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’Hommédieu 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 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.

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

WELCOME FROM THE PRESIDENT
Mental Health Resources, Liability Reform, and More on Tap for Coming Year
by MICHAEL J. GERARDI, MD, FAAP, FACEP

WELCOME 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

If 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

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

Back and Forth

Shuttles 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 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.
For more, please see the full article in the ACEP14 Daily News.
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

Steven 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.

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.

From Click to Clinic TM in Seconds. No Travel Required.

The intuitive teledicine solution built with EM physicians, for EM physicians:

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Stop by and see a demo at Booth 1440.

www.virtumedix.com
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 recognizes 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!

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.

ICEP and SEMPA Reception Set for Monday at Harry Caray’s

Join 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!
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.
Somebody 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.

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 twice-daily IV antibiotic infusions," said Paul R. 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.**

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 Neuropulmonary offers technologies for specialists treating ischemic and hemorrhagic stroke.
including stentrieversthrombolytic agents, 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. innovativeED Designer www.hksinc.com

For 74 years, HKS has nurtured a culture that revere 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 consultation, 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 ultra-high-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.genetech.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®), acoustic respiratory rate (RRA)™, Masimo Patient SafetyNet™, SedLine® (EEG-based) Brain Function Monitors, and Phaselin® 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.

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-

The Shams Group www.shamsgroup.com

The Shams Group (TSG), a telehealth technology and services 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.

T-System Inc. www.tsystem.com

EV™ 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.

AirStrip 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.

Cardiomeds www.cardiomeds.com

Cardiomeds, a telehealth technology and ambulatory cardiac monitoring company, is a pioneer in providing telehealth solutions to physicians and hospitals worldwide. Cardiomeds, headquartered in Dallas, with offices across the United States, is devoted to providing reliable, high-quality telehealth solutions to help healthcare professionals improve patient care, improve operational efficiency, and reduce costs.

The iTClamp32™ 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., 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.

Silver Supporters

AirStrip

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.

Gold Supporters

Elite Medical Scribes www.elitemedicalscribes.com

Elite Medical Scribes is the nation’s pre-eminent 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!

FreeamanWhite, Inc. www.freeamanwhite.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

Innovative Trauma Care 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.

Monday Issue 7

OCTOBER 27-30, 2014 • McCormick Place • Chicago, Illinois

WWW.ACEP.ORG/ACEP14
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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
ccdr is an industry-leading mechanical, electrical, and information technology engineer- ing 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.

DuPont
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.

GCX Mounting Solutions
www.gcx.com
GCX is the worldwide leader in medical instru- ment and information technology mounting solutions. By dedicating ourselves specifically to the medical industry, we have been able to develop a unique understanding of the interaction between medical devices, users, and health care environments. Our products are used in virtually all health care settings and provide secure positioning, mobility, and ergonomic access to medical devices and computer hardware.

IOA Healthcare Furniture
www.ioa-hcf.com
IOA Healthcare Furniture designs and manu- factures the widest collection of specialty re- cliners, 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
kaléo is a pharmaceutical company bringing a new generation of lifesaving personal medi- cal products to patients. In every therapeutic area, the kaléo goal is the same: to work to- gether 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 6.0 mm flexible intubation video endoscopes, and optical stylets can all be connected to our C-MAC® monitor to cover routine and dif- ficult intubations. All scopes and laryngo- scopes are available in neonatal/pediatric and adult sizes.

Kingfisher Medical
www.kingfishermedical.com
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 number- ing system allows the property to be tracked alongside the patient. This creates peace of mind for the patient and massive dollar sav- ings for the hospital.

Konica Minolta Medical Imaging
www.konicaminolta.com/medicalusa
Konica Minolta Medical Imaging is a world- class 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.livengoodmedical.com/surge-capacity
LIVENGOOD focuses on keeping high-level clinical care centered on patients. The Ca- pacity Plus consolidates all medical equip- ment and safely extends gasses from existing headwalls. Our solutions grant unmatched flexibility in converting any space into pa- tient space. Applications include daily overflow, bed-capacity expansion, and dis- aster-response situations.

Max LifeTM Advanced Telemedicine
www.maxlifelive.com
Max LifeTM, Advanced Telemedicine for Pre- Hospital Diagnosis and Care, is the latest in advanced mobile ambulatory telemedicine technology. Originally designed for pediat- ric/neonatal emergency transportation, it is ideal for any emergency transportation servic- es. 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
ClinicalAccess is a one-of-a-kind clinical decision support tool offering targeted an- swers to more than 120,000 questions en-countered at the point of care. Nowhere else will you find a targeted, authoritative answer as quickly as at ClinicalAccess, 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™. Capture structured documents directly into McKesson OneContent Pa- tient Folder™.
- McKesson Intelligent Coding: Helps opti- mize 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 (M2)
www.m22.org
The mission of M2 is to catalyze innovation that advances health. M2 has ongoing ini- tiatives in human factors and usability, sim- ulation training and education, digital and personalized health, technology invention and commercialization, systems of care de- livery, 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 pre-fabricated products, including medical headwalls, footwalls, sinkwells, fixed and movable columns, movable boom systems, and more. Our products generate meaning- ful solutions for the patient environment and are designed to help nurses provide care with greater ease and efficiency.

NeuroLogica
www.NeuroLogica.com
NeuroLogica, a Subsidiary of Samsung Elec- tronics Co., Ltd., brings the power of innova- tive imaging to your patients. With an expertise in computed tomography (CT) design and de- velopment, NeuroLogica transforms fixed CT

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Paladin Medical Products, LLC
www.paladinmp.com/paladin/index.htm
Paladin Medical Products manufactures an extruded aluminum antimicrobial equipment management rail. This Fairfax-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 patient care.

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 continuous-flow 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.

Samsung
www.samsung.com/healthcare
Samsung’s Enterprise Business Division (EBD), provides innovative technology solutions to organizations worldwide.

Simbionix
www.simbionix.com
Simbionix, the world’s leader in medical training and simulation, features the US Mentor, 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 patient. Whether the patients are in or out of bed in transport—it’s monitoring in motion.

Teleflex, Inc.
www.teleflex.com/edconference
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 placement. 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. VectraCat’s technology is the only ECG monitor with a noninvasive cardiac electrical biomarker (CEBI), 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
www.vocera.com
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.

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, the company has a steadfast commitment to delivering superlative medical products, services, and solutions.

**SPECIAL ADVERTISING SECTION**

**MONDAY ISSUE 9**

**MONDAY**

9:40–9:50 a.m. Durata Therapeutics Emergency Medicine and Hospital Medicine: Putting Collaboration into Practice

10:10–10:20 a.m. MedStar Institute for Innovation (MII) Cost Awareness Decision Support

10:20–10:30 a.m. "Code Black" Disaster Scenario

10:30–10:40 a.m. HKS, Inc. The Evolution of the Split-Flow ED—New Findings

10:40–10:50 a.m. Durata Therapeutics Emergency Medicine and Hospital Medicine: Putting Collaboration into Practice

11:11–11:20 a.m. FUIFLFM SonoSite, Inc. /X-Porte Ultrasound: The Next Generation of Point of Care Ultrasound

11:15–11:30 a.m. EM Hackathon Grand Prize Winner Presented by ACEP, EMRA, Chicago Heart 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

3:30–3:40 p.m. Elite Medical Scribes

3:55–3:25 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

**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 Depleting: Safe and Effective Blood Pressure Control

11:50 a.m.—noon Covidien Rapid Access 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

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Orthopedic Injury Treatment: Not One Size Fits All

by VANESSA CACERES

A 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.

“If 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 physical 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 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 nonsteroidal 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.

The Latest and Greatest in Cardiology

by FRANCESCA BARATTA

E 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.

EMRA Schedule

Packed on Monday

Resident 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 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 FRIENDS

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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MEDICAL STUDENT LUNCHEON

Arizona Chapter ACEP
Baylor College of Medicine
Christiana Care Health System
Florida Hospital Emergency Medicine

Residency
Hackensack University Medical Center

EM Residency
Johns Hopkins University Program
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 Michigan–Ann Arbor
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

WWW.ACEP.ORG/ACEP14
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 are invited to join 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 symphysis 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.

Discover the Benefits of Regional Blocks

by VANESSA CACERES

When 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 blocks. 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 pre-requirement 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.

ACEP Advocacy Drawing

ACEP members who stop by the Advocacy area of the ACEP Resource Center can enter a drawing for two round-trip airline tickets on American Airlines if they do one of three things: join the 911 Grassroots Advocacy Network, donate to NEMPAC (if you’re an active ACEP member), or join the ACEP Spokesperson Network. The advocacy drawing entry period kicks off Monday morning, running 9:30 a.m.—3:30 p.m. Monday through Wednesday.

Don’t Forget the Suite!

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.

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- Wake Emergency Physicians

ACEP Advocacy Drawing Starts Monday

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
How to Succeed in the ED
by FRANCESCA BARATTA

Sometimes 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, chair 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.

Stay Organized and Updated with ACEP’s Terrific Trio

EMERGENCY PHYSICIANS ARE BUSY, which is why ACEP recently released a suite of benefits to help you stay organized, certified, and on track.

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 one 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.

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

The 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.

Hot Sessions
CONTINUED FROM PAGE 11

OCTOBER 27-30, 2014 • MCCORMICK PLACE • CHICAGO, ILLINOIS

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The Legal Implications of Capacity

by FRANCESCA BARATTA

When 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.

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Outbreak Alert! Tips to Tackle Infectious Disease

by VANESSACACERES

Ebola, MERS, Chikungunya. Infections often have strange-sounding 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 meningococcus, 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 stay at 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.

VANESSACACERES is a freelance medical writer based in Florida.

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What’s at the ACEP14 Resource Center? Nearly Everything

Where 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 one-stop shop, located inside the Exhibit Hall, showcases information about 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 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 a.m.–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 life-saving 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 research collaboration. He is 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 experience tremendous growth on a mission dependent on stellar financial performance. From membership, the annual budget, members’ equity, and the investment portfolio to ACEP PAC, 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 the clinical medicine and pediatrics 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, directed research of residents 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.

IN EMS 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 and 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 Emergency Medicine, the official journal of the Association of American Medical Colleges. Dr. Sklar’s contributions to emergency medicine and health care span the globe. As resident director of the Department of Health and Human Services, Dr. Sklar helped design an innovative program that emphasizes public health and injury prevention. A powerful advocate whose interests include quality improvement and injury prevention, Dr. Sklar’s work on migraine headache treatment has also contributed to emergency medicine clinical care.

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 of 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 has chaired the task force on Domestic Preparedness Against Weapons of Mass Destruction for the Office of Emergency Preparedness in the Department of Homeland Security. Dr. Waeckerle was invited by the Department of Defense to participate in the Defense Threat Reduction Board’s Task Force on Defense Against Biological Weapons and by the Veterans Hospital Administration to serve on the Technical Advisory Force on Domestic Preparedness.

ACEP Sections Can Help Your Practice

Need 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 in their first section is free!

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CAREER IN EMERGENCY MEDICINE
Catastrophic Injury Medicine
Cruise Ship Medicine
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Emergency Preparedness
Emergency Ultrasound
EMS/Pre-Hospital Care
Family Medicine
Free Standing Emergency Centers
Geriatric Emergency Medicine
International Emergency Medicine
Medical Humanities
Obstetric Medicine
Obstetrics
Palliative Medicine
Public Health Medicine
Quality Improvement and Patient Safety
Rural Emergency Medicine
Sports Medicine
Tactical Emergency Medicine
Toxicology
Trauma & Injury Prevention
Underserved and Hyperbaric Medicine
Wellness
Wilderness Medicine
Young Physicians

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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. BTG International Showcase
Mechanisms of Venom-Induced Coagulopathy
Room 470B
2:30–3:15 p.m. Durata Therapeutics Showcase
DAVANCE (dalbavancin) for Injection
Exhibit Hall

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

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McKesson Business Performance Services
Schuman Group

GOLD PATRONS
Intermedix
MedData

SILVER PATRONS
Durata Therapeutics
HBi

BRONZE PATRON
Samsung

“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 friends, 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 award winning food—there will be something for everyone!” – Matthew D. Bitner, MD, MEd, FACEP Chair, ACEP Educational Meetings Committee

“Staying up to speed at these product and service showcases.”

CHICAGO

Visitors guide

SEE THE SIGHTS

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.

DINE IN STYLE

1. Bartolli’s Pizza
1955 W. Addison St.
2. Staropolska
3030 N. Milwaukee Ave.
3. McCormick & Schmick’s Seafood & Steaks
41 E. Chestnut St.
4. The Capital Grille
613 N. State, Clair St.
5. Honky Tonk BBQ
1213 W. 18th St.
6. Artists Cafe Chicago
412 S. Michigan Ave.

FAMILY FUN

1. Museum of Science and Industry
57th St. and Lake Shore Dr.
2. LEGOLAND Discovery Center
600 N. Martingale Rd.
3. Adler Planetarium
1300 S. Lake Shore Dr.
4. Hershey’s Chocolate World
822 N. Michigan Ave.

AFTER HOURS

1. Murphy’s Bleachers
1545 N. Sheffield Ave.
2. Boiler Room
2210 N. California Ave.
3. Apollo Theatre Chicago
2540 N. Lincoln Ave.
4. The Comedy Bar
1157 W. Ontario St.
5. Jazz Showcase
806 S. Plymouth Ct.
6. Ditka’s Restaurant
100 E. Chestnut St.

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

WWW.ACEP.ORG/ACEP14

Emergency Health Partners has opportunities for Board Certified or Board Eligible Emergency 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. For immediate consideration, contact us at: recruiting@emergencyhealthpartners.com
Tell us what you’re looking for and we’ll point you in the right direction.

At TeamHealth, we start with you. Tell us where you want to go with your career. Are there certain parts of the country where you’d like to work? Share your goals with us and we’ll find the right path to get you there. Check out myEMcareer.com, email physicianjobs@teamhealth.com, or call 855.762.1648 today.

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!