**

#### www.philips.com/healthcare

By connecting game-changing technologies from Google and Philips IntelliVue Solutions, we have simulated the first proof of concept for the seamless transfer of patient vital signs into Google Glass. This is a notable milestone in our research into emerging technologies and how they can be applied to improve pa-

#### **Porter Instrument**

#### www.PorterInstrument.com/Medical

For more than 40 years, Porter Instrument has been the leader in nitrous oxide and oxygen systems used for pain management and minimal sedation. Offering both continuousflow and demand-flow options, Porter has the right solution for every facility. Visit Porter at Booth 1106.

#### **Rubbermaid Healthcare**

#### www.rubbermaidhealthcare.com

Rubbermaid Healthcare is the premier provider of mobile nurse stations, medication carts, computer carts, wall arm workstations, and wall cabinet workstation solutions for health care facilities. From research to development, we have one goal in mind when it comes to health care: Increasing the Capacity to Care<sup>TM</sup>.

#### Samsung

#### www.samsung.com/healthcare

Samsung's Enterprise Business Division (EBD) is a global leader in information technology, committed to introducing new business opportunities across a wide diverse spectrum of industries, including health care, retail, and hospitality sales. Samsung Health and Medical Equipment (HME), a subdivision of EBD, provides innovative technology solutions that connect patients with health care professionals and information.

#### **Simbionix**

#### www.simbionix.com

Simbionix, the world's leader in medical training and simulation, features the U/S Mentor<sup>TM</sup>, a high-end ultrasound simulator designed to serve a wide variety of medical specialties. Realistic simulation, designated skill tasks and procedural tasks, diverse diagnostic scenarios, and captured metrics are all combined to promote clinical hands-on proficiency.

#### Sotera® Wireless Inc.

#### www.soterawireless.com

Sotera® Wireless Inc. introduces the ViSi

Mobile System, a platform for comprehensive vital signs monitoring designed to keep clinicians connected to their patients whether the patients are in or out of bed in transport—it's monitoring in motion.

#### Teleflex, Inc.

#### www.teleflex.com/ezioeducation

The ARROW® EZ-IO® Intraosseous Vascular Access System delivers immediate vascular access for difficult vascular access (DVA) patients, providing peripheral access with central venous catheter performance. When vascular access presents a challenge, go directly to the bone.

#### The Beck Group

#### www.beckgroup.com

Founded in 1912, The Beck Group is a collaborative team of designers and builders offering planning, architecture, interior design, construction, and sustainability consulting services. The company maintains a team of nearly 600 employees working among offices in Atlanta, Austin, Dallas, Denver, Fort Worth, Mexico City, and Tampa.

#### **TransMotion Medical Inc.**

#### www.transmotionmedical.com

TransMotion Medical Inc. stretcher-chairs require a reduction or elimination of patient transfers, thus reducing staff and patient fall risk and improving throughput. This elite line of mobile, motorized stretcher-chairs is manufactured in the United States and features power drive and power positioning. Call 1-866-860-8447 for a free demonstration.

#### VectraCor Inc.

#### www.vectracor.com

Detect electrocardiogram (ECG) changes suggestive of a heart attack in real time and derive a 15- or 22-lead ECG using only five electrodes. VectraCor's technology is the only ECG monitor with a noninvasive cardiac electrical biomarker (CEB)®, an innovative index number that will potentially help emergency physicians with the number-one cause of death, cardiovascular disease. The device is FDA-cleared and CE-marked.

#### **Vocera**

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Vocera offers a comprehensive portfolio of integrated, intelligent solutions to improve communication and workflow for today's mobile, mission-critical health care workers, enabling them to securely and instantly connect with the right person, group, or information. Vocera Communication System and Vocera Care Experience are installed in more than 1,000 organizations worldwide.

#### Wearable Intelligence, Inc.

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Wearable Intelligence creates enterprise software for wearable technologies such as Google Glass. Wearable Intelligence's workflow, communications, training, and dataaccess products are in the field at some of the world's best-known companies. In any clinical environment, Wearable Intelligence's HIPAAcompliant platform wirelessly enables doctors and nurses to achieve greater efficiency, collaboration, and patient satisfaction.

#### Welch Allyn, Inc.

#### www.welchallyn.com

Welch Allyn develops diagnostic solutions by combining pragmatic knowledge with a visionary spirit of innovation and ongoing improvement. As a leading global manufacturer of physical examination instruments and accessories and EHR-connected vital sign and cardiac monitoring solutions, the company has a steadfast commitment to delivering superlative medical products, services, and solutions. •



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Maximize your experience in innovatED with this truly unique interaction where your questions are answered before you even ask them. A wealth of information is right at your fingertips. It's available in the Apple App Store and the Google Play store, or navigate to it through the ACEP14 mobile guide app.

#### DON'T MISS These ED Talks and Demonstrations

TAKE 10 MINUTES TO LEARN SOMETHING NEW at the innovatED ED Talks and demonstrations. Companies will present their latest technology or service and answer any questions you might have about it. For detailed information about each ED Talk, please refer to the innovatED brochure provided in the Exhibit Hall. Pay special attention to the codes each day. See how some of this new technology would work in a real-life situation.

#### **MONDAY**

#### 9:40-9:50 a.m.

#### **Durata Therapeutics**

Emergency Medicine and Hospital Medicine: Putting Collaboration into Practice

#### 10-10:10 a.m.

MedStar Institute for Innovation (MI2) Cost-Awareness Decision Support

#### 10-10:20 a.m.

"Code Black" Disaster Scenario

#### 10:20-10:30 a.m.

#### HKS. Inc.

The Evolution of the Split-Flow ED-New **Findings** 

#### 10:30-10:40 a.m.

#### HKS, Inc.

Innovative Patient Spaces

#### 10:40-10:50 a.m.

#### **Durata Therapeutics**

Emergency Medicine and Hospital Medicine: Putting Collaboration into Practice

#### 11-11:10 a.m.

#### FUJIFILM SonoSite, Inc./X-Porte Ultrasound

Kiosk: The Next Generation of Point of Care Ultrasound

#### 11:15-11:30 a.m.

#### EM Hackathon

Grand-Prize Winner Presented by ACEP, EMRA, Chicago Health 2.0, Hacking Medicine at MIT, and Grand Sponsor Allscripts

#### 2:40-2:50 p.m.

#### The Medicines Company

Paradigm Shift in the Treatment of Skin and Soft Tissue Infections in the ED: Providing Care in the Outpatient Versus Inpatient Setting

#### 2:50-3:10 p.m.

"Code Blue" Critical Care Scenario

#### 3-3:10 p.m.

Elite Medical Scribes

#### 3:15-3:25 p.m. MEDHOST, Inc.

Medical Screen Out: Improving Coordination of Care by Redirecting Nonurgent Patients to the Appropriate Care Setting

#### **TUESDAY**

#### 11:10-11:20 a.m.

#### **Durata Therapeutics**

Emergency Medicine and Hospital Medicine: Putting Collaboration into Practice

#### 11:20-11:40 a.m.

"Code Blue" Critical Care Scenario

#### 11:50 a.m.-noon

#### T-System Inc.

Losing the ICD-10 Weight on the Backs of ED Physicians

#### 12:10-12:20 p.m.

#### FUJIFILM SonoSite, Inc.

Workflow and Image Archival Solutions for the Busy ED

#### 1:30-1:40 p.m. Teleflex, Inc.

Sounding the Siren on Sepsis: Prehospital Sepsis Management

#### 2:40-2:50 p.m.

#### Masimo Corporation

SpCO-Helping Catch the Silent Killer

#### 2:50-3:10 p.m. "Code Black" Disaster Scenario

#### 3:00-3:10 p.m.

Covidien Latest Advancements in Treatment for Large Vessel Occlusion in Acute Ischemic Stroke

#### 3:15-3:25 p.m.

#### National Association of Boards of Pharmacy

Accessing Comprehensive and Analyzed Controlled Substances Med History in **ED** Workflow

#### **WEDNESDAY**

#### 11:10-11:20 a.m.

#### Innovative Trauma Care

Taking the Emergency Out of Hemorrhage Control

#### 11:20-11:40 a.m.

"Code Black" Disaster Scenario

#### 11:30-11:40 a.m.

#### The Medicines Company

Cleviprex: Safe and Effective Blood Pressure Control

#### 11:50 a.m.-noon

#### Covidien

Rapid Assessment and Treatment Decision Making for Acute Ischemic Stroke

#### 12:10-12:20 p.m.

#### FreemanWhite, Inc.

Capacity Planning: Maximizing the Efficiency of Your Department

#### 2:40-2:50 p.m.

#### The Shams Group

Transforming Your Patient ED Intake and Discharge Experience Via a High-Speed High-Touch Mobile App/Kiosk

#### 2:50-3:10 p.m.

"Code Blue" Critical Care Scenario

## Hot Sessions

#### Orthopedic Injury Treatment: Not One Size Fits All

by VANESSA CACERES

n orthopedic injury in a child at the ED shouldn't be treated the same as a similar injury in an adult. "As a child grows and their growth plates mature, their injury pattern can be quite different from adults and therefore is treated differently," said Annalise Sorrentino, MD, FAAP, FACEP, professor of pediatrics in the division of emergency medicine at the University of Alabama at Birmingham. Dr. Sorrentino will discuss the identification and treatment of pediatric orthopedic injuries in her session, "Pediatric Orthopedics: Avoid the Pitfalls." Orthopedic injuries in children can have both anatomic and physiologic differences compared with those in adults, Dr. Sorrentino said.

"Injuries that might result in a sprain or strain in an adult actually may be a fracture in a child, and failure to recognize that and treat it can cause long-lasting effects."

-Annalise Sorrentino, MD, FAAP, FACEP

Another difference between children and adults is the importance of treating subtle fractures. "Injuries that might result in a sprain or strain in an adult actually may be a fracture in a child, and failure to recognize that and treat it can cause long-lasting effects," she said.

Dr. Sorrentino's presentation will discuss the latest in pediatric orthopedics, including the differences between adults and children, as well as commonly encountered pediatric injuries such as physeal and elbow injuries. She will also touch on common topics in pediatric orthopedics, such as adequately treating an injured child for pain. "That pain doesn't stop when they leave the hospital," Dr. Sorrentino said. She will present some data on analgesia choices and touch on the controversy of using nonsterioidal anti-inflammatory agents in children.

Her presentation will briefly discuss the rise of obesity in children, and how that has sometimes led to more complicated injuries.

Dr. Sorrentino will bring her advice to life with case studies of some of the challenging injuries she has handled.

**VANESSA CACERES** is a freelance medical writer based in Florida.



Dr. Sorrentino

PEDIATRIC
ORTHOPEDICS: AVOID
THE PITFALLS
Monday, Oct. 27
10–10:50 a.m.
Room W375C

## The Latest and Greatest in Cardiology

by FRANCESCA BARATTA

mergency physicians are always fighting against time limits, whether they are treating critically ill patients or trying to sustain their knowledge of the latest medical literature across the myriad disciplines they encounter. At least with cardiology literature, Corey M. Slovis, MD, FACEP, is willing to help.

Currently the chairman of emergency medicine at Vanderbilt Medical Center in Nashville, Tennessee, Dr. Slovis said his interest in cardiology began during his initial training in internal medicine at Emory University, a major cardiovascular center. After his switch to emergency medicine, he realized, "cardiology is one of those areas that has just exploded as far as new information, change in practice, and, worst of all, it may have the largest number of journal articles devoted to that certain topic area in emergency medicine."

In his presentation, "Cruising the Literature: Cardiology 2014," Dr. Slovis will be discussing key cardiology literature from 2014 chosen from more than 20 cardiology journals. He picked the articles for his talk based on two criteria: their academic importance and their timely applicability to the emergency department.

"I'd like to combine interest, entertainment, factual knowledge, and things you can take back to change how you practice tomorrow," said Dr. Slovis.

The literature topics will include cardiac and coronary artery CT scanning, new recommendations for treating blood pressure, optimal pulmonary resuscitation, and the safety of hands-on defibrillation, among others. The national recommendations for treating high blood pressure, for example, now recommend not using beta blockers as a first-line management and have increased the blood pressure goal for people older than age 60 to 150/90, affecting a physician's practice.

The final topic Dr. Slovis will discuss is how to increase life expectancy in both patients and their physicians. Some studies do not just affect how physicians treat patients but also "how they treat themselves," he said.

**FRANCESCA BARATTA** is a freelance writer based in New Jersey.



Dr. Slovis

CRUISING THE LITERATURE: CARDIOLOGY 2014 Monday, Oct. 27 11:30 a.m.-12:20 p.m. Skyline Ballroom, Room W375A

## **EMRA Schedule**Packed on Monday



esidents shouldn't be bored on Monday, the first official day of ACEP14. The day starts with a Bloody Mary Education Breakfast at 8 a.m. and doesn't shut down until the Emergency Medicine ats' Association (EMPA) Job Fair in the evening

Residents' Association (EMRA) Job Fair in the evening. Check out the entire Monday lineup.

#### **BLOODY MARY EDUCATION BREAKFAST**

Monday, October 27

8-9 a.m., Chicago Hilton

Kick-start the day by enjoying a hearty breakfast and Bloody Marys or mimosas with fellow residents. Hear what the week has in store for you at this must-attend primer. Sponsored by Covidien.

#### **EMRA RESIDENT FORUM AND LUNCHEON**

Monday, Oct. 27

9 a.m.-1:30 p.m., Chicago Hilton

Sponsored by CEP America and GL Advisor

Get valuable information and skills you need to succeed in your career. Hot topics include:

- Developing leadership skills
- Fair business practices and contract basics
- Non-medical ways to lose your license
- Financial planning for young physicians
- A free resident lunch and learn with panel discussion

#### **EMRA JOB FAIR**

(Cosponsored by Florida Emergency Physicians and TeamHealth)
Monday, Oct. 27

5-7 p.m., McCormick Place

Let EMRA help with your job search. Attend the largest and best job fair in the specialty of emergency medicine, with more than 150 companies expected to participate. It's a great time to learn about career opportunities all in one convenient place!

## THANK YOU TO OUR EMRA UNDERWRITERS

The leadership and members of the Emergency Medicine Residents' Association (EMRA) extend sincere appreciation to our gracious supporters who have sponsored EMRA events at ACEP14. We could not accomplish all that we do without your generous support.

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North Shore University Hospital Emergency Medicine Residency Program SUNY Downstate Medical Center University of Alabama at Birmingham Department of Emergency Medicine University of Kentucky University of Missouri-Columbia

University of Tennessee at Memphis EM Residency University of Wisconsin School of

Medicine and Public Health Washington University in St Louis

## Ultrasound in the ED-More Than Just a FAST Tool

by VANESSA CACERES

ost emergency physicians are familiar with bedside ultrasound and the focused assessment with sonography for trauma (FAST). Although FAST can be helpful, "some of us have moved beyond the protocolized approach to trauma ultrasound," said Matt Dawson, MD, RDMS, RDCD, director of point-of-care ultrasound and associate professor at the University of Kentucky in Lexington.

Dr. Dawson said that he uses FAST, but that there are other ultrasound tools emergency physicians can try. He'll discuss those tools at his talk, "Rapid Fire: Beyond FAST: Trauma Ultrasound Today."

Those interested in discovering new uses for ultrasound will want to attend this interactive presentation, Dr. Dawson said. "Ultrasound can be used for so many things other than the eFAST [extended FAST] in the trauma patient," he said. "If the patient is crashing and the eFAST is negative, you could recognize pubic symphyseal widening with ultrasound to help confirm that the bleeding is in the pelvis. You can also diagnose musculoskeletal injuries. Possibly an even more beneficial use of ultrasound in the multitrauma patient is treatment of those painful injuries with ultrasound-guided nerve blocks." The latter can be a quick and efficient method to help control pain in certain patients, Dr. Dawson said.

In his session, Dr. Dawson will address cases where emergency physicians can use skills such as confirming intubation in the crashing patient, marking the cricothyroid membrane to speed up to

cricothyrotomy, diagnosing musculoskeletal injuries at the bedside, and making critical decisions in more complex hypotensive crashing patients. "For example, if a hypotensive patient has both a pericardial tamponade and free fluid in the abdomen, the audience will be taught how to differentiate the cause of hypotension and decide on immediate treatment with inferior vena cava ultrasound," he said.

Attendees will also discuss how to recognize crashing trauma patients who may not actually be trauma patients—and how to treat them appropriately.

Dr. Dawson said that his talk will be of interest both to physicians who see frequent trauma cases, as well as those who see them less often. "This talk will discuss some cutting-edge uses of ultrasound to take better care of those patients. If you don't see trauma very often, most of the skills are useful for other patients as well," he said.

For more information about the uses of ultrasound in the ED, check out Dr. Dawson's www.ultrasoundpodcast.com or follow him on Twitter at @ultrasoundpod.

**VANESSA CACERES** is a freelance medical writer based in Florida.



Dr. Dawson

RAPID FIRE: BEYOND FAST: TRAUMA ULTRASOUND TODAY

Monday, Oct. 27 1:30–1:55 p.m. Room W196ABC

## Discover the Benefits of Regional Blocks

by VANESSA CACERES

hen emergency physicians first hear about regional nerve blocks, they may think of them as something mysterious.

"They think of it as something only anesthesiologists will do," said Michael Blaivas, MD, FACEP, an emergency physician in Alpharetta, Georgia. "People are shocked by the relevance to their practice and how much it can improve their practice."

Dr. Blaivas will lead the session "Blocks Unblinded: Ultrasound-Guided Regional Anesthesia."

Although conscious sedation is more the norm, especially at EDs in community hospitals, that approach can eat up a good deal of time and resources, Dr. Blaivas said. "It impacts the way the entire department flows and an entire care area."

In contrast, although a regional block requires proper technique and the usual precautions, "it doesn't have the heavy burden of nurse monitoring and is actually much safer for the patient," he said.

Regional blocks are used most commonly in the ED for shoulder dislocations, wrist fracture reduction, ankle fracture reduction, and pain control for hip fractures, Dr. Blaivas said. "It gives people control over their pain so we can accomplish procedures, and it controls a patient's pain from burn or injury without conscious sedation or strong narcotics," he said.

He sees regional blocks used more often at academic medical centers, although he believes community hospitals would benefit from their increased use even more than academic facilities.

"Regional blocks are used most commonly in the ED for shoulder dislocations, wrist fracture reduction, ankle fracture reduction, and pain control for hip fractures. It gives people control over their pain so we can accomplish procedures."

-Michael Blaivas, MD, FACEP

Dr. Blaivas said that attendees at his session will likely be curious to know about the technique used for regional blocks, whether there are any common complications, and what kind of patients would benefit the most from regional bocks. They will also likely want details on the equipment used and how to get the capacity for regional blocks set up at their organization, Dr. Blaivas said.

"Blocks Unblinded: Ultrasound-Guided Regional Anesthesia" is a prerequisite for the "Ultrasound-Guided Regional Anesthesia Lab," which will give attendees hands-on practice with regional blocks, Dr. Blaivas noted.

**VANESSA CACERES** is a freelance medical writer based in Florida.



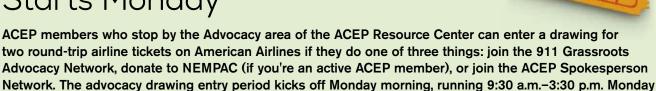
Dr. Blaivas

BLOCKS UNBLINDED: ULTRASOUND-GUIDED REGIONAL ANESTHESIA

Monday, Oct. 27 3:30-4:20 p.m. Skyline Ballroom, Room W375A

**HOT SESSIONS CONTINUE** on page 12

## ACEP Advocacy Drawing Starts Monday



#### Don't Forget the Suite!

through Wednesday.

The NEMPAC VIP Donor Suite is open Monday through Wednesday, 9 a.m.-4 p.m. ACEP members who have contributed at least \$500 to NEMPAC in 2014 are invited to visit the NEMPAC Donor Hospitality Suite each day for complimentary refreshments, laptop/printer usage, and professional neck and shoulder massages.

#### Thank You!

The ACEP Board of Directors and the NEMPAC Board of Trustees recognize the following emergency physician groups for their efforts to encourage their ACEP member physicians to contribute to NEMPAC in order to unify and strengthen the voice of emergency medicine in the political process.

- CEP America
- Eastside Emergency Physicians
- Emergency Medicine Physicians (EMP)
- EmCare
- Florida Emergency Physicians (FEP)
- Medical Emergency Professionals (MEP)
- Mid-Atlantic Emergency Medicine Association (MEMA)
- Wake Emergency Physicians



## INDUSTRY-SUPPORTED SATELLITE SYMPOSIA OPTIONS

Satellite symposia programs are educational, and some offer CME credit. These events will take place at the Chicago Hilton.

These programs are not a part of the official ACEP14 education program as planned by ACEP's Educational Meetings Committee.

**TUESDAY, OCT. 28** 6-9 p.m.

Targeted Oral Anticoagulation in the Emergency Department: Key Factors in Stroke Prevention in Atrial Fibrillation Grantors: Boehringer Ingelheim and Daiichi Sankyo

## Hot Sessions CONTINUED FROM PAGE 11

#### **How to Succeed** in the ED

by FRANCESCA BARATTA

ometimes professionalism in emergency medicine can be pushed aside when a physician is presented with a critically injured patient. That shouldn't always be the case, said Michael A. Silverman, MD, FACEP. Dr. Silverman encourages physicians to exercise both strong medical and personal habits in order to truly succeed.

In his talk, "Rapid Fire: Top 5 Habits of Highly Successful Emergency Physicians," Dr. Silverman will present the top traits physicians should cultivate during their careers. "Most people have the basic medical knowledge, but how you approach your job, your professionalism, and bringing your A game is habit number one," said Dr. Silverman, chairman of emergency medicine at Virginia Hospital Center in Arlington.

Based on years of experience as a director and a column writer, he will be publishing a book called Director's Corner: Lessons in Emergency Medicine Leadership and Management. These lessons also fuel his presentations.

"I've worked with people who I've loved having on my team, and I've worked with people you might not define as successful, and part of the medical director's job is to find what those weaknesses are and what's needed to help make each of them more successful," he said.

While discussing these habits, Dr. Silverman will provide real-life examples of how these traits have helped physicians' careers, including his own. At the beginning of his career, he received a complaint letter from a patient whose case he thought went spectacularly well. He realized then that his communication skills needed improvement.

This ability to overcome self-defeating behaviors is one habit Dr. Silverman wishes more emergency physicians would cultivate. "We're going to practice emergency medicine for a long, long time," he said. "You want to be happy, and you want to be successful in it."

FRANCESCA BARATTA is a freelance writer based in New Jersey.



Dr. Silverman

**RAPID FIRE: TOP 5 HABITS OF HIGHLY SUCCESSFUL EMERGENCY PHYSICIANS** 

Monday, Oct. 27 4:00-4:25 p.m. Room W196ABC

## Check Out Cutting-edge Research at the **Research Forum**, Opening Monday

he Research Forum has been elevated to new heights in 2014 with a new electronic showcase and more original research than ever before. Held Monday and Tuesday, Oct. 27–28, this is the world's largest gathering of emergency medicine researchers, and access is free as part of your ACEP14 four-day registration. Listen to oral presentations, followed by a discussion led by a recognized researcher. You can also view selected abstracts electronically, grouped by topic and critiqued by a recognized discussant.



The 2014 Research Forum gets started at 7 a.m. on Monday and is highlighted by an afternoon spotlight with JEREMY BROWN, MD, the director of the Office of Emergency Care Research at the National Institutes of Health.

#### **MONDAY, OCT. 27**

7 a.m.–5 p.m. **Registration** 

7 a.m.-5 p.m. Abstracts open

8-9:30 a.m. Opening session

9:30-11 a.m. Electronic abstract presentations

10:30-11:30 a.m. Oral presentations

10:45-11:45 a.m. Electronic abstract presentations

Noon-1 p.m. Awards luncheon featuring ACEP Research Award recipient and past award recipient\*

1-1:30 p.m. State-of-the-art research presentation

1:30-2:30 p.m. EMF Grant showcase

2:30-3:30 p.m. Electronic abstract presentations

3:30-4:30 p.m. Wine & cheese networking social

4:30-5:30 p.m. Spotlight: Office of Emergency Care Research (OECR), featuring Jeremy Brown, MD, director of OECR at the National Institutes of Health

#### **TUESDAY, OCT. 28**

7 a.m −3 p.m. **Registration** 

7 a.m.-5 p.m. **Abstracts open** 

8-8:30 a.m. State-of-the-art research presentation

8:30-9:30 a.m. Oral presentations

9:30–11:30 a.m. Electronic abstract presentations

11:45 a.m.-12:45 p.m. Networking lunch\*

1-2 p.m. Oral presentations

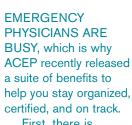
1:30-3:30 p.m. Electronic abstract presentations

3:30-4:30 p.m. Wine & cheese networking social

4:30-5:30 p.m. Cutting-edge Emergency Medicine: **Highlights of the Research Forum** 

\*By invitation only

### **Stay Organized and Updated** with ACEP's Terrific Trio



First, there is our Maintenance of Certification (MOC) Center. The MOC



process is an ongoing

measurement of six core competencies-patient care, interpersonal and communication skills, professionalism, system-based practice, practice-based learning, and medical knowledge-and ACEP can help you take care of these through the MOC Center on our website. Go to www.acep.org/moc and see all the College has to offer.

Second, we created CME Tracker to help you stay on top of your CME requirements. Certificates are updated automatically when you complete an ACEP activity, and you can upload your non-ACEP activities to the tracker to keep all your CME organized in one place. CME Tracker also monitors your progress toward satisfying the requirements of your state medical board and your specialty board. And now we've added an interactive state map to make things even more convenient. Try it out at www.acep.org/cmetracker.

Finally, ACEP wants to take those papers strewn around your desk and keep them tidy. Portfolio Tracker is an online repository that keeps your licenses, certificates, CVs, diplomas, and more all in a central location, secure, and available whenever you need them. It enables you to spend less time searching and more time focusing on emergency care. See how this free member benefit can help you at www.acep.org/portfoliotracker.



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## The Legal Implications of Capacity

by FRANCESCA BARATTA

hen treating patients under the influence of alcohol or drugs, emergency physicians must think about both the medical and legal implications of their actions. Issues of patient mental capacity are common, and overlooking this aspect of treatment is extremely risky.

"Often, we go in as physicians or advanced care practitioners thinking, 'OK, I can just apply my medical knowledge on what medical issues are here,' but [capacity] brings up a lot of other issues, and it's something that we'll face multiple times every shift for different reasons," said Christopher B. Colwell, MD, FACEP, chief of emergency medicine at Denver Health.

These patients could be impaired by alcohol, drugs, head trauma, or psychological disorders, among other reasons, all of which Dr. Colwell will discuss in his presentation, "The Combative, Uncooperative, Arrested, and Threatening Trauma Patient: A Legal, Ethical, and Medical Minefield!"

Because of his hospital's location, Dr. Colwell has years of experience with capacity encounters. He says it is common at his large, urban emergency department for evening-shift physicians to encounter 10 to 15 incapacitated patients a night, while weekend physicians could see up to 40.

For these patients, physicians must weigh the legal implications of treating patients despite their wishes, which could lead to a violation of their civil rights, versus agreeing to their demands for early discharge, which could lead to further injury or death.

Because physicians frequently do not have training in the complicated state and federal laws regarding patient capacity, increased awareness of capacity issues, as well as advice from lawyers, is necessary to avoid lawsuits. Dr. Colwell will present several examples of capacity-related lawsuits during his talk.

"You could argue that most of what we take care of in the emergency department is a result of bad decisions, and we have to acknowledge the freedom that we all have to make bad decisions as long as we have the capacity to understand the implications of that decision," said Dr. Colwell.

**FRANCESCA BARATTA** is a freelance writer based in New Jersey.



Dr. Colwell

THE COMBATIVE, UNCOOPERATIVE, ARRESTED, AND THREATENING TRAUMA PATIENT: A LEGAL, ETHICAL, AND MEDICAL MINEFIELD!

Monday, Oct. 27 4:30-5:30 p.m. Skyline Ballroom, Room W375B

#### Outbreak Alert! Tips to Tackle Infectious Disease

by VANESSA CACERES

bola. MERS. Chikungunya.

Infections often have strangesounding names, but the effects
they can have on patients may be devastating. It's hard for emergency practitioners to keep up with the latest diagnostic
and treatment recommendations, especially as infections seem to proliferate with
greater frequency every year.

That's where "Cruising the Infectious Disease Literature" comes in.

"The session will be a balance of information from the headlines with popular interest and practical new information from the literature that will help emergency practitioners with typical patients now," said David Talan, MD, FACEP, professor emeritus at UCLA School of Medicine, chair emeritus in the department of emergency medicine, and faculty in the division of infectious diseases at Olive View-UCLA Medical Center in Los Angeles.

"The session is for people who want to be prepared to diagnose and treat infections," he said.

Dr. Talan will touch on viral infections often heard about in the news, including Ebola, Middle East Respiratory Syndrome (MERS), and chikungunya virus.

He'll also discuss infections stemming from lack of proper vaccines. For example, there's a movement among some developed countries like the United States to not get vaccinated for measles. That's led to ED visits due to outbreaks right here in the United States, Dr. Talan said.

Dr. Talan will address outbreaks from menigococcus, bacteria that cause meningitis. The bacteria have been responsible for recent outbreaks at Princeton University and University of California, Santa Barbara, he said.

Dr. Talan will also discuss newer drugs available for common infectious diseases. For example, he said there's a long-acting drug for serious skin infections that enables patients to go home after receiving a dose intravenously instead of having to stay at the hospital a few nights.

Another area to be covered in Dr.

Talan's talk is sexually transmitted diseases (STDs). Recent reports have provided new insights into STDs that can occur in the body in places not usually tested, Dr. Talan said. "There are problems with detecting STDs in the throat or other areas by our standard screening," he said.

The infectious disease roundup will conclude with some talk about diseases previously thought to be due to infections that may have an infectious disease link, Dr. Talan said.

**VANESSA CACERES** is a freelance medical writer based in Florida.



Dr. Talan

CRUISING THE INFECTIOUS DISEASE LITERATURE Monday, Oct. 27 4:30–5:30 p.m. Room W178AB

# What's at the ACEP14 Resource Center? Nearly Everything



here can you get your book signed by famous authors, take care of that annual physical exam, and listen to a live presentation about using social media? The ACEP Resource Center, of course.

This are stone than located inside the Exhibit Hall, showeness information.

This one-stop shop, located inside the Exhibit Hall, showcases information on a variety of ACEP tools, benefits, and services, as well as emergency medicine issues. ACEP leaders and staff members will be available to answer your questions, discuss college policy and direction, and provide information on products and resources from ACEP.

Opening Session speakers **Steven Levitt** and **Stephen Dubner** get things started with a signing of their book *Think Like a Freak* at 9:45 a.m. on Monday.

At 10:30 a.m., emergency physicians Amal Mattu, MD, FACEP; William J. Brady, MD, FACEP; Michael J. Bresler, MD, FACEP; Scott M. Silvers, MD, FACEP; Sarah A. Stahmer, MD; and Jeffrey A. Tabas MD, FACEP, will sign their book, Cardiovascular Emergencies.

When you're finished going through the bookstore, get checked out at the Wellness Center! The popular mini-physical is the opportunity to assess your level of well-being with blood pressure checks, blood chemistry, flu shots, and more. This benefit is only for active ACEP members. If you didn't buy a ticket when you registered for ACEP14, purchase one at the bookstore.

Another highlight of the Resource Center is the new ACEP Ignite: Information in a Flash presentation series on hot clinical topics, practice trends, and member benefits that will help you in your practice and personal life. Take a test drive of several new ACEP digital products, including Virtual ACEP, eCME, Portfolio Tracker, new mobile apps, and e-book series.

Learn about the newest advocacy and public relations campaigns being made on your behalf and update your MyACEP profile at the membership desk. Meet with ACEP leadership, ask questions of the helpful ACEP staff, or just relax and meet with your colleagues in one of our lounges. EMF and NEMPAC donations will also be accepted at the Resource Center. First-time Scientific Assembly registrants, be sure to pick up your welcome gift at the Resource Center, too.

#### **EXHIBIT HALL HOURS**

Monday, Oct. 27: 9:30 am.-3:30 p.m. Tuesday, Oct. 28: 9:30 a.m.-3:30 p.m. Wednesday, Oct. 29: 9:30 a.m.-3:30 p.m.



#### 2014 ACEP Leadership Award Winners

Please join ACEP in congratulating the 2014 recipients of the College's most prestigious awards. Some of these winners will be recognized at the invitation-only President's Awards Banquet on Wednesday night, while others will receive their awards at Section, Council, or Research Forum events.

### OUTSTANDING CONTRIBUTION IN RESEARCH AWARD

#### Lance B. Becker, MD, FACEP



Dr. Becker has pioneered lifesaving innovations in resuscitation for more than 25 years. He is professor of emergency medicine and founder and director of the Center for Resuscitation Science in the

Department of Emergency Medicine at the University of Pennsylvania in Philadelphia. He is a powerful advocate for resuscitation studies, securing funding and encouraging international collaboration. One of the field's most productive and highly cited researchers, Dr. Becker shares his findings in countless lectures and peer-reviewed publications. Dr. Becker founded the center in 2006 to translate basic science into real-world improvements in care. His team's work on the use of automated external defibrillators in public settings led to placement of the devices in airports nationwide.

#### HONORARY MEMBERSHIP AWARD

#### Phyllis L. Edans, CPA, CAE



As chief financial officer, Ms. Edans kept ACEP's fiscal house in order for more than 27 years. Dedicated to excellence and committed to the mission of emergency medicine, she helped ACEP expe-

rience tremendous growth in areas dependent on stellar financial performance. From membership, the annual budget, members' equity, and the investment portfolio to NEMPAC, the Emergency Medicine Foundation, and more, she was a trusted manager and advisor on significant decisions that shaped the College's future. One of her first successes was creating a comprehensive financial compendium that still guides the Board of Director's annual review of fiscal policy.

## OUTSTANDING CONTRIBUTION IN EMS AWARD

#### Marianne Gausche-Hill, MD, FACEP



Dr. Gausche-Hill has labored tirelessly for nearly three decades to improve prehospital care for children and adults both at home and around the world. She is professor of clinical medicine and pediat-

rics at the David Geffen School of Medicine at the University of California, Los Angeles (UCLA) and vice chair and chief of the division of pediatric emergency medicine and director of pediatric emergency medicine and EMS fellowships in the department of emergency medicine at Harbor-UCLA Medical Center. She is the cocreator of numerous influential courses, director of research projects, and author of hundreds of publications. She is an active champion for EMS delivery and development locally, nationally, and internationally.

### JOHN G. WIEGENSTEIN LEADERSHIP AWARD

#### J. Brian Hancock, MD, FACEP



Dr. Hancock has served his patients and ACEP with excellence for decades. Dr. Hancock is chief medical officer for the Department of Veterans Affairs' Veterans Integrated Service Network

11 in Ann Arbor, Michigan, caring for veterans in central Illinois, Indiana, Michigan, and northwest Ohio. Born in Evanston, Illinois, and raised in Chicago, Dr. Hancock was a talented classical pianist, but he knew at age 16 that he wanted to be a physician. He completed undergraduate studies at Northwestern University and medical school at Rush Medical College, both in Chicago. Dr. Hancock became a Councillor for the Michigan College of Emergency Physicians early in his career. He went on to hold every national College office, culminating in a dynamic and productive term as President from 2003 to 2004.

### OUTSTANDING CONTRIBUTION IN EDUCATION AWARD

#### William K. Mallon, MD, FACEP



Smart, funny, engaging, and informative, Dr. Mallon is one of the most respected and sought-after speakers in emergency medicine. He has delivered more than 1,000 hours of ACEP continuing

medical education and taught in 18 countries on six continents. He is professor of clinical emergency medicine in the Keck School of Medicine at the University of Southern California in Los Angeles and former director of the fellowship of international emergency medicine at Los Angeles County USC Medical Center. Dr. Mallon has educated a generation of residents at Los Angeles County Hospital and played an instrumental role in the growth and development of emergency medicine in Chile. He has also helped educate the public about emergency medicine as an executive producer of the award-winning documentary *Code Black*.

### COUNCIL MERITORIOUS SERVICE AWARD

#### Catherine Anna Marco, MD, FACEP



Dr. Marco has been a dynamic, committed member of the ACEP Council since 2004. She is a professor in the department of emergency medicine at Wright State University and active

in clinical practice at Miami Valley Hospital, both in Dayton, Ohio. At home and on the ACEP Council, Dr. Marco has served Ohio Chapter ACEP with excellence, holding important chapter leadership positions, including President and Chair of the Government Affairs Committee. Dr. Marco has been an active leader and participant on several Council committees and strives to bring forward the perspective of Ohio and all members of ACEP. As chair of the national ACEP Ethics Committee, Dr. Marco shared her commitment and insight as she helped the College address vital ethical issues, including best practices for care at the end of life.

## COLIN C. RORRIE JR. AWARD FOR EXCELLENCE IN HEALTH POLICY

#### Lynne D. Richardson, MD, FACEP



Dr. Richardson has dedicated her career to ending health disparities and improving emergency care for all Americans. She is a professor and vice chair of emergency medicine and professor of

health evidence and policy in the Icahn School of Medicine at Mount Sinai in New York City. Dr. Richardson began her commitment to

better, fairer health care in the 1980s, doing landmark work in EMS policy at the regional and state levels. Since then, she has excelled as a leader and advocate in every capacity, from clinical care, education, and research to municipal, state, and federal policy. She is Past Chair of ACEP's Public Health and Injury Prevention Committee, ACEP's current liaison to the Commission to End Health Care Disparities, and on the Advisory Committee to the Director of the Centers for Disease Control and Prevention.

## JAMES D. MILLS OUTSTANDING CONTRIBUTION TO EMERGENCY MEDICINE AWARD

#### David P. Sklar, MD, FACEP



Dr. Sklar has led emergency medicine with excellence for more than three decades. He is distinguished professor emeritus and retired associate dean for graduate medical education at the University

of New Mexico Health Sciences Center in Albuquerque. Retired in name only, he continues to care for patients, teach, conduct research, and provide guidance on health policy. He is also editor-in-chief for Academic Medicine, the journal of the Association of American Medical Colleges. Dr. Sklar's contributions to emergency medicine and health care span every sphere. As residency director, Dr. Sklar helped design an innovative program that emphasizes public health and injury prevention as fundamentals. A prolific researcher whose interests include quality improvement and injury prevention, Dr. Sklar's work on migraine headache treatment has also contributed to emergency medicine clinical care.

#### **JOHN A. RUPKE LEGACY AWARD**

#### Arlo F. Weltge, MD, MPH, FACEP



Dr. Weltge is an exemplary leader whose contributions have strengthened emergency medicine and ACEP in Texas and across the nation. Dr. Weltge is clinical professor of emergency medicine at

UTHealth, the University of Texas Medical School at Houston. He also serves as medical director for AMR's Houston EMS operations and the EMS program at Houston Community College. Born in Des Moines, Iowa, Dr. Weltge spent his childhood in Waco, Texas. After undergraduate studies at MIT in life sciences, he headed to Houston for medical school at the University of Texas and a rotating internship at Baylor College of Medicine in Houston. Three months before the specialty was recognized, he launched his career in emergency medicine. He joined Houston Emergency Physicians and went on to be a cofounder of Southeast Texas Emergency Physicians.

### DISASTER MEDICAL SCIENCES AWARD

### Frederick "Skip" M. Burkle, Jr., MD, MPH, DTM, PhD (Hon.), FAAP, FACEP



Dr. Burkle is a senior fellow and scientist at the Harvard Humanitarian Initiative in Cambridge, Massachusetts, and senior international public policy scholar at the Woodrow Wilson International Center for

Scholars in Washington, D.C. He is a former senior scholar and now senior associate faculty in the department of international health and the Center for Refugee and Disaster Response at Johns Hopkins Bloomberg School of Public Health in Baltimore. Dr. Burkle has supported and represented ACEP for years at federal meetings and in the Disaster Medicine Section. He is the recipient of the prestigious William Crawford Gorgas Medal for distinguished work in preventive medicine, groundbreaking work in disaster management and humanitarian assistance,

and the training of an entire generation of U.S. and international personnel. Dr. Burkle has published more than 200 scientific articles, 53 book chapters, and four books—three on disaster management, including the sentinel text Disaster Medicine.

### DISASTER MEDICAL SCIENCES AWARD

#### Joseph F. Waeckerle, MD, FACEP



Dr. Waeckerle is clinical professor of emergency medicine at the University of Missouri–Kansas City School of Medicine and editor emeritus of *Annals of Emergency Medicine*. He is

residency trained and board certified in emergency medicine and sports medicine, with postgraduate work in exercise physiology. He has served emergency medicine organizations since the mid-1970s in many capacities and helped found the Emergency Medicine Residents' Association. A former member of the Board of Directors for ACEP and the Society for Academic Emergency Medicine, Dr. Waeckerle chaired the task force on Domestic Preparedness Against Weapons of Mass Destruction for the Office of Emergency Preparedness in the Department of Health and Human Services. Dr. Waeckerle was invited by the Department of Defense to participate in the Defense Science Board's Task Force on Defense Against Biological Weapons and by the Veterans Hospital Administration to serve on the Technical Advisory Committee on Domestic Preparedness. •

## **ACEP Sections**Can Help Your Practice

N eed a way to pinpoint solutions and identify those who share your interests, victories, and challenges? Look no further than an ACEP Section. ACEP offers 33 sections on topics ranging from pediatric care to telemedicine to toxicology. Each section meets at ACEP14 to outline projects for the upcoming year. It's an inexpensive way to meet people just like you. And for residents, your first section is free!

Air Medical Transport
American Association of Women EPs
Careers in Emergency Medicine
Critical Care Medicine
Cruise Ship Medicine
Democratic Group Practice
Disaster Medicine
Emergency Medicine Informatics
Emergency Medicine Practice Management &
Health Policy
Dual Training
Emergency Medicine Research
Emergency Medicine Workforce

Emergency Ultrasound
EMS/Pre-hospital Care
Forensic Medicine
Free Standing Emergency Centers
Geriatric Emergency Medicine
International Emergency Medicine
Medical Humanities
Observation Medicine
Palliative Medicine

**Emergency Telemedicine** 

Pediatric Emergency Medicine
Quality Improvement and Patient Safe
Rural Emergency Medicine
Sports Medicine
Tactical Emergency Medicine
Toxicology

Trauma & Injury Prevention
Undersea and Hyperbaric Medicine
Wellness

Wilderness Medicine Young Physicians

#### STAY UP TO SPEED AT THESE PRODUCT AND SERVICE SHOWCASES

These educational and product-oriented sessions provide you with an in-depth presentation on a product or service you may see on the exhibit floor. Show up early-seating is limited, and sessions fill quickly!

**MONDAY, OCT. 27** 10:30-11:15 a.m. Otsuka America Pharmaceuticals Showcase

The Importance of Understanding and Managing Hyponatremia Exhibit Hall

10:30-11:15 a.m. BTG International Showcase Mechanisms of Venom-Induced Coagulopathy

2:30-3:15 p.m. **Durata Therapeutics Showcase** DALVANCE (dalbavancin) for

Injection Exhibit Hall

Room 470B

**TUESDAY, OCT. 28** 11:30 a.m.-12:15 p.m. Teva Pharmaceuticals Showcase

Acute Treatment of Agitation Associated with Schizophrenia or Bipolar I Disorder Exhibit Hall

11:30 a.m.-12:15 p.m. Boehringer Ingelheim Showcase

Oral Anticoagulation in Non-valvular Atrial Fibrillation and Deep Vein Thrombosis and Pulmonary Embolism Room 470B

2:30-3:15 p.m. Daiichi Sankyo Showcase

Challenges in Managing Venous Thromboembolism: Outpatient vs. Inpatient? Exhibit Hall

2:30-3:15 p.m. Sidra Medical and Research Center Showcase

Sidra: The Opportunity to Set New Standards in Patient-Centered Care for Women and Children Room 470B

**WEDNESDAY, OCT. 29** 11:30 a.m. -12:15 p.m. Janssen Pharmaceuticals

Closing the Gap Exhibit Hall

**Emergency Health Partners** has opportunities for Board Certified or Board Eligible **Emergecy Medicine Physicians** for our three locations in West Michigan. These locations provide opportunities for Urban/ Teaching, Community, and Rural career paths. EHP is a physician-owned group with over 20 years of service in West Michigan.

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"ACEP14, THE MEETING FOR EMERGENCY MEDICINE. We've got world class speakers on topics that cover the breadth of patients you see in your daily practice, and with an encore presentation of InnovatED you can even get a glimpse into what's coming next to your ED! Network with old colleagues, make some new ones, and when the meetings wind down take in all the sights that Chicago has to offer from the Bean and Grant Park to more than 40 great museums and

## Visitors guide

- 1. Navy Pier 600 E. Grand Ave.
- 2. Wrigley Field 1060 W. Addison St.
- 3. Skydeck Chicago 233 S. Wacker Dr. 103rd Floor
- 4. Frank Lloyd Wright's **Robie House** 5757 S. Woodlawn Ave.
  - 5. City Hall/Rooftop Garden 121 N. LaSalle St.
  - 6. Lake Shore Park 808 N. Lake Shore Dr.



award winning food-there will be something for everyone!" - Matthew D. Bitner, MD, MEd, FACEP Chair, ACEP Educational Meetings Committee



- 1. Bartoli's Pizza 1955 W. Addison St.
- 2. Starapolska 3030 N. Milwaukee Ave. 3. McCormick & Schmick's
- Seafood & Steaks 41. E. Chestnut St.

4. The Capital Grille 633 N. St. Clair St. 5. Honky Tonk BBQ 1213 W. 18th St. 6. Artists Cafe Chicago 412 S. Michigan Ave.

ST

1. Museum of Science and Industry 57th St. and Lake Shore Dr.

2. **LEGOLAND Discovery Center** 601 N. Martingale Rd. 3. 12th St. Beach 1200 S. Linn White Dr.

4. Adler Planetarium 1300 S. Lake Shore Dr.

5. Hershey's Chicago 822 N. Michigan Ave.





1. Murphy's Bleachers 3655 N. Sheffield Ave.

2. Boiler Room 2210 N. California Ave.

3. Apollo Theatre Chicago 2540 N. Lincoln Ave.

157 W. Ontario St. 5. Jazz Showcase 806 S. Plymouth Ct.

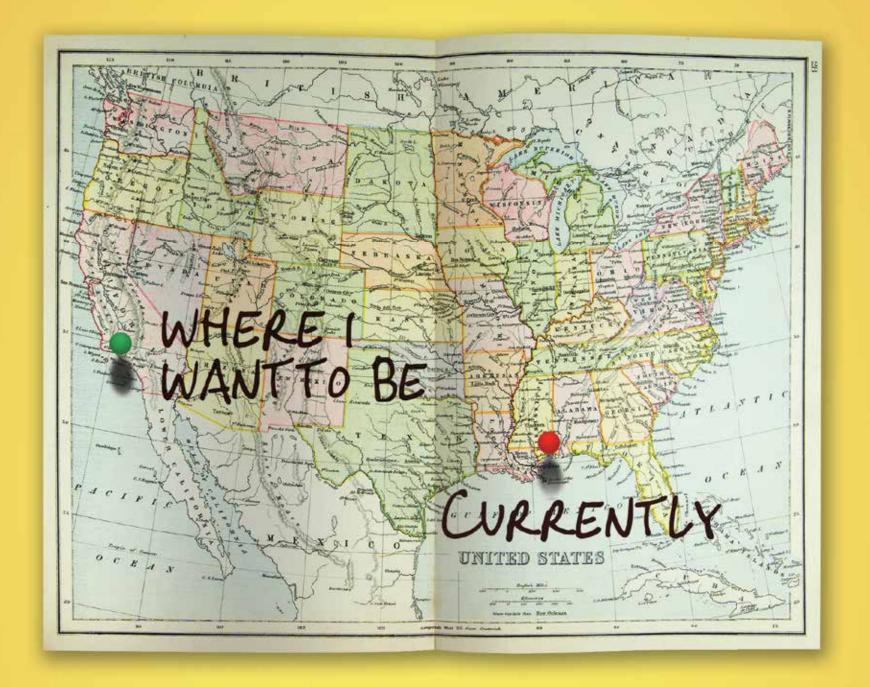
4. The Comedy Bar

6. Ditka's Restaurant 100 E. Chestnut St.

Photos and info: Choose Chicago – www.choosechicago.com



OURS



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#### CHECK OUT OUR NATIONWIDE EMERGENCY MEDICINE OPPORTUNITIES DURING ACEP!

Monday, October 27 | 5 – 7 pm | EMRA Job Fair

## DON'T MISS TEAMHEALTH'S PHYSICIAN RECEPTION.

Tuesday, October 28 | 7 pm | The Field Museum Stop by our ACEP booth #1211 to pick up your free ticket!

