HELPFUL LINKS

ACEP 15 Website

ACEP 15 FAQs

EMI Section Website

Hackathon 2015 Website

EMI Section Meeting Logistics

Date: Tuesday, October 27

Time : 12noon – 3:00pm ET

Location: Westin Waterfront Harbor Ballroom I

Lunch will be sponsored by

athenahealth

EMI Meeting Preview @ ACEP15

This year's agenda includes keynote speaker, **Todd Rothenhaus, MD,** Chief Medical Officer and Senior Vice President of Network Knowledge athenahealth, Inc. and a nationally recognized expert on the implementation of electronic health record systems and the use of information technology in support of effective and accountable care. Dr. Rothenhaus will be presenting:
"Three Ingredients for Letting Doctors Be Doctors".

The meeting will also feature section awards and a CEDR update. EMI Section Chair-elect, Jason Shapiro, MD, FACEP will serve as the moderator for the meeting.

Please see page 3 of this newsletter for an overview of ACEP's Federal Health IT Comments and the published report on Health Information Exchange in the ED.

ACEP and **EMRA** have teamed up with **Hacking Medicine at MIT** and **athenahealth** to offer a problem-solving hackathon during ACEP15 where emergency medicine physicians collaborate with computer programmers, engineers, and other subject matter experts to tackle challenges in EM.

Section members are invited to attend the Hackathon during ACEP15. Please visit http://www.acep.org/hackathon/ for more information and to register

More information can be found on page 4 of the newsletter.

WHEN: October 23-25 → **REGISTER HERE!**
WHERE: athenahealth's Watertown Headquarters
(311 Arsenal St, Watertown, MA 02472)
MORE INFO: Hackathon 2015 Website

Greetings from your Board Liaison!

ACEP2015 in beautiful Boston is rapidly approaching at the end of October. As you can see from this newsletter, your active Emergency Medicine Informatics section leadership and members have been busy with a number of important activities throughout the year. This work is vital as electronic health record systems continue to be implemented and revised throughout the nation, impacting clinicians and patients in many different ways.

The past year has seen many accomplishments by EMI section members, including the publication in July in Annals of Emergency Medicine of the paper by Jason Shapiro, et al on Health Information Exchange in Emergency Medicine. Additionally, last year the section helped support a very successful hackathon in which the winner developed an app for a smart watch geared towards paramedics in the field to assist with timing and medication reminders to cardiac arrest. This year's hackathon is expected to be as successful if not more.

As your liaison to the ACEP Board of Directors, it is my pleasure to work with you and your section leadership in order to help you further develop and grow your interests and activities. Please do not hesitate to contact me if there is anything that I can do. ACEP2015 is just around the corner. Hopefully, you will have the opportunity to catch up with your friends and colleagues at the end of October.

Hope to see you in Boston.

Jon Mark Hirshon, MD, MPH, PhD, FACEP
ACEP Board of Directors.
jhirshon@acep.org

Newsletter Editor's Corner

It is an exciting time for clinical informatics. Many of us have been focused on implementing and optimizing our EHRs and working to make a smooth transition to ICD10. The ACEP Section of Emergency Medicine Informatics (SEMI) leaders and members have also had a productive year. In this newsletter, we highlight some of the key SEMI initiatives and accomplishments:

We commented on the Federal Health IT Strategic Plan 2015-2020 suggesting several modifications for improving usability and health information exchange

A group of SEMI leaders and members, led by Jason Shapiro, MD, incoming SEMI chair, published recommendations for how to maximize the value of health information exchange in EDs

Past Chair, Jeff Nielson, MD coordinated a very successful virtual grand rounds series

We were awarded a 2015 ACEP Section Grant (led by Nupur Garg, MD) to improve emergency physician knowledge and awareness of informatics through an electronic, multimedia guidebook

I look forward to seeing all of you at the SEMI meeting at ACEP on Tuesday, October 27 at noon. I hope many of you will also consider participating in the ACEP/EMRA Hackathon, October 23-25, as mentors and participants.

Adam Landman, MD
EMI Newsletter Editor

ACEP Federal Health IT Comments

In February 2015, ACEP provided commentary on the Federal Health IT Strategic Plan 2015-2020.
As outlined in the commentary, ACEP is very supportive of the overall vision and mission detailed in the plan, in addition to the framework outlined emphasizing the importance of building and progressing on each of the five goals:

1. Expand Adoption of Health IT
2. Advance Secure and Interoperable Health Information
3. Strengthen Health Care Delivery
4. Advance the Health and Well-Being of Individuals and Communities
5. Advance Research, Scientific Knowledge, and Innovation

The comment letter provided potential modifications that should be adopted to further improve and expand the current EHR certification,
Potential modifications include:

- **Consideration of alternative software testing methods;**
- **Establishment of greater transparency and uniformity on UCD testing and process results;**
- **Incorporation of exception handling into EHR certification;**
- **Development of C-CDA guidance and tests to support exchange**

Additionally, ACEP shared 10 recommendations from a recent information paper created by ACEP's Emergency Medicine Informatics Section. These recommendations are aligned with Goal 2 of the Strategic Plan: Advance Secure and Interoperable Health Information and may be helpful in shaping short-term and long-term outcomes related to health information exchanges (HIEs).
The full comment letter can be found on the EMI Section Website [here](#).

Health Information Exchange in the ED

Jason S. Shapiro, MD, Diana Crowley, MPH, Shkelzen Hoxhaj, MD, James Langabeer II, PHD, Brian Panik, DO, Todd B. Taylor, MD, Arlo Weltge, MD, Jeffrey A. Nielson, MD, MS

Health Information Exchange (HIE) enables a patient's healthcare information to be available across organizations. HIE is particularly important to emergency physicians when evaluating patients that receive care outside their own healthcare organization. A workgroup led by Section of Emergency Medicine Informatics leaders recently published five primary and seven secondary recommendations about how to maximize the value of health information exchange (HIE) in emergency departments in Annals of Emergency Medicine).
HIE will eventually enable physicians to quickly view their patients' medical histories no matter where the information was collected. However, there are numerous challenges that must be overcome before this goal is achieved. The workgroup made five primary recommendations in support of HIE in emergency medicine:

1. **Emergency physicians must be involved in regional and federal HIE activities;**
2. **HIE policies must be based on best practices to promote liability protection related to HIE use;**
3. **Federal regulatory standards must prioritize data elements specific to emergency care and have emergency-specific user design;**
4. **Care standards and protocols for effective integration of HIE in emergency department electronic health records (EHRs) should be developed, including workflow optimizations and pushing of important HIE information to the clinician through flags in the EHR; and**
5. **Local professional groups should participate with HIEs to assure delivery of appropriate emergency data.**

The workgroup also published seven secondary recommendations which would significantly improve HIE for emergency physicians and other clinicians, such as supporting emergency physician access to all relevant patient information in properly summarized understandable form.
Given the importance of HIE to providing high quality, efficient emergency care, the Section of Emergency Medicine Informatics will continue to find innovative ways to educate on and advocate for improvements to HIE.

The full article can be found on the EMI Section Website [here.](#)

Recommended Events to Attend at ACEP15

Nupur Garg, MD

Hackathon 2.0

A Hackathon leverages out-of-the-box thinkers for an intense problem solving session. **ACEP** and **EMRA** have teamed up with **Hacking Medicine at MIT** and **athenahealth** to offer a problem-solving hackathon during ACEP15 where emergency medicine physicians collaborate with computer programmers, engineers, and other subject matter experts to tackle challenges in EM.

This event builds on the success of last year's inaugural CodeRed EM Hackathon, where ACEP and EMRA partnered with Chicago Health 2.0 and MIT Hacking Medicine. Teams focused their efforts on challenges in prehospital care, data analytics, geriatric emergency medicine, and real-time location services. Eight teams won over $8,000 in prize money and went on to present their projects at ACEP and SAEM.

This year, in addition to over $10,000 in prize money, winners will have an opportunity to present to thousands of attendees at ACEP 15 Scientific Assembly. Hackathon winners will present at both InnovatED and during the ACEP Section of Emergency Medicine Informatics meeting.

 The winning team last year, CodeTimer, built a wearable app that allows for compression timings and intra-arrest, paperless documentation of arrest events, and is now available in app stores

Please visit http://www.acep.org/hackathon/ for more information and to register.

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MORE INFO: Hackathon 2015 Website

Technology Events of Interest to the Section

Simulation Lab ABCs: Can You Manage These Critical Cases? MO-3; MO-32; MO-61 / 2 Hour Faculty: James Gordon, MD, FACEP
Monday, 10/26/2015 / 8:00 AM - 10:00 AM; 12:30 PM – 2:20 PM; 3:30 PM – 5:30 PM

Cutting-Edge Technology to Save the Crashing Patient TU-114 / 0.5 Hour Faculty: Matthew S. Dawson, MD
Tuesday, 10/27/2015 / 9:30 AM - 9:55 AM

Practical Applications of Wearable Tech for the Emergency Physician TU-117 / 0.5 Hour Faculty: Matthew S. Dawson, MD
 Tuesday, 10/27/2015 / 10:00 AM - 10:25 AM

"There's An App for That": Hand-Held Devices and Applications That You Should Know About TU-156 / 1 Hour Faculty: Esther K. Choo, MD, MPH
Tuesday, 10/27/2015 / 1:30 PM - 2:20 PM

ED or iMD? Advances in Telemedicine for the Consumer WE-290 / 0.5 Hour Faculty: Sylvan Waller, MD, FACEP
Wednesday, 10/28/2015 / 4:30 PM - 4:55 PM

Best Practices in Using Technology to Improve ED Communications
TH-316 / 1 Hour Faculty: Steven Horng, MD, MMSc, FACEP
Thursday, 10/29/2015 / 9:00 AM - 9:50 AM

Lost in the FOAM: Free Open Access Medical Education for the Technologically Challenged   TH-343 / 1 Hour Faculty: Matthew C. DeLaney, MD
Thursday, 10/29/2015 / 11:00 AM - 11:50 AM

Toys and Tools: New Devices and Products in Emergency Care TH-345 / 1 Hour Faculty: Steven Horng, MD, MMSc, FACEP
Thursday, 10/29/2015 / 11:00 AM - 11:50 AM

Nupur Garg, MD
2015 Section Grant

The Section of Emergency Medicine Informatics was awarded an ACEP Section Grant to foster emergency physician knowledge and awareness of informatics. The EMI section members will develop an electronic guidebook with accompanying videos that will be made available for free to all emergency medicine physicians. Participants will also be able to earn CME credit through ACEP for completing the educational modules. The section grant will enable us to develop the first three modules this year: 1) Using electronic health records; 2) Apps and websites for use in clinical practice; and 3) Health information exchanges. We are very excited about this opportunity to disseminate high quality, pertinent information about EHRs and digital health to our colleagues. Please stay tuned for opportunities to get involved in this project.

Adam Landman, MD, MS, MIS, MHS
Clinical informatics is now a board-eligible subspecialty

Through sponsorship by the American Board of Preventive Medicine (ABPM) Read more about it [here]. The practice pathway for achieving board certification will be available through 2017. Beginning in 2018, all applicants for board certification in Clinical Informatics will have to successfully complete a 2 year ACGME-accredited Clinical Informatics fellowship program. This SEMI [Grand Rounds Video] provides more detailed information on requirements for clinical informatics board certification:

Emergency Physicians lead first class of Clinical Informatics Fellows

There are currently 10 ACGME accredited fellowships, emergency physicians are well represented in the first class of fellows.   Two emergency physicians, Yaniv Kerem, MD and John Manning, MD who are participating in ACGME-accredited clinical informatics programs this year, shared their background, experiences, and career plans on page 7 of the newsletter .

Read more about the fellowship program [here].

Yaniv Kerem, MD
Clinical Informatics Fellow, Stanford University School of Medicine

After graduating from Loyola University School of Medicine, I continued my training in emergency medicine at the University of Chicago. I became actively involved in a number of process design improvements to streamline ED physician workflow and efficiency. I worked with the hospital's EHR team and the ED administration on a number of projects, including an optimization effort to design and upgrade computerized order sets and an evaluation of the need for a sepsis alert in the emergency department.

After completing emergency medicine training, I joined the Clinical Informatics Fellowship at Stanford – the first clinical informatics fellowship in the nation to receive ACGME accreditation (http://cifellowship.stanford.edu/). As a fellow, I divide my time between various informatics projects, didactic sessions and clinical time in the ED. In addition to the core informatics rotations at Stanford Children's Health and Stanford Health Care, there is opportunity to spend time on the industry side of the informatics world, at companies such as Doximity, HP Labs, The Advisory Board Company and Accenture. There is even an international rotation at Royal Children's Hospital in Melbourne, Australia. The environment at Stanford is one that encourages discovery and innovation; with a focus on bridging the worlds of technology, analytics and clinical expertise in order to better understand disease processes and improve patient outcomes.

Though I have not yet determined the specific trajectory of my career, I look forward to playing an active role in the future of healthcare discovery and innovation. The field is rife with opportunity.

John Manning, MD
Clinical Informatics Fellow, University of Illinois at Chicago (UIC)

Born the son of an inventor-engineer, John has a passion for blending medical practice with digital innovation. With his eyes set on electronic health records (EHRs), his long-term goal is to improve the design and efficiency of our EHRs so that providers no longer bear the heavy burden of usability issues during their daily practice.

Originally from Tennessee, John has spent much of his training along the east coast from New York to Virginia. Beginning as a medical scribe handwriting patient charts, John has worked at 19 different hospital systems thanks to the mobility offered by medical training. He has broad IT experience ranging from designing and soldering circuit boards, to hardware repair and phone tech support, to visual design and programming. He has served various local and national leadership roles over the years, has presented nationally at both EM and informatics conferences, and was awarded the grand prize at EM's first national hackathon last year.

John is part of the inaugural class of fellows at UIC, which is the second program accredited by the ACGME. This program trains its fellows in change management methodologies, which is currently being used to improve process workflows in an outpatient setting. His entrepreneurial interests are being explored locally through Innovate @ UIC and the strategic partnership between UIC and technology startup MATTER, and on a national scale through the Insight to Innovation program. Finally, John has worked heavily on the planned inter-institutional collaboration amongst all CI fellowship programs, which will employ tools from UIC's Electronic Visualization Laboratory in a novel way.
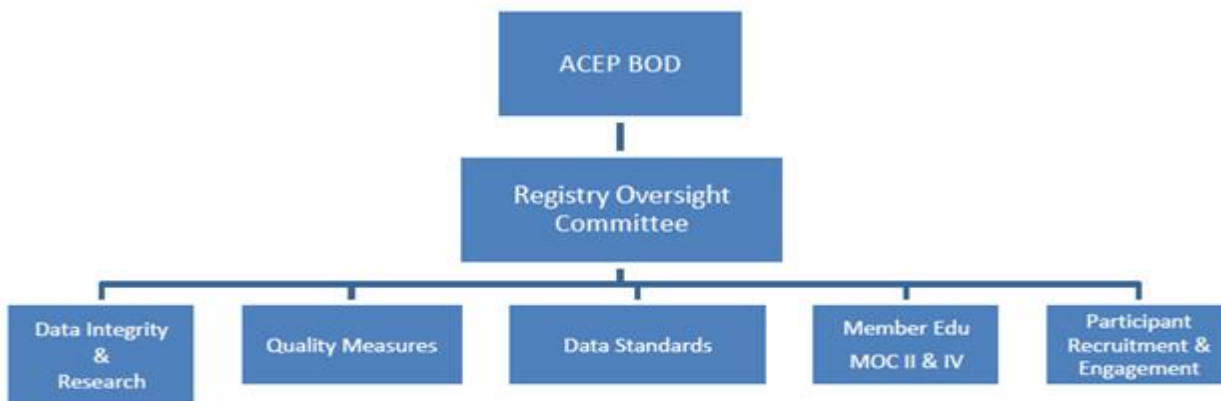
The ACEP Clinical Emergency Data Registry
James McClay, MD, FACEP
Past Chair, Section of Emergency Medical Informatics

Starting in 2017, The Centers for Medicare and Medicaid Services (CMS) will begin holding back up to 6% of the value of your Medicare claims if you do not report your Physician Quality Reporting System (PQRS) measures for the 2015 Performance Year (calendar year). The PQRS generally requires physicians to report their compliance with their choice of 9 measures from a large set of quality measures. This past year CMS retired 4 of the 5 measures commonly used by emergency physicians.

In response to this challenge the ACEP board launched an alternative solution to participation in the PQRS system, a "qualified clinical data registry (QCDR)" that will meet CMS reporting requirements for those physicians and practice groups choosing to participate. The Clinical Emergency Data Registry (CEDR) will allow ACEP's membership working through the Registry Oversight Committee to decide on the best measures of quality in emergency medicine and to leverage the data for other uses.

The ACEP's technology partner FIGmd has developed the CEDR with extensive input from ACEP membership. Many members of the Section of Emergency Medicine Informatics (SEMI) are providing their expertise in the development of data standards and measures.

The CEDR will "accept patient data from practicing emergency physicians and clinicians on the care provided to emergency department patients." With the following goals:

1. Provide a unified method for ACEP members to collect and submit Physician Quality Reporting System (PQRS) data, MOC, Ongoing Professional Practice Evaluation (OPPE), outcome data, and other related or applicable quality and patient safety data to meet quality improvement and regulatory requirements.
2. Promote the highest quality of emergency care for our patients.
3. Demonstrate the value of emergency care.
4. Facilitate appropriate emergency care research

The ACEP CEDR team is currently arranging for providers to participate in the registry and for data contributions. The CEDR is designed to accept data in multiple formats with tools available to ease data uploads from EHR systems and practice management systems. The emergency informatics community is looking forward to continuing development of this valuable resource for the ACEP membership. For more information, please visit us at:

CEDR Council Table	**CEDR Demonstration Desk**
Grand Ballroom Foyer, BCEC	*North Lobby, Level 1, BCEC*
Saturday and Sunday.......... 7 a.m.-5 p.m.	Monday – Wednesday .... 8 a.m.-4 p.m.
CEDR Committee Meeting	**How to Grow a CEDR**
Westin Waterfront Ballroom B&C	*156 ABC, BCEC*
Monday, 10/26/2015/ 12:30 pm - 2:30 pm	Stephen K. Epstein, MD, MPP, FACEP
	Wednesday, 10/28/2015 / 4:30 pm - 5:30 pm

Meeting Logistics & FAQs

Where can I get a copy of my check-in barcode for my badge or course schedule?

Login to the ACEP15 website with your ACEP member login, or the login information you created to register online. Once you are logged in, you are taken to the "My Registration" site where you can click on the link to have your barcode sent or to click on "View/Print Schedule" icon. This will generate a copy of your course schedule that you may print for your records. If you have additional questions regarding your course schedule please contact the Meeting Registrar at 800-798-1822 or meetingregistrar@acep.org.

Still in need of a hotel?

Reservations for the ACEP Room Block can be made online through our official housing partner, onPeak. No payment needed up front.

When will I receive the course syllabi for the conference?

Paper syllabi will not be provided. Syllabi will be available on the ACEP15 website for download or print about two weeks prior to the conference. Access to syllabi will be made available on your "My Registration" page.

How many CME hours can I earn at *Scientific Assembly*?

The American College of Emergency Physicians designated the 2015 live activity for a maximum of 29.75 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity. View the full CME Credit Statement.

Is there a mobile app this year?

Yes! Search for "ACEP" in Apple's App Store or Google's Play Store.

Where can I find the transportation bus shuttle schedule?

The Hotel/Convention Center shuttle schedule is now available and can be found on the Shuttle Service Page.

For a full version of common FAQs, visit the ACEP 15 FAQs website