Rural Emergency Medicine Section  
Annual Meeting Minutes  
Sunday, October 2, 2022  
11:00 AM-1:00 PM PDT  
Hilton Union Square, San Francisco, CA

Attendees: 18 section members in person, 4 members via Zoom

Section officers in attendance:
Steve Jameson, MD, FACEP (Chair, 2020-2022), Viktoria Koskenoja, MD, (Chair-Elect, 2020-2022), Ken Gramyk, MD, FACEP (Immediate Past Chair, 2020-2022), Ben Knutson, MD, (Councillor, 2022-2024), Rick Carlton, MD, FACEP, (Chair-Elect, 2022-2024), Steve Haywood, MD, FACEP, (Secretary, 2022-2024), Ryan Stanton, MD, FACEP (ACEP Board Liaison) Kelly Peasley, ACEP Staff Liaison

Welcome / Chair’s Report – Steve Jameson, MD, FACEP
Dr. Steve Jameson welcomed the attendees and shared an update on some of the work the Section has been involved in over the course of his two-year term:  
1) Rural Task Force, focused on improving Rural health care, commissioned by Dr. Rosenberg during his term as ACEP’s President. The task force came up with several recommendations, which are still under review by the ACEP Board of Directors.
2) Accreditation Taskforce -looked at accrediting hospitals via a tiered system. The ACEP Board is reviewing; there are some good recommendations intended to improve rural healthcare by accrediting those facilities.

The focus for the Rural section has been to advocate for physician-led teams and to have an emergency physician presence in every emergency department (which can be cost-prohibitive for low-volume facilities.) While the section has developed recommendations and talking points, that work is still in progress.

Dr. Jameson shared that the section’s priority moving forward should be with putting the patient first in our discussions and taking the higher moral ground. Ideally, all sites will utilize physician-led teams, so that the best-trained providers in the rural facilities are able to care for patients. The role of the section remains to improve rural healthcare and help guide ACEP with policies.

Board Update – Ryan Stanton, MD, FACEP
Dr. Ryan Stanton, the section’s liaison to the ACEP Board of Directors, provided an update from the 2022 Council meeting, which he described as very productive. He
noted that each year the Council meeting tends to have an overarching theme. The theme this year was reproductive health.

Dr. Stanton reiterated the importance of the rural voice in the decision-making process of the ACEP Board of Directors. He spoke about the Board’s focus on finding the balance among the realities, the messaging, and the goals of rural health care.

Dr. Stanton noted that he welcomes the input and feedback from Rural Section members.

**Update on Rural Section Resolutions  - Ben Knutson, MD**

Dr. Knutson noted that the following themes were prevalent over the course of Council discussions:

- Reproductive rights
- Of particular interest for physicians practicing in a rural setting:
  - Need for buprenorphine education. How is that going to roll out for those in rural settings? Do we have access to these medications? How do we align with everyone else to achieve the gold standard of care?
  - Law enforcement/intoxicated patients in the emergency department and support for having law enforcement present for safety. That should be standard, but how can we ensure that safety measure is met in rural settings?

The Rural section submitted two resolutions:

**2022 Council Resolution 49: Enhancing Rural Emergency Medicine Patient Care.**

**Purpose:**

1) support initiatives to encourage the placement of emergency medicine-trained and board-certified medical directors in all U.S. EDs, whether in person or virtual;
2) support initiatives that promote rural EDs to seek coverage by emergency medicine-trained and board-certified physicians; and
3) support the creation of a minimum standard for training partnered with emergency medicine trained and board-certified local or virtual bedside support for all non-boarded physicians, physician assistants, and nurse practitioners already working in rural EDs.

**Result:** Not brought forward, but most of the things the section commented on were acknowledged in other statements.

**2022 Council Resolution 50: Supporting Emergency Physicians to Work Rural**

**Purpose:**
1) support and encourage emergency medicine-trained and board-certified emergency physicians to work in rural EDs;
2) work with CORD to establish a training program for EM residents with an interest to work rural; and
3) ACEP work with the ACGME to increase resident exposure to rural EM.

Result: Not brought forward, but the Rural section previously endorsed a survey recommendation in collaboration with the AMA to recognize those baseline educational standards.

Assessment for moving forward:
- Acknowledge the challenge of having the infrastructure in place to have every offsite patient seen by an EM-boarded physician. Even resource-rich facilities are struggling with this. How can we ensure those physician-led teams are meeting the standard? Or if not meeting the standard, what is the bridge gap?
- Training and education – it’s a challenge to come out and say we’re doing training which can be seen as “we’re training our replacements.” The section must advocate for strategic ways to make these standards happen, without targeting the role of the board-certified physician.

American Dental Association
Kelly Cantor, Manager Community-Based Programs for the American Dental Association shared information about the ED referral program.

Ms. Cantor noted the goals of the program are to:
- Reduce the frequency of ED usage for dental pain by connecting to models of care
- To highlight programs which feature collaborations between dental offices and EDs
- To provide technical assistance to communities who seek to begin an ED Referral program.

Email for additional info: cantork@ada.org.

Geriatric ED Accreditation (GEDA) - Chris Carpenter, MD, FACEP, Kevin Biese, MD, MAT, FACEP
Dr. Carpenter and Dr. Biese presented a brief overview of ACEP’s Geriatric Emergency Department Accreditation Program or GEDA. GEDA is an ACEP-governed national accreditation organization that strives to improve the care of older people presenting to the emergency department. This accreditation system promotes the goals of quality of care for older people: enhanced staffing and education; geriatric-focused policies and protocols including transitions of care; quality improvement and metrics; and optimal preparation of the physical environment.

Dr. Biese noted that GEDA wants to hear from physicians in rural settings about the unique needs of their geriatric patients. Interventions may need to be different as well.
Rural vs. Urban EBM - Ken Milne, MD, Chris Carpenter, MD, FACEP

Dr. Milne and Dr. Carpenter presented a debate on rural vs urban evidence-based practice. Dr. Milne was the proponent of the rural perspective, while Dr. Carpenter represented the urban point of view.

A Word from our Incoming Chair - Viktoria Koskenoja, MD

Dr. Koskenoja introduced herself, and announced the result of the 2022 officer election which was held prior to the meeting:

**2022-2023 Rural EM Section Officers & Staff**

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<th>Position</th>
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<tr>
<td>Chair</td>
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Dr. Koskenoja then presented Dr. Jameson with a plaque in appreciation of his service to the section as Chair during the 2020-2022 term.

The meeting was adjourned at 1:03 pm PDT.