American College of Emergency Physicians
Section of Tactical Emergency Medicine
Membership Meeting
Sunday, October 29, 2017
3:30-5:00 pm
Marriott Marquis, M4, Independence Ballroom, Salon D
Washington, DC

Minutes

Section Officers in attendance:
Amado Alejandro Baez, MD, MSc, MPH (Chair); Matthew R. Sutter, MD, FACEP (Immediate Past Chair); David Wayne Callaway, MD, FACEP (Chair-Elect); John Wipfler, III, MD, FACEP (Secretary).

Section Members in attendance:
Wynne Breed, MD; Fabrice Czarnecki, MD, MA, MPH; Mark E A Escott, MD, MPH, FACEP; Kyle A Hurst, MD, FACEP; Richard Jeisy, MD; Marc P Kanter, MD, FACEP; Ameen Mohammad Jamali, MD; Josh Pavlik, TCOM, MS-II; James R Waymack, MD, FACEP.

Guests in attendance:
Timur N. Alptunaer, MD; Luther Kristian Arnold, MD, MPH, FACEP; Gregory George Casey, DO; Laila Ccohon, MD; Stanley Edward Chartoff, MD, MPH, FACEP; Charles M Little, DO, FACEP; Jesus M Perez, MD; Jonathan Vashaw, DO.

ACEP staff in attendance:
Rick Murray, EMT-P (Staff Liaison); Pat Elmes, EMT-P.

AGENDA

I. Opening Remarks
   Amado Alejandro Baez, MD, MSc, MPH

II. Presentations:
   Amado Alejandro Baez, MD, MSc, MPH

      Tactical Emergency Medicine Visionary Leader Award
      2017 Award – William P. Fabbri, MD, FACEP

      Tactical Emergency Medicine Meritorious Service Award
      2017 Award – RADM Ronny L. Jackson, MD, FAAEM

      Tactical Case Presentation

III. Board Liaison Remarks
     Gillian R. Schmitz, MD, FACEP

IV. Old Business
   Amado Alejandro Baez, MD, MSc, MPH
   A. Discussion on possible section name change
V. New Business
   A. Council Report
   B. Report on High-Threat Task Force
   C. Joint Austere and Operational Medical Oversight Session
   D. Other New Business

VI. Adjourn

**Major Points Discussed:**
The following is a summary of the meetings held in Washington DC at the ACEP Scientific Assembly.
Submitted by: John Wipfler, MD, FACEP, Secretary, ACEP Tactical Emergency Medicine Section

**Joint Austere and Operational Medical Oversight Session**
Sunday, Oct 29 2:30 – 3:30
This session was a first-of-its-kind in that multiple participants gathered and shared information from ACEP Sections including EMS, Disaster, Wilderness, Event Medicine, and Tactical Emergency Medicine.
The ACEP Director of the Department of EMS and Disaster Preparedness Rick Murray was very helpful in arranging and coordinating this session, which was moderated by Dr. Amado Baez.
Dr. David Callaway gave a brief review of the advances being made by the ACEP High Threat Task Force. Dr. Callaway emphasized the following:

In 2016, the ACEP President tasked the High Threat Task Force with providing high level guidance to ACEP leadership on how the college can best advance preparedness and response to high threat mass casualty incidents. The Task Force Working Groups, comprised of members of multiple ACEP sections and committees, provided a strong list of operational, policy and clinical care recommendations that will be included in the TEMS Section Newsletter. The TEMS section maintains a strong leadership presence on the Task Force.

The session included a series of presentations:

Dr. Lori Weichenthal, Chair of the Wilderness Medicine Section, presented on the Trials and Triumphs of providing medical oversight to the National Park Service. She discussed the 6 levels of service, and the wide variety of terrain and environmental issues that combine to present very unique challenges to those who provide medical care in our national parks.

Next, Dr. William Brady, from the Event Medicine Section, discussed his unit, the SEMM – Special Event Medical Management group from Virginia, and he presented unique challenges at the University of Virginia, including the planning, preparation, and response required for large crowd gatherings / events. He reviewed the recent MCI with one fatality and many injuries this past year involving the white supremacy group incident. Many lessons were learned, and that event emphasized how important it is to have contingency planning and arranging the proper personnel and equipment in advance.

Dr. Marc Rosenthal, who discussed Disaster Medical Oversight, and compared and contrasted Austere Medicine vs Disaster Medicine. He deployed with fellow team mates to Puerto Rico, which suffered the severe effects of 2 hurricanes this past year, and is still a long way from recovering. He noted that many at-risk patients in these type of disasters include dialysis patients, chronic medical patients, ICU patients who need to be cared for or transported to another facility, as well as opioid-dependent patients who run
out of medications quickly in disasters. Transportation was a severe issue, and initially the only reliable method of getting people and supplies to those in need was the helicopter.

Overall, the one-hour session was a success, and much information was shared with an audience of physicians who can now better recognize the skills and knowledge required in these unique types of austere medicine.

The Tactical Emergency Medicine Section meeting was conducted from 3:30 to 5:00 pm. The Chairman, Dr. Amado Baez, led the session, and discussed several topics. He brought up the topic of developing a Joint Statement for the Medical Direction / definition of the roles and responsibilities for those that operate in austere environments, including defining the extra skills and knowledge necessary, risk assessment, decision-making, and other additional skills worth considering.

The section leadership includes the following persons:

Chair – Amado Alejandro Baez, MD, MSc, MPH  
Chair-elect – David Callaway, MD, FACEP  
Secretary – John Wipfler, MD, FACEP, RDMS  
Immediate Past Chair – Matthew Sutter, MD, FACEP  
Councillor – James Phillips, MD  
Alternate Councillor – Howard Mell, MD, MPH, FACEP  
Section Newsletter Co-Editor – Timothy Carswell, MD  
Section Newsletter Co-Editor – Faroukh Mehkri, MD  
Board Liaison – Gillian Schmitz, MD, FACEP  
Staff Liaison – Rick Murray, EMT-P, ACEP Director Department of EMS and Disaster Preparedness

It was an honor for the section to present two section awards. Dr. Baez asked the two individuals to come to the front of the room, where he described their many excellent contributions and outstanding achievements.

The 2017 Tactical Medicine Visionary Leader Award was presented to Dr. William P. Fabbri, MD, FACEP, who has been very involved in developing and maintaining tactical medical support for the FBI, and many other agencies and organizations.

The 2017 Tactical Medicine Meritorious Service Award was presented to RADM Ronny L. Jackson, MD, FAAEM, USN, Physician to the President of the United States.

Following the awards, Dr. Ronny Jackson then gave an excellent presentation on Dignitary Protection – Protective Medicine, and the unique challenges of being the first EM physician to be the Physician to the President for 3 different presidents (Presidents Bush, Obama, Trump). He works as part of the White House Medical Team, which has 59 members, including 10 physicians, and it was interesting to note that 80% of the team has had combat experience. “The Bubble” is the immediate area around the President, and working with the US Secret Service, State Department, White House Medical Team, various branches of the military, the Marine Corps transport helicopters, Air Force One, motorcades (he rides in the same limousine as the President), the press corps, and many others certainly makes for a unique and challenging career. Dr. Jackson noted that a physician “Can’t Care if you’re Not There”, and so he had a medical bag that he carries everywhere the President goes, staying very close, whether biking, hiking, or climbing up large hills. He emphasized that the medical team that accompanies the President carries a wide variety of gear in “bags, lots of bags”, and they have overlapping items in various bags, and it is spread out amongst the medical team members. “Care by Proxy” is something that he and the team does, as the President is often accompanied by friends and relatives, who sometimes needs minor or major medical issues dealt with. Medical intelligence, telemedicine, travel medicine, sleep hygiene, food and water issues, international disease threats, preventive medicine, foreign languages, planning, developing points of contact (POC) at key medical installations when traveling throughout the world, all of these are important components that needs to be included in planning and preparation and response. Overall, those
in attendance were delighted by an excellent presentation, and Dr. Jackson and Dr. Fabbri were surrounded after the meeting by many members with additional questions for these two talented individuals.

The remainder of the meeting was coordinated by Dr. Baez, and he discussed several items for the group to consider. These included:
- Creation of a dedicated ACEP policy on Austere Medical oversight
- Gaging the group on an ACEP18 Austere Medicine Joint Conference
- Developing a Joint Austere Medicine photo exhibit for ACEP18

The meeting concluded at 5:30 pm.