

American College of Osteopathic Emergency Physicians
MEMBERSHIP MEETING
Wigwam Resort
Litchfield Park, Arizona
April 16, 2004

MINUTES

Juan Acosta, D.O.
Victoria Allison, D.O.
Alwin Arendse, D.O.
Julianna Batizy-Morley, D.O.
Gregory Beirne, D.O.
Frank Benes, III, D.O.
Donald Beyer, D.O.
Mark D. Beyer, D.O.
Janice Blau, D.O.
William Bograkos, D.O.
Gary Bonfante, D.O.
Matthew Boyer, D.O.
Thomas Brabson, D.O.
Alkesh Brahmabhatt, D.O.
Kevin Brown, D.O.
Russell Burkett, D.O.
Denise Buruse, D.O.
Jeffrey Butler, D.O.
Bradley Campbell, D.O.
Fang-Chin Chiang, D.O.
Ben H. Chlapek, D.O.
Thomas Cliatt, D.O.
Ronald Cohen, D.O.
Stephen Corriz, D.O.
Duane Corsi, D.O.
Mario Cosenza, D.O.
Michael Dargay, D.O.
P. Willoughby DeJesus DO
Phillippe deKerillis, D.O.
Paul DePonte, D.O.
Julia DiCicco, D.O.
William DiCindio, D.O.
Robert Dinwoodie, D.O.
Arthur Dortort, D.O.
Michael Q. Doyle, D.O.
Anita Eisenhart, D.O.
James Farinosi, D.O.
Clifford Fields, D.O.
Mark Foppe, D.O.
Apiwat Ford, D.O.
Iris Ford, D.O.
Alice Frazier, D.O.
Howard Friedland, D.O.
Raul Garcia-Rodriguez, D.O.
Mitchel Garfield, D.O.
Leon Garner, D.O.
Brent Gear, D.O.
Timothy Genetta, D.O.

Christine Giesa, D.O.
Eric Gloss, D.O.
Edward Goetten, D.O.
David Goff, D.O.
Stephen Grider, D.O.
Anthony Guarracino, D.O.
William B. Halacoglu, D.O.
Todd Hartgerink, D.O.
Daniel Hearld, D.O.
Melvin Hecker, D.O.
Bernard Heilicser, D.O.
Douglas Hill, D.O.
Michael Hoh, D.O.
Raymond Hughes, D.O.
Robert Hunter, D.O.
Anwer Hussain, D.O.
Christopher Jackson, D.O.
Anthony Jennings, D.O.
Bobby Johnson, D.O.
Wayne Jones, D.O.
Stephen Kaiser, D.O.
Randy Kellenberger, D.O.
Raymond Kelly, D.O.
Kim Kemerer, D.O.
Valerie Kemsuzian, D.O.
Gregg Kling, D.O.
Drew A. Koch, D.O.
Shahrokh Kohanim, D.O.
William Kokx, D.O.
Jay Kugler, D.O.
Paula Lange, D.O.
Teddy Lee, D.O.
George Librandi, D.O.
Kevin Loeb, D.O.
Beth Longenecker, D.O.
David Malicke, D.O.
Bruce Marts, D.O.
Manjushree Matadial, D.O.
Robert May, D.O.
Lawrence Mazur, D.O.
Roger Meadows, D.O.
David Mikolajczak, D.O.
David E. Miller, D.O.
Mark Mitchell, D.O.
Javier Morales, D.O.
E. Scott Morrison, D.O.
Gilbert Mosher, D.O.
Robert Mott, D.O.

Terrence Mulligan, D.O.
Joe Nelson, D.O.
Mark Netzel, D.O.
Matthew Nickerson, D.O.
Jessical Normile, D.O.
Paul Numsen, D.O.
Joseph Obebe, D.O.
Robert Ormanoski, D.O.
Michael Oster, D.O.
John Pakiela, D.O.
Kristyna Paradis, D.O.
Steven Parrillo, D.O.
Ernest Patti, D.O.
Mark Persin, D.O.
Katherine Pitus, D.O.
Christopher Posey, D.O.
John Prestosh, D.O.
A. Qabazard, D.O.
Ivan Raimi, D.O.
Karen Rickert, D.O.
Brian Robb, D.O.
Charles Ross, D.O.
Kevin Roth, D.O.
Otto Sabando, D.O.
Brian Saracino, D.O.
Victor J. Scali, D.O.
Arnold Schiller, D.O.
Henry Schuitema, D.O.
John Scranton, D.O.
Jane Sennett, D.O.
Martha Shadel, D.O.
Michael Sheehy, D.O.
Lee M. Shriner, D.O.
Duane Siberski, D.O.
Lori Siemon, D.O.
Bryan Staffin, D.O.
Jack Stinogel, D.O.
Murry Sturkie, D.O.
Glenn Suacillo, D.O.
Robert E. Suter, D.O.
David Tilles, D.O.
Michael Todd, D.O.
James Turner, D.O.
Jeffrey Umfleet, D.O.
John Urbanek, D.O.
Tami VanVoorst, D.O.
Timothy Vader, D.O.
Stevan Vukovic, D.O.

David Welch, D.O.
Fred G. Wenger, D.O.
Thomas Westenberger, D.O.

Elaine L. Wilk, D.O.
Thomas Wills, D.O.

Jennifer Wilson, D.O.
Warren Wisnoff, D.O.

The President, Victor J. Scali, D.O., FACOEP called the meeting to order at 12:30 p.m. At this time, Dr. Scali announced that this meeting would be presented in a different fashion than those in the past, with Committee reports presented only in written format. This change is being made to accommodate a special report by Bryan Staffin, D.O., FACOEP, Secretary of the American Osteopathic Board of Emergency Medicine on the COLA examinations and the entire certification process.

At this time, Dr. Scali thanked the membership for attending this meeting and asked for a moment of silence in honor of Robert D. Aranosian, D.O., FACOEP who was killed in a fatal car accident in December 2003.

Report of the Officers

President's Report - Dr. Scali briefly informed the membership of problems that the ACOEP encountered with its website and transferring of domain name ownership. These problems have delayed the creation of the College's new website and has interfered with communication with the office and on-line registration. The new website should be up and running during the summer and should have a secured registration area to facilitate on-line registration beginning in August / September.

He announced that the College is strengthening our professional relationship with the American Osteopathic Board of Emergency Medicine (AOBEM) and are developing educational products that will enhance the continuing certification process for our members. We will provide the CME component for the COLA examinations and are currently pursuing the rights to provide the required journal articles for our members as a value added benefit of membership. AOBEM will be at the Membership Meeting to clarify the CCEM program and to participate in a question/answer session.

He also informed the membership that through extensive discussion with CDC's Chief Medical Office for NCIPC/DIDDOP, Dr. Sherlita Amler, the ACOEP will be providing the CDC with an EMS Expert Consultation Panel comprised of members of our EMS Committee to serve the CDC in times of future terrorist activity or mass casualty situations. We will synchronize our consultation service with the national FEMA regions and provide a regionalized roster of ACOEP members in affected regions who may be available to assist the CDC in management during these events. We will discuss further links with our residency programs, Emergency Nurses Association (ENA) and EMT/EMT-P organizations with which we have liaisons to strengthen our national response.

Lastly, Dr. Scali announced that the final format of our Power Point presentation that has been a collaborative effort with the International Center to Heal Our Children will available soon for use by the membership. An Instructor Training Program will be developed shortly as a self-learning, web-based venue to complement the Power Point educational CD-ROM. As you know ICHOC's mission is to provide parents and teachers with knowledge and resource materials to assist children to cope with the emotional stress caused by threats of terror, violence, or fear of natural disasters. Our liaison with ICHOC is the first ACOEP emergency medicine agency to be affiliated with this effort.

At this time, Dr. Scali asked for volunteers from the audience who would be interested in attending this workshop in August and a list was made for the future distribution of meeting materials.

President-elect Report – Dr. Paula Willoughby DeJesus gave a brief overview of her activities in the role of President-elect. This included attending the AOA Board of Trustees meeting in February where resolutions impacting were reviewed. She expressed her pleasure in serving the College and looked forward to opening a dialog with members as she approached the Presidency.

Treasurer's Report. Dr. Thomas Brabson presented a verbal report on the status of the College's finances. At the end of the fiscal year, September 30, 2003, the College had recorded assets of \$X,XXXX.XXX.XX. The 2003 – 04 year was the first year in which a million dollar budget was approved by the College and we anticipate that we will be on track to meet or exceed the budgeted income.

Executive Director's Report – Ms. Janice Wachtler presented her report as written. She expanded on Dr. Scali's report about the website and informed the membership that a "Member's Directory" would be on line following October 1, 2004 member year to ensure that the latest information is on-line in a protected format. Members would be allowed to change their own information and to look up basic information on other members.

She thanked the members for their participation in the 2003 Members Survey, the results of which will be circulated with the Dues Notices in August.

The membership of the ACOEP continues to grow and our membership is now 1948. This includes 1376 Active/Charter; Active, and Active-Exempt members; 533 Resident Members; 21 Intern Members, 7 Life Members; 8 Retired Members, and 3 Honorary Members.

Liaison Reports

American College of Emergency Physicians – Dr. Robert Suter, President-elect of the ACEP gave a brief report on the activities of this College. He summarized several different areas of activities including Medicare Reform, progress on Medical Liability Reform, Overcrowding, Rural Emergency Care and Unethical Testimony.

He also announced ACEP's priority objectives for 2004-05 which include, access; quality, crowding, liability and reimbursement.

At this time, the floor was turned over to the AOBEM that gave a detailed report of the COLA process and the revamped process for recertification. A summary of this report is as follows:

AOBEM has been active this year with 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 November 2003. 49 candidates participated in the exam. 44 candidates passed the exam for a pass / failure rate of 89.8 %. 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 in the process of completion. As of this date, 38 candidates submitted charts for review. 24 candidates passed the clinical component. 10 candidate submissions were incomplete (most due to insufficient CME). Pass / fail rate at this time is 83.3%.

The 24 candidates that successfully completed this final component of the primary certification process will be recommended for certification by AOBEM to the Bureau of Osteopathic Specialists (BOS) this coming June 2004. With the BOS's approval, the candidates will then be presented to the AOA's Board of Trustees (BOT) in July 2004 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.

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.

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.

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.

COLA's

COLA 1 came online this past January 2004. As of March 30, 22 diplomats have registered for the COLA. Four diplomats have taken the COLA and all four passed. These four diplomats will receive CME from the ACOEP for their participation in COLA 1.

Each COLA module is a 40 item web-based exam covering a portion of the core content of emergency medicine (see attachment). References and suggested readings for each COLA are available at AOBEM's website www.aobem.org. The exam is an **untimed, unproctored** exam. The exam is intended to be taken at the convenience of the physician at his own computer. The COLA will assist the physician in their review of a specified area of the core content.

Each COLA will be online for two years. The diplomat has three opportunities to pass an individual COLA though, given the fact that the exam is **untimed and unproctored**, it would be unlikely that the three attempts would be required.

FRCE

The fourth component of CCEM is the one-day FRCE. The FRCE consists of an abbreviated written exam and an abbreviated oral exam. These written and oral components are *different* than the Part I and Part II components of the primary certification process. They are designed to assess a *recertifying* diplomat's cognitive knowledge and practice performance.

The FRCE will be offered on November 15th, 2004 in Chicago. The application deadline for the FRCE is August 1, 2004. The application is available at the AOBEM website if the diplomat wishes to recertify.

Diplomats with certificates that expire in 2004 and 2005 will receive notification by AOBEM of the FRCE's availability.

Certification of Added Qualifications

The CAQ in EMS exam was offered this past February. Two diplomats participated in the exam. One diplomat passed the exam. AOBEM will recommend a CAQ for the candidate at this upcoming BOS meeting.

The next offering of a CAQ in EMS will be in 2006. The deadline for application is December 1, 2005.

The next offering of the CAQ in Medical Toxicology will be in 2005. The deadline for application is December 1, 2004.

A conjoint examination committee under the direction of the BOS administers the CAQ in Sports Medicine. AOBEM has participated in the conjoint examination process since its inception in 1996. The examination is given yearly at the AOA convention.

The Future

AOBEM is continuing to search for new modalities that will assist it in accomplishing its directives regarding certification in emergency medicine. If a new modality is found that maintains the integrity of the certification process, assures the quality of the certification process and is respectful of the physician's time and financial commitments, AOBEM will change to that modality. As always, the suggestions and comments of the ACOEP and its members are greatly appreciated as we navigate this new age of technology and web-based education.

In closing, AOBEM is appreciative of the support it receives from the ACOEP. The mutual cooperation and support the two organizations provide to osteopathic emergency medicine will ensure a future of excellence.

YEAR	Core Content Areas Covered
2004	Thoracic / Respiratory Disorders; Immune System Disorders; Musculoskeletal (non-traumatic) Disorders
2005	Nervous System Disorders; Toxicological Disorders
2006	Traumatic Disorders; Cutaneous Disorders
2007	Psycho-behavioral Disorders; Systemic Infectious Disease; Pediatric Disorders; Clinical Pharmacology
2008	Procedures & Skills integral to the practice of EM; Environmental

	Disorders
2009	Cardiovascular Disorders; Hematological Disorders
2010	Abdominal and Gastrointestinal Disorders; Obstetrics and Disorders of Pregnancy; Administrative Aspects of EM; EMS / Disaster Medicine
2011	HEENT Disorders; Endocrine, Metabolic, and Nutritional Disorders; Renal and Urogenital Disorders

The following reports were presented in written fashion to the Membership.

Chapters

Student Chapter - Nicole Ottens, President of the ACOEP-Student Chapter presented her report of the Student Chapter activities.

AOA Convention, New Orleans

The ACOEP - SC met on Friday, October 10th 2003 in New Orleans for their annual business meeting. There were fourteen students from seven schools in attendance. The meeting included executive board reports, local chapter updates, and presentations on OMEP by Dr. Mark Foppe, D.O., and the AAOA by President-Elect Shelley Wieting.

Saturday and Sunday students attended the Research Forum put on by Pfizer. On Sunday, October 12th the new SC-ACOEP officers were elected:

President- Nicky Ottens, MS-3 CCOM
Vice-Pres. - Jennifer Fredericks, MS-3 AZCOM
Sec./Treas.- Jeremy Selley, MS-2 KCOM
Comm. Off. - Adam Peterik, MS-3 OUCOM
Convention Committee Chair- Paul Duscher, MS-2 DMU
Resident/GME Committee Chair- Mike Remley, MS-2 UNECOM
Past President- John Dery, MS-4 CCOM

Strategic Planning-Refinement, Respect and Responsibility

At our first meeting with our new officers, we worked on our strategic plan for the next year. It was evident that revisions needed to be made, as our organization continues to grow. Our executive board and committee chairs have developed new goals to modify our practices, increase our visibility and strengthen our organization.

Refinement. In an effort to remove redundancy and use the student leaders more efficiently, we did away with the "Membership Committee". Membership involvement within the local chapters is already part of the executive board's responsibilities. The SC-ACOEP fully embraces Dr. Beehler's Year of the Mentor campaign. As students, we are acutely aware of the need for mentors. Part of that involves becoming mentors ourselves. While we have worked with Dr. Foppe, D.O. and the Osteopathic Medical Explorers Program (OMEP) in the past, we felt this project merited more individual attention. As such, we created the **OMEP Committee**, chaired by Natalie Zaharoff, MS-3 UHS. Dr. Foppe has generously donated \$2,000.00 to the SC-ACOEP for us to use as scholarships for the local ER Chapters and their efforts in supporting the OMEP.

Respect. Many steps are being taken in an effort to increase our visibility, validity and respect as a legitimate organization. One area we felt was important to address was our visibility. Not only increasing it within the local chapters, but also the ACOEP and the AOA. To facilitate this process, we created the **PR Committee**, co-chaired by Brian Kostuk, MS-2 DMU and Ralynne Maitland, MS-2 UMDNJ. This committee will increase awareness by having booths at the ACOEP Spring Convention and at the AOA Convention in the fall. Our Communications Officer has been working with them on the new tri-fold informational brochure. Additionally, as a means to distribute our promotional items (the Emergent and

new tri-fold informational brochure) this committee is also working with our Vice-President to set up fundraising projects such as a raffle at this convention. We are using the brochure at the Spring Convention to increase the ACOEP's awareness of what we do, and will send it out to the local chapters this summer to be included in the orientation information for new students. Another area of respect we feel strongly about is our role within the ACOEP. In an effort to enhance our validity as an important part of the ACOEP, we are proposing a resolution to be granted a voting position on the ACOEP board. We feel this will further enhance our relationship with our parent organization, give the students a national voice within their specialty college and recognize the legitimacy of the ACOEP - SC.

Responsibility. With the increased number of students involved in SC-ACOEP this year and the increased committees, there is much to be done. To keep on task and move forward with our various projects, we meet online every 4-6 weeks. We've set short-term monthly goals, such as increased communication with the local chapters, revamping our bylaws, revising our mission statement and updating our website. Long-term, we are working to increase our presence at national meetings and improve awareness of our organization through the PR Committee, The Emergent and the tri-fold brochures.

Several other committees are also strengthening their roles within the SC-ACOEP. The **Convention Committee** is working with TUORO and the San Francisco Fire Department to enhance the quality of our student program at the AOA Convention. We are also looking to build stronger relationships with those ahead of us thanks to the **Residency/GME Committee** and the Ad Hoc Committee set up by Dr. Scali last year.

We see our national leadership roles as an opportunity to give back to the profession and be mentors ourselves. As such, we are continuing to work with the OMEP organization as well as the AOA's Yellow Ribbon Campaign. Additionally, we are assisting VCOM in starting an Emergency Medicine chapter at their new school.

In closing, I would like to thank Dr. Scali, Jan Wachtler, Barb Guerra, and Katie Cavarretta for all of their hard work and dedication to our students. We greatly appreciate their support!!!

As always, if there is any further information that we can provide you, don't hesitate to contact us!

Affiliate Organization Reports

Foundation for Osteopathic Emergency Medicine – The following report was presented Dr. Joseph J. Kuchinski, D.O., FACOEP on behalf of the Foundation.

The Foundation would like to thank the ACOEP and its members for its continuing support over the past year. This year has seen enormous movement within the Foundation, with the incorporation of the Consortium for Research in Emergency Medicine as a section within the structure of the Foundation. With the incorporation of the Consortium, the Foundation will now be able to solicit research projects from pharmaceutical companies and disperse research dollars among member residency programs.

The Foundation has also instituted an image-enhancing effort and you, as members, will see the fruit of this campaign shortly. The logo of the Foundation has been changed and will begin appearing on revamped stationary and documents and on our new website which will be revealed later this summer.

These changes take funds, and so the Foundation will unveil a new Capitol Campaign during the summer that will solicit support over a three-year period from pharmaceutical and equipment companies and members, like you. Although we have much support from ACOEP member physicians and their families, we have yet to make that important corporate connection that is required to make the leap to truly fund researchers doing work in emergency medicine. It is our hope that with the incorporation of research into residency training and the widening interest among our physicians, this will jump start the ability of the Foundation to take a more active approach to funding research in this field.

Again, we thank you for your continuing support and encourage you all to participate in our Annual Silent Auction that features activities and housing opportunities for your in San Francisco.

Committees

Continuing Medical Education - Dr. Anita Eisenhart presented this collaborative report of the subcommittees of the Committee on Continuing Medical Education.

The Committee discussed the incorporation of OMM and OMT into our future CME courses.

The Committee discussed making it mandatory for all speakers to submit a Power Point presentation a minimum of 4 weeks in advance of their presentation. The options available to facilitate this are: 1) Have the speaker mail a CD-ROM copy of their lecture that would be uploaded onto a "Master Disk." 2) The speaker would bring either a Pack and Go version of their lecture, or a jump-drive to be used on the master computer. A suggestion was made to have ACOEP provide a Jump-drive for each speaker, as an added incentive. Additionally, a structured format for these presentations would be developed and adhered to.

The Committee was updated on the 2004 Intense Review course participant feedback. The Committee agreed that the course was well received. The Committee also reviewed a report from the ACOEP, following several hotel site selections, for the 2006 and 2007 Intense Review course. It was decided by the Committee to accept the contract from the Westin River North hotel, and begin negotiations.

The Committee was updated on the 2004 Core Curriculum participant feedback. It was reported that most of the participants enjoyed the venue; some did not. Dr. Longenecker reported that the 2005 Core Curriculum course will focus on Toxicology and Neurological aspects; she is currently seeking a speaker for a Neurology lecture. AOBEM provided information to the CME Committee, regarding COLA certification. The Committee requested AOBEM to distribute the articles for COLA Modules at least at least 9 months in advance. The Committee also discussed the possibility of holding 2 Core Curriculum sessions, one in February and one in August. A suggestion was made to have the Committee develop an Internet-based course. However, ACOEP would need to investigate to determine if this is a worthwhile option, when the COLA Modules are already on-line. The Committee also reported that there is a limit to how many Internet CME Credits you may earn.

The Committee heard a report regarding topic possibilities for the 2005 Spring Seminar. Several topic suggestions were made and the CME Committee accepted the topics. The Committee also discussed options of when to hold labs, to make them better attended. A suggestion was made to have Dr. Christiansen present an Emergency Airways course, possibly to be held on Monday, March 28, 2005. Next year's Spring Seminar will be held at the Wild Horse Pass in Phoenix, Arizona, from March 29 – April 2, 2005.

The Committee was updated on the Tactical EMS program being sponsored at the Spring Seminar, Saturday, April 17, 2004 and discussed the potential for presenting the program again in the fall. The Committee reviewed the results of the 2003 member survey, in their interest in EMS lecture topics. The Committee is recommending that the EMS lectures be scheduled in multiple blocks of time, to increase attendance. They also recommended that the Committee integrates EMS lectures into the Scientific Seminar programming.

The Committee discussed the Oral Board Review and stated that the course needs revision to stay competitive with other agencies providing this type of course. Revisions and recommendations will be developed, brought back and reviewed by the Committee at its November meeting.

The Committee heard details about the finalized agenda for Scientific Seminar.

The CME Committee reviewed the 2003 member survey results, and agreed to incorporate members concerns and preferences regarding future CME courses.

Emergency Medical Services - Dr. William Bograkos presented this report on the activities of the EMS Committee.

Sherlita Amler, M.D., presented an Audio Visual report on the activities of CDC in the area of disaster preparedness. Her research included a request to the EMS Committee and ACOEP for assistance in developing and expanding a nationwide database of first responders and consultants. In response to her request, the Committee considered a motion to establish a formal liaison with CDC to help formulate and administrate this program. The Chair suggested CDC target the Residency training network through the President of ACOEP. Dr. Scali and Dr. Bograkos will meet with the CDC on the 28th of May in Atlanta.

The Committee reviewed a proposal to support the "Little Flower" Balkan Orphanage Project proposed by Dr. Bograkos. Vision would entail involvement with orphanages, clinics that support the orphanages, Pediatric Medical Centers, and the concept of EMS for Children. The Committee felt this was a worthy endeavor; however, felt it should be supported on an individual not a college wide basis.

The Committee was updated on the Tactical EMS initiative and the EMS Safe and Secure Environment Seminar being held on 17 May at the Spring Seminar. Because of the multi-disciplinary nature of TEMS, it is accepted that Dr. Heck will lead the evolution of ACOEP TEMS to AOA TEMS. The TEMS meeting in November will be open to all interested members at the AOA Convention.

The Committee reviewed the results of the 2003 members survey. There is documentation to show high interest in EMS lecture topics. The Committee is recommending to the CME committee that EMS lectures be incorporated in seminar schedules in either multiple hour blocks of time (modules) or daily one-hour segments. Stand-alone programs have proven unpopular with membership.

The Committee's response to the ACOEP's request to work with Homeland Security is that the college maintains its course of action in the area of community involvement, regional disaster preparedness and regional TEMS training

The committee is also proposing to the board to sponsor a memorial scholarship in the name of Dr. Robert Aranosian for tuition supplement for one EMS fellow annually.

The Committee sends special thanks to Barbara Guerra and Katie Cavarretta for their administrative support.

Graduate Medical Education – Dr. Jerry Balentine presented this report on the activities of the Committee on Graduate Medical Education at its October 2003 and January 2004 meetings.

Residency Training Programs. The ACOEP currently accredits 35 residency programs nationwide. During the past 6 months the Committee has reviewed six programs for continuing approval during these meetings. All six were granted continuing approval. It has also reviewed and approved 5 applications for new programs in emergency medicine were reviewed. Three new emergency medicine programs were approved; 1 application for a new program was deferred pending on-site inspection, and 1 program application was denied approval. New programs in EMS and the combined specialty of emergency medicine/family medicine were also approved.

The Committee also reviewed and accepted 12 reports of corrective action on previously cited deficiencies in existing programs that were inspected during 2003.

Basic Standard Revisions. The Committee has worked diligently since 2002 to rework and update the Basic Standards for Residency Training in Emergency Medicine. This document is reviewed by the Committee annually and revisions are generally made as needed, however, this review produced an entirely new document incorporating a new format instituted by the AOA in 2001. Also created during this period is a new document, Pre-Inspection Workbook for Emergency Medicine Programs, that will assist new programs in conducting a pre-application survey to determine if they are eligible to apply and to assist them in working their way through the standards for emergency medicine. This tool, piloted in 2001-02, has proven to be immensely helpful to new program administration.

The Committee also revised the Emergency Medicine Emphasis Internship to remove the requirement of a clinic rotation to complete the family medicine portion of the internship, and this was incorporated into the basic standards for the first time since its existence in the early 1990's.

The Committee also worked with the American College of Osteopathic Internists to revise the Basic Standards for Residency Training in Emergency Medicine/Internal Medicine to meet the required format of the AOA. This document will be reviewed by the AOA's Committee on Postdoctoral Training in April, 2004.

The Committee has developed core competencies for emergency medicine training and these will be incorporated into the basic standards as an appendix in April 2004.

Changes in the Evaluative Process. Beginning in January 2004, the AOA revamped its program accreditation process to incorporate a new committee called the Program Training Review Committee (PTRC) which will review only issues related to the training programs, like inspections, new program applications, increases, and residency issues. Policy review will fall to the Committee on Postdoctoral Training (COPT).

With the passing of Dr. Aranosian, who had served as the Committee representative and liaison between ACOEP and AOA, Dr. Balentine will assume this role beginning in April 2004. He has been appointed by the AOA President, Dr. Darryl Beehler, to be the Vice Chair of the PTRC.

Upcoming Events. The Committee will hold conference calls in April and June and will meet again formally in August. The August meeting will deal with the revision of the documents for combined programs in pediatrics and family medicine and the revision of the inspection manual for emergency medicine residency programs.

Membership and Credentials – Dr. Arthur Calise presented the following summary of the Committee's activities to the membership.

The Committee discussed new ideas for membership benefits. Some of the suggestions mentioned were discounts on airfare with major airlines, creating a rewards program for members, clarifying and marketing with Lydia's uniform company to put the ACOEP logo on lab coats and scrubs.

The Committee discussed the results of the 2003 Member Survey, which gave insight into the needs, and interests of our members. The Committee will be submitting its comments and concerns voiced by members to various other committees for comments and consideration at the November meetings.

The Committee discussed the Member Recruitment and Recruit-a-Member programs which were unsuccessful. At this time they are not reactivating this program but are considering the development of a program that would reward members for their loyalty and support of the College through their membership.

The Committee reviewed request for Life Membership in the college and recommended two of the three applicants for approval and referred one application for Board consideration. The Committee also reviewed applications for change of status for a member and recommended staff make the status change.

The committee reviewed the requirements for Associate membership and recommended to the Board that the cost of yearly membership for Associate members be reduced by approximately 55% to \$200 annually. The rationale for the reduction in dues for this class of membership is that Associate members are non-voting members and cannot hold office in the College. Additionally, this action may provide the College an additional revenue stream by allowing it to market Associate membership to part-time emergency physician and other practitioners.

Pediatric Emergency Medicine – Dr. Anita Eisenhart presented the following report to the membership of this Committee's activities.

The Ad Hoc Committee on Pediatrics met on Wednesday, April 14, 2004 for its second meeting since its formation last year.

The Ad Hoc Committee formally adopted its mission statement to address the educational, research, and political needs of the members of the American College of Osteopathic Emergency Physicians, so that each physician may offer the best possible care to the children they serve.

The Committee also formalized a mechanism to determine interest of the ACOEP members in several areas. They are: (1) the amount of pediatric emergency medicine training being incorporated into the current emergency medicine training programs; (2) the amount of pediatric emergency medicine cases being seen by residents in training, and (3) the amount of pediatric emergency medicine cases being seen by newly graduated residents and their perception of the training they received during their training in emergency medicine. The surveys will be sent to three distinct groups: Program Directors; OGME 2, 3 and 4 residents, and new graduates and will be distributed at different times over the next 9 months. Three survey tools will be utilized by the Committee to gather this information and it is anticipated that it will take approximately one year to collect and analyze the information returned.

The Committee has also asked that an additional survey tool be created and sent to Active members of the ACOEP with their dues notices to determine some of the same information as well as the level of interest among these members in establishing a mechanism to (1) gain formal training, i.e, a fellowship in Pediatric Emergency Medicine, and (2) a certification mechanism, such as a CAQ, in Pediatric Emergency Medicine. The results of these surveys will be shared with the American College of Osteopathic Pediatricians to determine their interests and the potential for creating both a joint training document and certification pathway. Certification in any area of emergency medicine or pediatrics is not within the purview of either College and therefore all results of any collaborative effort would be sent to both boards for final action on the creation of a possible Certificate of Added Qualifications or any other certification tool.

The Committee is scheduled to meet again in November and encourages any member interested in this area to join them as part of this Committee. Please contact the ACOEP office for further information on the dates for this meeting.

Program Directors Committee – Dr. Alexander Rosenau presented the following report on the February 2004 meeting of the Program Directors' Committee.

The Committee reviewed issues concerning research in residency training and how it should be implemented to best meet the needs of the current and future residents as well as osteopathic emergency medicine. The Committee is currently investigating several on-line services that will allow for distance training for residents and program faculty to become familiar with the basics of research.

The Committee is also investigating mechanisms to assist programs to network with each other and to share resources. Currently networks have been set up in Michigan and Ohio and have provided those programs with the ability to hold conferences and host events for the benefit of their residents and to strengthen their programs.

The Committee also discussed the length of training of osteopathic emergency medicine. The Committee will forward its concerns to the Committee on Graduate Medical Education for further consideration and possible action.

The Committee is also currently revising and updating the In-Service Examination and hopes to have a new format and examination in place before it is presented in April 2005.

Practice Management – Dr. Robert Dinwoodie presented the following report on the activities of this committee.

The Committee reviewed the current Practice Management policies and continued to endorse these policies as they are currently stated. The Committee proposed that a new policy on Public Access to Automated External Defibrillators as Policy Number 7 has been proposed to the ACOEP Board for approval.

To assist in keeping members informed of issues that may effect the practice of Emergency Medicine, the Committee is considering the development of a formal column in the College's publication, The Pulse, written by multiple authors. New policies currently being considered are for a pre-diversion policy; a "frequent flyer program," statement for drug seeking patients and a tPA policy for stroke patients.

Publications / Communications - Dr. Drew Koch presented the following report on the activities of this committee.

The Committee reviewed the current edition of The Pulse and its two newly featured columns, *In Focus* and a *Look at the Law*. The publication's newest feature, *In Focus*, provides the reader with an in-depth article on one facet of emergency medicine or a profile of a physician-member. The first column featured an in-depth question and answer article on the COLA and has been well-received by members who have provided feedback to the Committee or Office. The Committee outlined future topics for this feature that were assigned to specific authors for publications from July 2004 through April 2005. The other feature, *A Look at the Law* will appear periodically as laws are enacted that affect emergency medicine practice and its practitioners.

Additional new features for the publication and website were discussed and will be investigated further; these include a Clinical Images feature as well as an employment opportunities page and or website.

The Committee thanked Astra-Zeneca Pharmaceuticals for their continuing support and sponsorship of The Pulse through its four-page center spread. This advertising feature will be continued through April 2005.

The Committee discussed a mechanism to reward and acknowledge physicians who have supported the College through continued membership. A suggestion was made to provide each physician with recognition in the College's publication or website and a donation made to the Foundation in their names. This suggestion will be forwarded to the Membership Committee for consideration and possible further consideration.

Finally, the Committee discussed the ACOEP website re-development. Members were informed on events leading up to the dismantling of the current website and its redesign. The new site will provide members with easier navigation, an on-line members only directory and optional receipt of publications and advertisements in perfect document format only. The "new" website should make its debut in May 2004. Other new aspects of the site will be incorporated gradually over the summer with the entire site being completed no later than August 2004.

Research – Dr. Alan Janssen presented the following report on the activities of this committee.

The Committee reviewed the research competitions occurring at the Scientific Seminar in the fall of 2004. Based on the timing of the event, the Committee established a firm deadline for submission of material as being July 31, 2004. Applications received and postmarked after this date will be returned to the submitting party and will not be considered for participation in the event. Applications material will be submitted to hospitals in both electronic and paper copies and will be placed on the website. Application material may be submitted to competition coordinators electronically or via regular mail.

The Committee received an informational report from the Foundation for Osteopathic Emergency Medicine on its pilot program on Internet Research Training. The pilot participants found the information useful but it most experienced a high-level of technical problems with the program itself. The Committee felt that if technical problems could be resolved, the program would be utilized as a training tool for residents and core faculty.

The Committee discussed its submissions to the ACOEP publication, The Pulse, and developed a list of topics and authors for articles on research topics and other topics of interests from July 2004 through April 2005.

The Committee also discussed a protocol for the review of FOEM grants and recommended that this be further developed by the Foundation and submitted to the Committee for review by mail ballot in May 2004.

Undergraduate Medical Education – Dr. Anthony Jennings presented the following report on the activities of this committee.

Nicole Ottens, President of Student Chapter of the ACOEP presented the Committee with an update of the Chapter's activities during the past quarter. She stated that the goal of the Chapter was to increase visibility, validity and respect of the organization as a valuable asset to the ACOEP. She also reported that the Chapter met with the ACOEP Board concerning mentorship and a potential voting seat on that body. At this time, the Board is taking this under advisement and will report its decision to the Chapter after its meeting on Thursday, April 15th.

The Committee discussed their concerns with the lack of response for the Student Case Competition; at this time zero entries have been submitted. The Committee suggested the Student Chapter Officers network with other students through email to boost awareness of the competition, they also suggested extending the deadline date for submission to July 31, 2004 to coincide with other research competitions with extended deadlines. If response to the extension of the deadline is not met with a minimum of six cases, the Committee will reassess the funding of this research endeavor and investigate alternative projects to fund.

The Committee suggested creating a mechanism for Mentoring EM Student. It was recommended that the dues renewal form be adapted to allow for physician checkoff for those interested in mentoring students.

The Committee discussed expanding the student lecture series for fall of 2004 to include new lectures on Burn; Trauma and Pregnancy; Ethics; ACLS update; Weapons of Mass Destruction; Bio-Terrorism; Altered Mental Status; EMS History; Allergic Reaction; How to read a EKG; Chest Trauma; Pediatric Trauma; Hazmat Basics; Toxicology.

The Student Chapter President updated the Committee on the content of the ACOEP-SC web Page.

Miscellaneous

Nominations for the Board. At this time Dr. Scali announced that the following physicians have been nominated for positions on the Board of Directors of ACOEP: Gregory Christiansen, D.O., FACOEP, Robert Dinwoodie, D.O., FACOEP, Douglas Hill, D.O., FACOEP, Anthony Jennings, D.O., FACOEP, Joe A. Nelson, D.O., FACOEP and John Prestosh, D.O., FACOEP.

There being no further business, the meeting was adjourned by the President, Victor J. Scali, D.O., FACOEP at 1:45 p.m.

Respectfully submitted,

Janice Wachtler
Executive Director