American College of Emergency Physicians

Geriatric Emergency Medicine Section Meeting

MINUTES

Monday, October 26, 2015
Boston, MA

Participants

In addition to about 40 attendees, the following section leaders were present for all or part of the meeting: Marianna Karounos, DO, Chair and Councillor; Ula Hwang, MD, FACEP, Chair Elect; Christopher R. Carpenter, MD, FACEP, Immediate Past Chair/Alternate Councillor; Joseph H. Kahn, MD, FACEP, Secretary/Newsletter Editor.

Others participating in all or part of the meeting included: Stephen H. Anderson, MD, FACEP, Board Liaison; Vidor E. Friedman, MD, FACEP, Board Member; Jon Mark Hirshon, MD, PhD, MPH, FACEP, Board Member; Mark S. Rosenberg, DO, MBA, FACEP, Board Member; Barbara Tomar, Director, Federal Affairs; Dainsworth Chambers, Quality & Federal Affairs Assistant; Sandra M. Schneider, MD, FACEP, ACEP Staff Liaison; and Julie Rispoli, Project Manager.

Agenda

Geriatric Fall Prevention Program
Welcome and Updates
Discussion regarding expansion of officers
Subcommittee Updates
Brainstorming Session

Major Points Discussed

Prior to the business meeting, David C. Schwartz, PhD, Co-founder of The ElderCare Companies, Inc. presented a session on Geriatric Fall Prevention Programs. This was an education program held in conjunction with ACEPs Trauma & Injury Prevention Section.

A sign in sheet was passed around and everyone introduced themselves.

The Board Liaison presented his report. It was noted that Mark Rosenberg, DO, MBA, FACEP, FACOEP-D, was elected to the ACEP Board of Directors.

There was a review of the process for elections for next year. All current officers are serving a 2 year term. ACEP staff will send out an interest form prior to ACEP16 for individuals interested in an officer position. There was discussion about creating additional officer posts such as resident and fellow positions and perhaps a social media navigator. Current section bylaws do not permit additional official positions. These bylaws can be changed at the next meeting. Bylaws amendments must be filed 90 days before the next annual meeting (before July 1) and voted at the annual meeting at ACEP. If passed, they will be ratified by the ACEP Board of Directors and go into effect for an ACEP17 election.

Dr. Kahn gave the newsletter report. He is looking for additional content for the newsletters. In addition, there was discussion about ACEP Now articles as well as a website.

There was discussion about creating liaisons with other sections, such as palliative care, dual training, observation and others.
There was discussion about better engaging membership. Marianna mentioned the idea of having a case conference contest with the option of ACEP Bookstore Coupons as a reward.

There was a brief discussion of developing a national hospital readiness survey around the geriatric guidelines similar to that done on pediatrics. Pros and cons were discussed. There was discussion about the recent paper by Tess Hogan that used snowball methodology to survey geriatric EDs, however it was noted that this project would encompass all EDs. It was also stressed that we needed to be careful with the messaging of the results. While there were some mixed opinions, there was general agreement that this had worked in the Pediatric venue, and if properly constructed and messaged might move the geriatric guidelines forward.

During a general brainstorming discussion, the need to communicate with primary physicians was discussed. Clearly, the EMR notes are not interpretable, and are often delivered several days later. Transition of care is an important component to geriatric care.

There was discussion of a fall and faint clinic model where the patient is seen rapidly, generally within 24 hours. This was similar to the presentation that occurred prior to the meeting on falls in the elderly.

There was an invitation by Alexis LaPietra, DO, to join the petition to form a new Pain Management section. She shared their goals and mission and asked that anyone interested in signing please contact her.

The meeting was adjourned.