

Colorado Chapter Update

A Newsletter for the Members of Colorado ACEP



Winter 2011

From the President Stephen Wolf, MD, FACEP

A Year's Review

It seems like just yesterday that I was sitting at CoACEP's 2010 Annual Meeting at Strings restaurant in downtown Denver. I remember thanking David Ross for his leadership and service as outgoing Chapter President and hoping that I would be able to fill his shoes.



Dr. Neal O'Connor (President) congratulating Dr. Stephen Wolf (Immediate Past President)

Towards the end of that meeting, I spoke about my goals for the upcoming year which centered on Representation and Advocacy, Education, and Networking. Now, at the end of my year as CoACEP President, I can only hope that

you, the members, feel that we have met those goals.

Representation and Advocacy

In the 2010 legislative session, CoACEP successfully advocated for fair payment from insurers with SB183, and the MOST (Medical Orders for Scope of Treatment) Bill, which allows patients to have a greater say in the provision of their medical care. Both of these significantly benefit Emergency Medicine and our patients.

Our Liability Task Force worked aggressively with CMS and COPIC to explore increasing liability protection for physicians who provide EMTALA-related care. Although we ultimately decided to hold on this concept given Colorado's current favorable political and medicolegal environment, important relationships were forged to help with future legislative efforts.

CoACEP was well represented at the May ACEP Leadership and Advocacy Conference in Washington DC, and we met with health care representatives for all of Colorado's congressional officials. In those meetings, we advocated for fixing the Medicare reimbursement formula (i.e., SGR) and assuring emergency medicine's value and role in future health care reform. Then, at ACEP's Scientific Assembly in September, Colorado representatives were extremely involved with determining national ACEP's 2011 agenda through our participation in the Council meeting. You should know that our advocacy extends far beyond simple meeting involvement to holding

Colorado Chapter ACEP

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Barb Burgess,
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significant leadership positions, with our members sitting on over 18 national ACEP committees, sitting on the AMA Relative Value Scale Update Committee (RUC), and serving as a Colorado AMA Delegate.

Education

This past year was full of educational opportunities for our members. In June, CoACEP sponsored Peter Rosen and Diane Birnbaumer as the keynote speakers at the Rocky Mountain Summer Conference on Emergency Medicine and Trauma. Then in July, at our traveling board meeting in Fort Collins, we hosted an excellent presentation on the state of health care in Colorado by State Senate Majority Leader John Morse and a lecture on pearls in toxicology by Kennon Heard, both of which were very well received!

CoACEP's second annual Symposium on Emergency Medicine was also an incredible success in November. This CME conference at the Brown Palace in downtown Denver had an overarching theme of neurologic emergencies. Nationally acclaimed lecturer, Greg Henry, gave an excellent keynote address on the quintiles of health care policy. Evaluations raved both about the symposium as a whole and specifically about the afternoon's mock trial presented in conjunction with COPIC. Just as was the case at last year's symposium, it was wonderful to see so many friends and colleagues from across the state. As a budget neutral process, this conference is purely for the membership and I am proud to be part of it.

Another wonderful educational success for CoACEP has been our new Leadership Fellowship. In this program, a member is mentored through real-world leadership experiences and sponsored to attend both the ACEP Leadership and Advocacy Conference and the annual national ACEP Council meeting. Our first fellow, Adam Barkin, just finished an incredible year and is going on to fill a CoACEP Board of Directors Position. We look forward to working with Nate Watkins this upcoming year.

Finally with respect to our educational goals of 2010, we have also worked to expand student and resident involvement with CoACEP. Now, in addition to two resident liaisons on the Board, we also invite two medical student liaisons (one from University of Colorado and one from Rocky Vista University). We know that these relationships will enhance our membership and improve our value to the emergency medicine community in Colorado.

Networking

Although every BOD meeting is open to the membership, we understand that many are not able to come for many reasons. Thus, we continued our tradition of taking one meeting a year on the road to allow members in that local community to get a better sense of what their Board does for them. This year's meeting was at the Armstrong Hotel in Old Town Fort Collins. Not only did we have excellent speakers, as mentioned above, but we also had nice participation with great networking opportunities. Additional networking opportunities occurred at a CoACEP hosted lunch during the RMTEM and our November Symposium. These events bring our community and emergency medicine in Colorado closer together.

Lastly, I will take one more opportunity to network with you. Please know that it has been an absolute pleasure and honor to serve as your chapter's president this past year. I thank each of you for the roles you played in our organization - from informed member to avid advocate to dedicated committee or Board member. In the end, you are ones who made CoACEP's 2010 goals achievable and my year one to remember!



Dr. Stephen Wolf presenting CO ACEP Legacy Award to Dr. Jim Thompson



Past Colorado ACEP President's attending Annual Meeting



2010 ACEP Council Meeting Summary

Adam Barkin, MD FACEP

Leadership Development Fellow, Colorado ACEP



The ACEP Council meets every year for 2 days prior to ACEP Scientific Assembly. It is the Council that works as one of the legislative arms to help provide guidance and governance for ACEP and its Board. The Council debates and then votes on various resolutions that are proposed by members.

At the 2010 Council meeting on September 26-27, the resolutions covered a wide range of topics – commendation for service, memorial for members who have passed away, changes in bylaws, legalization of marijuana, definition of emergency medicine, adoption of a single payer healthcare system, ED staffing by nurse practitioners and many more.

Before the resolutions come before the entire council, smaller groups hear debate regarding each resolution and modifications may or may not be made along with a recommendation for the Council at large. The Resolutions are then presented to the Council and are often amended, debated and reviewed. Finally, the Councillors vote on each Resolution as a body. In some cases a resolution will be defeated; others are referred to the ACEP Board and others are adopted.

This was my first Council meeting and it was fascinating. First, it is a gathering of some of the true leaders – past, present and future – of Emergency Medicine and an opportunity for a group of smart people to debate the course and future of our specialty and ACEP. Second, the debate on some resolutions – particularly like one on legalization of marijuana this year– can be heated but remains a civil process led by the Council Speaker who keeps order to the debate and procedures. Third, the Council meeting demonstrates some of the key issues we face as a college, a specialty and a profession. Among the topics discussed: how to classify disabled or retired members; encouraging advocacy programs in EM residencies; working with CMS on pilot projects for reimbursement; and working towards reform of medical liability.

There are many issues we face as emergency physicians – overcrowding, reimbursement and access to consultants. The Council and its members work to address some of these issues - both big and small – in an effort to help our specialty move forward. Issues are debated vigorously and votes are taken.

Attending this meeting was a fantastic opportunity to better understand the governance of ACEP, and gain a firmer grasp on the important decisions and debates we face as EPs. If you have the opportunity to attend a Council meeting, either as a Councillor, Alternate Councillor or otherwise, I highly recommend the experience.



Upcoming Colorado ACEP Meetings

March 23, 2011

May 18, 2011

July 27, 2011

September 28, 2011

November 16, 2011

Go to our [website](#) to keep up to date on all Colorado ACEP activities.



Clinical News

CMS Tweaks Hospital Sedation Policy, Again

The Centers for Medicare and Medicaid Services has revised its recently updated anesthesia guidelines, following complaints the policy was unworkable.

Hospitals are now directed to develop their own internal policies concerning what is anesthesia versus analgesia, which leaves open the option of using different guidelines in different clinical departments. The revisions also provide greater flexibility regarding pre- and postanesthesia evaluations, while particularly problematic references to propofol and labor epidural anesthesia were dropped entirely.

[Read the entire article online](#)

Food Allergy Guidelines Encourage Earlier Use of IM Epinephrine

New federal guidelines on food allergy recommend “prompt and rapid” treatment of food-induced anaphylaxis with intramuscular epinephrine as first-line therapy.

And in cases of a suboptimal response to epinephrine – or if symptoms progress – “repeat epinephrine dosing remains first-line therapy over adjunctive treatments,” the guidelines say.

The “consistency and strength” of the recommendation for prompt treatment with IM epinephrine may come as a surprise to some emergency physicians who “reserve treatment with epinephrine until patients are in shock, which is an extreme and late manifestation” of anaphylaxis, said Dr. Carlos A. Camargo Jr., an emergency physician who served on the multidisciplinary expert panel that developed the guidelines for the National Institute of Allergy and Infectious Diseases.

“Earlier diagnosis of anaphylaxis and earlier treatment with epinephrine would benefit patients,” said Dr. Camargo of Massachusetts General Hospital and Harvard Medical School, both in Boston. “The guidelines strongly encourage earlier use of IM epinephrine for food-induced anaphylaxis.”

[Read the entire article online](#)

Focus On: Best Practices for Seizure Management in the Emergency Department

“Focus On” is an ongoing series of articles that examine common complaints that present to the emergency department or highlight new literature or treatment options. The January 2011 article reviews the current evaluation, management, and disposition of patients presenting to the

emergency department with seizures.

Learning objectives for this article include the ability to discuss the presentation of seizure in the emergency department and common mimics of seizure; discuss the management of first-time and recurrent seizures in the emergency department; outline an aggressive treatment regimen for status epilepticus, including the emerging role of levetiracetam in the treatment algorithm; and list several practices that will improve the ED care of seizure patients.

[After reading the article, take the CME quiz online.](#)



Emergency Medicine Foundation Call for Proposals

EMF is pleased to announce a call for proposals due April 1, 2011:

Ultrasound Grant proudly underwritten by Siemens

The goal of this \$20,000, one-year grant is to gain a better understanding of the comparative effectiveness of emergency ultrasound as performed by emergency physicians.

EMF/EMPSF Patient Safety Grant

The goal of this \$10,000, one year grant is to identify ways and means to improve patient safety in emergency medicine.

EMF/Baxter Grant on Rehydration

The goal of this \$50,000, one year grant is to study subcutaneous rehydration for pediatric and/or adult patients in the emergency department.

EMF/ENA Foundation Team Grant

The goal of this \$50,000, one year grant is to have physician and nurse researchers combine their expertise to develop, plan, and implement clinical research in emergency care.



Welcome New Members

Jacob Y. Nacht

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