American College of Osteopathic Emergency Physicians
MEMBERSHIP MEETING
The Palace Hotel
San Francisco, California
November 7, 2004

MINUTES

Juan Acosta, D.O.
David Alexander, D.O.
Victor Almeida, D.O.
Leonardo Altamirano, D.O.
Harris Baderak, D.O.
Fred Bailer, D.O.
Gaiti Bakhsh, D.O.
Gary Beasley, D.O.
John W. Becher, D.O.
Gregory Beirne, D.O.
Peter A. Bell, D.O.
Donald Beyer, D.O.
Craig Black, D.O.
Brad Blaker, D.O.
Brian Blaustein, D.O.
David Bogolub, D.O.
William Bograkos, D.O.
David Bohorquez, D.O.
Gary Bonfante, D.O.
Alyson Borgstedte, D.O.
Melinda Boye, D.O.
Thomas Brabson, D.O.
Bernadette Brandon, D.O.
Howard Brown, D.O.
Annette M. Brunetti, D.O.
Jeffrey Butler, D.O.
Joseph Calabro, D.O.
Victoria Camba, D.O.
Samuel Carino, D.O.
Fang-Chin Chiang, D.O.
Ben H. Chiapek, D.O.
Ronald Cohen, D.O.
Mario Cosenza, D.O.
Ronald Dean, D.O.
Paula DeJesus, D.O.
Michael Denney, D.O.
Carl Desiderio, D.O.
Paul DiModica, D.O.
Joseph Dougherty, D.O.
G. Philip Douglas, D.O.
Michael Q. Doyle, D.O.
Paul Dubiel, D.O.
Carla’anne Dukes, D.O.
Martin Dunsky, D.O.
Kevin Durell, D.O.
Michael Eastman, D.O.
Anita Eisenhart, D.O.
Kindra Engle, D.O.
James Eutzler, D.O.
Elizabeth Evans, D.O.
Charles Fitch, D.O.
Bryan Fitzgerald, D.O.
Edward Fog, D.O.
Mark Foppe, D.O.
William Franklin, D.O.
J. Gregory Frappier, D.O.
William Fraser, D.O.
Alice Frazier, D.O.
Wayne Freeman, D.O.
Joseph Frontino, D.O.
Gregory Fuller, D.O.
Patrick Gannon, D.O.
Tressa Gardner, D.O.
Cynthia Gessler, D.O.
Christine Giesa, D.O.
Jon R. Gildea, D.O.
Alan Goodrich, D.O.
Gregory Gray, D.O.
Brett Greenfield, D.O.
Jeffry Greenlee, D.O.
Raymond Griffith, D.O.
Michael Guttenberg, D.O.
E. Rodrigo Guzman, D.O.
William Halacoglu, D.O.
David Hale, D.O.
Regina Hammock, D.O.
Gregory Hammons, D.O.
Douglas Harmon, D.O.
Jeffrey Harris, D.O.
Todd Hartgerink, D.O.
David Hearld, D.O.
Joseph Heck, D.O.
Bernard Helicser, D.O.
Douglas Hill, D.O.
Philip Howren, D.O.
Stephanie Hughes, D.O.
Joseph Hummel, D.O.
Lisa Hung, D.O.
Ira Brady Husky, D.O.
Anwer Hussain, D.O.
George Hutchins, D.O.
Alan Janssen, D.O.
Anthony Jennings, D.O.
Grace D. Jones, D.O.
Gregory Jones, D.O.
Wayne Jones, D.O.
Ebrahim Karkavandian, D.O.
Elizabeth Kassapidis, D.O.
Dmitriy Katkavandian, D.O.
Diana Kessler, D.O.
Drew Koch, D.O.
Lawrence Kohn, D.O.
William Kokx, D.O.
Joseph Kuchinski, D.O.
Jay Kugler, D.O.
Paul LaCasse, D.O.
James Lambros, D.O.
David Lang, D.O.
Nicole Lang, D.O.
Bret Langerman, D.O.
David Larkin, D.O.
John Larsen, D.O.
Joseph Lemmons, D.O.
David Levy, D.O.
Kevin Loeb, D.O.
Michael LoGuidice, D.O.
Beth Longenecker, D.O.
Khoa Luong, D.O.
Ned Magen, D.O.
Raymond Malta, D.O.
Paul Martin, D.O.
Bruce Marts, D.O.
Nuncio Massara, D.O.
Manjushree Matadial, D.O.
Michael Matthews, D.O.
Jennifer Matzner-Abrams, D.O.
Lawrence Mazur, D.O.
Matthew McCarthy, D.O.
James McCorry, D.O.
Cathleen McGovern, D.O.
James McMullen, D.O.
Mark Menadue, D.O.
Stephen Mifsud, D.O.
Jonathan Mihok, D.O.
David E. Miller, D.O.
Thomas Minahan, D.O.
Mark Mitchell, D.O.
Monte Mitchell, D.O.
Gary Moorman, D.O.
Javier Morales, D.O.
Michael Morgenstern, D.O.
E. Scott Morrison, D.O.
Thomas Mucci, D.O.

Minutes, ACOEP Membership Meeting, November 7, 2004  1
The meeting was called to order by the President, Victor J. Scali, D.O., FACOEP at 5:07. Dr. Scali welcomed the members and asked for a motion to approve the Minutes from the April 2004 meeting.

A motion was made and duly seconded to approve the Minutes of the Membership Meeting of April 16, 2004, as written.

At this time, Dr. Scali asked that the first of the Candidate running for election to the Board of Directors to make a brief statement of his or her qualifications for a position on the Board. One by one the following Candidates approached the podium and gave brief presentations: Gregory M. Christiansen, D.O., FACOEP, Bernard Heilicser, D.O., FACOEP, Douglas Hill, D.O., FACOEP, Anthony Jennings, D.O., FACOEP, Joe A. Nelson, D.O., FACOEP and John C. Prestosh, D.O., FACOEP.

Following these presentations a vote was taken of the membership present and members of the ACOEP Staff and Nominating Committee members retired to count the vote. The outcome of this vote will be announced as the final order of business.

**Officer Reports**

Dr. Scali gave a brief report summarizing his last two years as President. He stated that he it was his honor and a privilege to serve the membership and Board of Directors as President of this College. He
stated that it was time to “pass the torch”, from one president as he transfers the leadership of the present administration to the incoming president. He thanked the members of the Board of Directors and its Officers for their hard work, expertise, and personal guidance and advice during the last two years of my presidency. Their individual leadership has insured the future growth of this College. He also thanked the Executive Director, Jan Wachtler, ass the constant whose leadership and management skills on a daily basis keep our College on a steady forward course and the staff of the College.

He stated that we have made great progress with respect to raising the bar on resident research education and production within our growing number of residency programs thanks to the work of the Research, GME, and Program Directors’ committees. Through a FOEM grant, the Internet based Resident Research Education Program will become a reality ahead of the projected 2005 implementation date. The Research Consortium has evolved under the auspices of the Foundation as a tool to enhance research participation by residency sites and non teaching hospital centers. The Consortium is currently updating its database of participating members. Pharmaceutical companies and contract research organizations queried to date have expressed a great interest in accessing the comprehensive databases of potential sites for national multi-center drug and device trials through FOEM web page access.

He addressed the humanitarian initiative by our College, we have established a close partnership with The International Center to Heal our Children based at Children’s National Medical Center (CNMC), whose mission is to help foster, promote, and maintain the emotional health of our Children who are traumatized psychologically by acts of terrorism, interpersonal violence and natural disasters.

Finally, he announced a partnership with the Centers for Disease Control (CDC) and ACOEP during the last year that continues to grow through liaison with our EMS Committee. Dr. Sherlita Amler, with the division of mass casualty preparedness has addressed our Committee in the spring 2004 meeting in Arizona as we further synchronize our organizations in the event of potential future terrorist acts.

**President – elect** Dr. DeJesus gave her report and summarized her experiences with meeting with the AOA and the number of resolutions that are reviewed by its House of Delegates and Board of Trustees that deal with and could impact the specialty of emergency medicine.

During the past summer, the AOA and representatives of the ACOEP reviewed issues at the House of Delegates that dealt with student loans, adaptations within our basic standards for training in emergency medicine, and strategies that would streamline the approval processes for physicians who have completed allopathic training wishing to re-enter the osteopathic certification process. Other issues dealing with review processes for certification and medical liability reform were also discussed at this level.

**Treasurer** – Dr. Brabson, stated that the Finance Committee met and reviewed the FY 2003-2004 tentative year-end figures. Each section was reviewed and discussed. With respect to the revenue streams, it was noted that we have experienced approximately 4% per year attrition rate over the past couple of years. He also reported that this past year all CME courses generated less revenue than budgeted. One course on toxicology was not presented and the Committee discussed whether it would be beneficial to partner with other agencies on some other organizations on the presentation of smaller meetings.

Looking ahead to fiscal year 2004 – 2005, the proposed budget was reviewed by each line item. After adjusting a few of the entries, the following recommendations were discussed to reduce any possible budget deficits in future years. The Board for this current fiscal year approved a budget of $1,192,764.63.

**Executive Director** – Ms. Wachtler gave her report as written summarizing the current membership of 1916 total members with 74% being in the Active Member category, 23.5% in Resident Membership and other types of membership being 2.5%.

She explained that the Office has been working with vendors to provide more services to the membership, and explained that with a potential gain in membership in the next few years, other services besides the normal rental car agencies and travel aids could be pursued.

In an effort to ease confusion with various aspects of membership, new Staff Liaisons have been assigned to specific areas to assist the Members and Committees. The assignments are as follows: Julie Evans, for
Affiliated Agencies

ACOEP-Student Chapter – Nicole Ottens, the President of ACOEP-SC expressed what a wonderful year this has been for the Student Chapter. She stated that the Chapter has experienced great growth and that they met their goals to refine our organization, improve our level of respect within our profession and nationally, and take on more responsibility.

During this past year, the Chapter has reassessed its own wants and the needs of the Students Members. They have empowered their members to become involved and have attempted to become more efficient by developing a mentoring system for its committees.

Foundation for Osteopathic Emergency Medicine – Dr. Kuchinski, President of the Foundation reported to the membership that the Foundation is alive and well. However, during this past year, donations have dropped a bit and will need further support to continue to support its mission.

During this year, the Foundation began a marketing campaign. The first step was to work on our image and with that came the redesigning of our logo and stationary as well as the creation of a website. You can view our website at foem.org. The website features all of our grant documents as well as information about contributions. Due to security concerns we are not currently able to take on-line donations, however, this will be implemented during the next calendar year. We have also developed a new marketing brochure that has been on display at the ACOEP booth and outside the meetings. During the next month, the grant handbook will be revised and redesigned for distribution to all residency programs (osteopathic and allopathic) and any one interested is participating in research. This new document will also be featured on the website.

We have also created our own credit card processing mechanism and for those of you who donated to the Foundation after September 1st, you will have noted that your credit card donations were acknowledged through an e-mail and followed up with a letter from our office formally acknowledging the donation.

Liaison Organizations

American Osteopathic Board of Emergency Medicine - Dr. Staffin, Secretary of the AOBEM gave the Board’s report. He emphasized the implementation of the new process of Continuous Certification in Emergency Medicine (CCEM). As is expected with change, numerous questions have been forwarded to AOBEM by its diplomats regarding CCEM. While these questions have been answered promptly, it is expected that many questions remain. AOBEM wishes to thank the ACOEP Board of Directors for allowing AOBEM the opportunity to address these issues at the upcoming ACOEP general membership meeting.

The body of our report is as follows.

AOBEM Examinations

1. Primary Certification in Emergency Medicine
2. Continuous Certification in Emergency Medicine
3. Certification of Added Qualifications

Primary Certification in Emergency Medicine
Part I

The written portion of the primary certification process was offered this past February. 167 candidates participated in the exam. 130 candidates passed the exam for a pass / failure rate of 77.8%. A separate report has been forwarded to the ACOEP’s Executive Director indicating the pass / fail rate by osteopathic emergency medicine program with the intent that this information will be shared with the ACOEP’s Graduate Medical Education Committee.

Part II

The oral component of the primary certification process was offered this past June 2004. 70 candidates participated in the exam. 67 candidates passed the exam for a pass / failure rate of 95.7%. A separate report has been forwarded to the ACOEP’s Executive Director indicating the pass / failure rate by osteopathic emergency medicine program.

Part III

The clinical component of the primary certification process is currently ongoing.

The candidates that successfully complete this final component of the primary certification process will be recommended for certification by AOBEM to the Bureau of Osteopathic Specialists (BOS) this coming January 2005. With the BOS’s approval, the candidates will then be presented to the AOA’s Board of Trustees (BOT) in February 2005 for certification in emergency medicine. Upon the approval of the BOT, the candidates will be granted certification in emergency medicine by the AOA.

Recertification

In 2003, 42 diplomats participated in the recertification process. 18 diplomats elected to participate in the written recertification exam. 18 diplomats passed the exam for a 100% pass / fail rate. 24 diplomats elected to participate in the oral recertification exam. 22 diplomats passed for a 91.6% pass / fail rate.

The successful 40 diplomats were recommended to the BOS for recertification this past January 2004. After the BOS’s approval, the diplomats were presented for recertification to the BOT in February 2004. Upon the BOT’s approval, these 40 candidates were granted 10-year recertification certificates in emergency medicine by the AOA.

30 diplomats are scheduled to take the Formal Recertification Exam (FRCE) this coming November 13, 2004. This will be the first offering of the FRCE since the initiation of the new process of Continuous Certification in Emergency Medicine (CCEM) this past January 1, 2004. Upon their successful completion of this exam, they will be presented to the BOS in January 2005 for recertification by the AOA.

As of November 1, 2004, there are 1,274 diplomats certified in emergency medicine by the AOA.

Continuous Certification in Emergency Medicine

As of January 1, 2004, the episodic recertification process ended. The diplomat receiving a certificate in year 2004 will be immediately eligible to participate in CCEM in its entirety culminating in the year 2014 when the diplomat can elect to recertify by participating in the Formal Recertification Examination (FRCE). Diplomats with certificates that expire prior to 2014 will be phased into the CCEM process (see attachments) if they desire to recertify.

He explained that CCEM consists of four components over the 10-year period of continuous certification. The components are as follows:

1. Evidence of Professional Status
2. Evidence of Practice Status
3. Evidence of Participation in Lifelong Learning
4. Demonstration of Practice Performance and Cognitive Knowledge

The professional status component is fulfilled by providing evidence of an unrestricted, unqualified license to practice medicine. The practice status component is fulfilled by providing evidence of the active practice of emergency medicine or its related activities. The third component is fulfilled by the participation in and successful completion of the required number of Continuous Osteopathic Learning Assessments (COLA). The fourth component is fulfilled by the successful completion of the FRCE.

**National Association of EMS Educators** - Dr. DeJesus reported on the meeting of September 7 – 12, 2004 which was held in California. She reported that the Association continues to actively participate in the development of the implementation of EMS Education Agenda for the Future with the National Highway Traffic and Safety Administration (NHTSA). The Scope of Practice, which has been lead by the State EMS Coordinators and regulators, is released. NAEMSE will take the lead on the Educational Standards section will follow. If you are interested in participating submit your letter of intent, CV and 2 letters of recommendation to the Association.

**National Registry Emergency Medical Technicians** - Dr. DeJesus reported on the Board meeting of June 2004, which included participants from ACEP, NAEMSP, NAEMS, NCSEMSTC, AAA, IAFC, NHTSA, ACS, AHA, military representatives and others. There are five committees, the Executive Committee, Standards and Examination, Data Utilization and Information Technology, Community Relations and Nominations.

In 2004, the Registry has officially certified its one millionth NREMT, a paramedic from Midland, Texas. There was discussion related to NREMT recognizing programmed courses. It was felt they would continue to require CPR and ACLS. There was uncertainty if other courses would be recognized. They will discuss this with CECBEMS and state representatives and finalize a position.

**Committee Reports**

**Ad Hoc Committee on Pediatric Emergency Medicine** - Dr. Eisenhart reported on the Committee’s development of several surveys to be sent to varying groups of physicians over the next four months. The results of the surveys should provide more direction for the Committee and whether it should precede in the establishment of a pediatric emergency medicine fellowship and CAQ.

**Emergency Medical Services** - Dr. Bograkos discussed the continued low attendance at the Tactical EMS meeting, and suggested options of informing other specialty physicians of upcoming Tactical EMS meetings, including advertising in The D.O. magazine to attract physicians from other specialty areas who may wish to attend as members.

To assist the Committee in dealing with the broadening scope of Emergency Medical Services, the Committee discussed forming several new subcommittees whose focus would be narrower than general EMS. The suggested subcommittee would deal with domestic preparedness. The subcommittee’s focus will be only on issues of homeland security and will be meet prior to the full meeting of the EMS Committee and submit a written report to the EMS Committee for incorporation into its agenda.

**Communications Committee** - Dr. Koch discussed the Committee discussed the development of several subcommittees to take charge of the development of articles, recruitment of authors and advertiser recruitment. Discussion centered on the recruitment of authors who will make the commitment to produce several articles over the period of 2 years. Some of the incentives discussed were the inclusion of article publication in The Pulse, as criteria for Fellowship within in the College, and the development of financial incentives.
The Committee made a motion to request that all committee chairs be required to submit 4 to 6 articles for publication over their term as chair of ACOEP committees. The articles would not have to be written by the chair, but could be done by members of the Committee and submitted through the Chair to the Editor. Additionally, the Committee moved to offer College members the ability to submit 8 articles over the period of 2 years in which 6 must be approved for publication. If a minimum of six are accepted for publication, the member would be granted free tuition to the next Spring Seminar after the submission of the sixth article.

**Continuing Medical Education** – Dr. Eisenhart stated that due to continuing escalation of costs of printing, the Finance Committee recommended that all seminar material be distributed on CD-ROM beginning with the COLA Essentials course in February. Material will be submitted according to the guidelines but registrants will be informed that information will no longer be on paper and that CD-ROMs will be sent out to them approximately 2 weeks prior to the Seminar. A number of PC stations will be set up at meeting sites for those on-site registrants who wish to print the material at their own expense. This pilot program will be monitored and information submitted to the Finance and CME Committees for possible continuation in the fall of 2005.

She also announced that the Oral Board Review course is being revamped and should premiered in either the spring or summer of 2005 which will bear more resemblance to the oral board tests.

The Committee was introduced to a new Subcommittee, the OMM Education Subcommittee. The Subcommittees goals will be to offer training courses, lectures at ACOEP’s bi-annual meetings, which will serve as refresher courses for students and residents, as well as provide lectures and CD – ROM materials to answer questions on OMM billing and coding questions. The Subcommittee will also provide clinical scenarios and how – to guidelines.

The Committee discussed having an Emergency Airway Course with a course coordinator of Gregory Christiansen. The Committee decided the course would be held in Washington, D.C. in August 2005. The course would be limited to 40 participants.

**OMM Subcommittee of CME** - Dr. Mulligan stated that this subcommittee met for the first time and developed the following mission statement to direct future actions:

- The Subcommittee on OMM Education of CME will exist to promote OMM in acute care setting;
- to promote training in osteopathic emergency residency programs, to promote resources for training practice in evaluation and billing.

**Governmental Affairs** - Dr. Kuchinski stated that the 2005 DO Day on the Hill has been scheduled for April 14, 2005. He urged everyone to take action and contact their state constituents for action on issues pertinent to PLI and healthcare reform. The Committee discussed the numerous ways to develop relationships with State and Federal level liaisons.

**Graduate Medical Education** - This report was given as written and included statistics about the programs that have been reviewed and acted upon during the past few months.

**Membership** - Dr. Sturkie stated that the Committee has reviewed the current benefits of Membership in ACOEP which, are car rentals discounts; airline travel discounts; travel assistance; financial planning; and member tuition discounts to determine what more could be developed. Suggestions included pre-taxed salary withdrawal for payments of tuition and dues, discounts at major chains and computer vendors. The Committee discussed investigating the cost to put COLA articles on CD ROM either as a member benefit or at a cost to the members.

**Practice Management** - Dr. Brabson stated that the Committee discussed the creation of a Pre EMS Diversion policy. The purpose of the policy would give hospitals a plan to prevent going on diversion and if a hospital does go on diversion what to do once on diversion.
Research – Dr. Janssen reported that the Committee received a report on the research modules that are currently being developed with KCOM to allow core faculty and PGY-3 and PGY-4 residents to gain training in research prior to the end of the 2004-05 training year. The modules will be reviewed once more to determine if all the anomalies were removed and would then be implemented for general training use after January 1, 2005.

The Committee also received a report from the Administrator of the Consortium for Research in Emergency Medicine (CREM) concerning the development of the database which will be housed on the Foundation’s website and used to attract pharmaceutical companies and others seeking multi-centered research opportunities. To date, there are 7 training institutions that have sent in information and the Foundation will be contacting the remaining 32 training institutions to determine their interest level. It is the hope of the Foundation that we will have all programs join in this effort.

The Committee was also utilized as a review committee for three grants submitted to the Foundation for Osteopathic Medicine. The Committee requested that several changes be made to the review process to enable them to review the submitted grants either online or via email to avoid costly shipping, and to submit its evaluations via a secured link on the Foundation’s website. This process would be revamped within the next 8 weeks and be available for use during the next grant cycle.

Undergraduate Medical Education – Dr. Jennings stated that the Committee discussed identifying mentors for the Students who are interested in emergency medicine. On the 2004 – 2005 membership renewal form there was a box that you can check asking physicians if they are interested in becoming a mentor. So far we have about 100 physicians interested.

The Committee also discussed letting the Student Chapter know that there are physicians who are interested in mentoring and matching them with physicians. The Committee also discussed having a mechanism for evaluating mentors. The Committee will also create a guide to help physicians know how to mentor students at different levels of there learning.

The Committee also discussed the Student Lecture Series. They have approximately 30 lectures including Trauma, EKG, Stroke, Sexual Assault, Toxicology, Chest Pain, Airway Management. The Committee would like to have a mechanism for physicians to manipulate the content of the lectures so the user can make changes to the lecture.

The Committee also discussed the Student Case Presentation, this year John Dery won with his case “The Trouble with John Doe” he will present his case on Tuesday November 9, 2004. The Committee also decided to dispense with the Student Case Competition that is due to the lack of interest by the Students.

Voting Results

Dr. Scali announced the results of the balloting for positions on the Board of Directors. Prior to announcing the winners, Dr. Scali informed the Membership that beginning with this election, newly elected board members would be subject to term limits which would limit members to a term of a total of nine years. This would only be extended if the member was in the President –elect or President position at which time he or she would complete the term of that office.

At this time he announced that Dr. Christiansen, Dr. Hill, Dr. Jennings, and Dr. Nelson were elected to three year terms on the Board.

The floor was turned over to the members for questions, there being no questions, the meeting was adjourned at 6:15 p.m.

Respectfully submitted,

Peter A. Bell, D.O., FACOEP
Secretary