

# American College of Emergency Physicians

## Section of Tactical Emergency Medicine

Membership Meeting

Boston, Massachusetts Hybrid

Tuesday, October 26, 2021

1:00-3:00 pm Central Time

VIRTUAL Join Zoom Meeting

<https://acep.zoom.us/j/92925414851?pwd=SGNwK2w3bGVzQnI4T3k3aTc5U2IwZz09>

### Meeting Minutes

#### Section Officers in attendance:

John Wipfler, MD, FACEP (Chair); Brian Lee Springer, MD, FACEP (Chair-Elect); David Wayne Callaway, MD, FACEP (Immediate Past Chair); Keegan D Bradley, MD, EMT/T (Secretary/Newsletter Co-Editor); Amado Alejandro Baez, MD, MPH, FACEP (Councillor); David Q McArdle, MD, FACEP (2nd Alternative Councillor); Dominique Wong, MD (Newsletter Editor); Jeffrey Michael Goodloe, MD, FACEP (Board Liaison)

#### Section Members and Guest in attendance:

Matthew Brandt, MD; Randolph Christianson, MD, FACEP; Gaston Costa, MD; Emerson Franke, MD; Capt. Matthew M. Gangidine, MD; Kyle Hurst, MD, FACEP; David S Kugler, MD, MPH, FACEP; Jason A Kegg, MD, FACEP; Willie Kimler; Allison Lane, MD, FACEP; Nicholas W Lang; Jon R Krohmer, MD, FACEP; Justin C Eisenman, DO, MS, FACEP; Richard A Kamin, MD, FACEP; Sarayna S McGuire, MD; Mitchell Moriber, DO; David P Neubert, MD; Charles William Olson, Jr, MD; Ronald Price, MD, FACEP; Wendy Ruggeri, MD; Tyler J Fulks, MD; Jonathan Kamler, MD; Evan Shaw, MD; Joseph Leahy, DO, FACEP; Brandon Bleess, MD, EMT-T, FACEP; Scott Pasichon, MD; Andrew G Pachon, MD, MPA; Capt. Matthew J Piazza, DO; Shoshana Taube, MD; Michael Madatovian, MD; Michael J Hetzel, DO; Jason Roosa, MD, FACEP; Jared Ross, DO, FACEP; Kevin Schulz, MD, FACEP; E. Reed Smith, MD, FACEP; Sullivan Smith, MD, FACEP; Florian Schmitzberger, MD; Matthew R Sutter, MD, FACEP; Matthew Sztajnkrzyer, MD, FACEP; Sriram Venkatesan; James R Waymack, MD, FACEP; Luke Welle, MD

#### ACEP staff and Board Members in attendance:

Rick Murray, EMT/P, Director EMS & Disaster Preparedness (Staff Liaison); Patrick Elmes, EMT/P (ACEP Staff); Deanna Harper, EMT-I (Support Staff)

### Agenda

- |                                      |                                 |
|--------------------------------------|---------------------------------|
| I. Opening Remarks and Introductions | John Wipfler MD, FACEP          |
| II. Section Business                 |                                 |
| a. Board Liaison Update              | Jeffrey Goodloe, MD, FACEP      |
| b. Councilor Report                  |                                 |
| c. Staff Liaison Update              | Director Rick Murray EMT-P      |
| d. EMRA Representative               | Sarayna McGuire, MD             |
| e. Newsletter Editor Update          | Dominique Wong, MD              |
| LODD Presentations                   | Willi Kimler M4, Nick Newell MD |
| f. Secretary Report                  | Keegan Bradley MD, FACEP        |
| g. Chair Elect                       | Brian Springer MD, FACEP        |

- h. Chair John Wipfler MD, FACEP
  - III. Section Projects and Strategic Planning
    - New Website, TacMed Monthly Webinars, CME
    - Tactical EM Member Survey
    - Tactical Medicine Education for SWAT and Patrol
    - Residency Program – TacMed curriculum materials
    - Strategic Goals / Planning
  - IV. Partner Society Updates
    - a. NTOA – National Tactical Officers Association Jason Pickett, MD (unavail)
    - b. IACP - International Assn of Chiefs of Police David Q. McArdle, MD
    - c. C-TECC Rich Kamin MD
  - V. Award Presentation
    - a. Section of Tactical Emergency Medicine 2021 Visionary Leader Award  
Presented to Matthew Sztajnkrzyer, MD, PhD, NRP, FACEP, FACMT, FAACT
  - VI. Keynote Presentation by Dr. Matt Sztajnkrzyer - **“Leap First – The Psychology of Rescue”**
  - VII. Group Discussion and New Business Items John Wipfler, MD, FACEP
- Adjourn

### Minutes

The annual meeting was held at the Boston Convention and Exhibition Center in room 204B. Section members attended in person, and via Zoom and Facebook Live virtually.

Chairman Dr. John Wipfler welcomed all section members and took a moment to thank ACEP leadership and specifically Director Rick Murray and his administrative assistant Deanna Harper for their outstanding support and leadership in our section. In addition, thanks were given to prior and current Tactical EM Section leaders. The section was formed in 2003, and this is the 19<sup>th</sup> annual meeting of our Section. Current membership is just under 500 members.

Dr. Jeffrey Goodloe is our Section ACEP Board Liaison, and he presented an update of important Board and ACEP activities. He was involved along with another TEM Section member and others in a task force that took up the controversial topic of EDS / Excited Delirium Syndrome, and the net result of this task force was a thorough re-investigation and updating of pertinent research and knowledge about what is now termed Hyperactive Delirium with Severe Agitation in Emergency Settings. The task force report (132 pages) can be found at this link: [ACEP SA TacMed 2021 Meeting Minutes.docx](#)

Dr. Goodloe also presented the other key projects and national involvement of ACEP and the leaders who continue to represent the key interests of our emergency physicians. He has long been extensively involved in EMS and leadership positions in residency training and prehospital medical education. He continues to remain active in tactical medicine, supporting the Oklahoma State Police and multiple other agencies. Our section members gave a round of applause and expressed appreciation for his outstanding work and continued leadership in many key areas.

Director Rick Murray provided an update on several key topics of interest to our section and continues to provide excellent support in the multiple projects, webinars, education programs, and meetings in our TEM Section. He is instrumental in assisting in CONTOMS courses for medical directors and many other sections.

EMRA representative to the Tactical EM Section Dr. Sarayna McGuire was present and gave an update on several EMRA activities and projects. She is working to complete her EM residency at the Mayo Clinic College of Medicine in Rochester, MN. We thank her and EMRA for what they do.

Dr. Dominique Wong is our current Newsletter Editor, and she gave a nice summary of the past year’s activities. She has led a solid team, and along with the wonderful work and dedication from Deanna Harper, along with our leadership team, and also contributions to the newsletter from Section members, she has successfully completed a quarterly newsletter throughout the entire past year. The current, and past newsletters can be seen on the Section website. If any members have materials such as case reports, articles, photographs, educational research pertinent to tactical medicine, please contact Dr. Wong.

We were delighted to have an excellent presentation by a medical student Willi Kimler (Joan C. Edwards School of Medicine, Marshall University, Huntington West Virginia) and an EM resident Dr. Nick Newell (Eisenhower Health EM residency program, Rancho Mirage, Ca) who presented a very informative update on this past year's LODD – Line of Duty Deaths – for law enforcement officers (LEOs) in the United States, and the significant impact of too many deaths from COVID. Several of their key graphs and data can be seen by going to the Section website and reviewing the newest newsletter. Thank you, gentlemen, and also Dr. Wong for arranging this educational session.

Dr. Keegan Bradley gave his Secretary Report, and also reviewed the key findings of a recent survey that was sent to multiple ACEP sections to obtain their opinions and suggestions regarding the recent controversy in the use of ketamine in the prehospital setting. Events in Aurora, Colorado and criminal charges against LEOs and paramedic firefighters in a situation that had a bad outcome, have resulted in Colorado unfortunately limiting access to ketamine in hyperactive delirium with severe agitation cases. Discussion involved what to do in the future, and how to best work alongside ACEP to help prevent erosion of use of medications and EMS procedures brought about by other agencies that have arguably less experience and matter expertise than ACEP emergency physicians. Dr. Bradley will continue to appraise our section of ongoing progress in this area. If you are interested in getting involved, please contact Dr. Keegan Bradley [kbradleyatm@gmail.com](mailto:kbradleyatm@gmail.com)

Dr. Brian Springer gave his Chair Elect report, and discussed several key issues ongoing, and expressed how important it is for our section to join with other agencies and organizations to continue to make strides towards improvement of both tactical medicine, and also medical support and medical education of patrol officers and patrol deputy Sheriffs and other street officers. Our section has focused on tactical emergency medicine and has made great progress. Many of our section members are increasingly teaching and supporting patrol officers / deputy sheriffs, who sustain a majority of the injuries and deaths in day-to-day law enforcement activities. Later in the minutes, a list of key future projects is listed, and this is one topic that we should really focus on. Dr. Springer also commented on the need for upcoming ACEP projects and any involvement in controversial issues that pertain to law enforcement medicine / tactical medicine will ideally involve the leadership of our section so that we can help ensure that some of our section members can become and stay involved in policy development and other specific projects that may be improved through the involvement of experienced tactical physicians from our section.

A new survey has just been released and emailed to all Section Members, by Dr. Bill Bozeman, and so please check your Section email and take a few minutes to complete this survey that pertains to tactical physicians and the issues of law enforcement status and being allowed / authorized to carry a firearm for self-protection. The more accurate our data collection is, then the more accurate we can work together to achieve common goals. Thank you in advance for completing this survey.

### Section Projects and Strategic Planning

These topics were briefly covered by Dr. John Wipfler (Chair) and he expressed his appreciation to ACEP and Director Murray and Deanna Harper along with the key website managers / officials with ACEP who helped polish and move the prior extensive website materials into the new ACEP format. The new format has a fresh and eye-catching appearance, and may be seen at: <https://www.acep.org/tacticalem/>

Of note is the fact that Dr. Wipfler and his fellow leadership team have worked extensively to help bring about a “members-only” section of the website. The good news is that we now have a semi-private section of our website that cannot be viewed by the general public. This will allow us to post and share educational materials such as lectures, photographs, protocols, case reports, education and clinical videos that will be only seen by our fellow colleagues, and not by anyone else. So, please note this, and send your educational / informational articles, photos, lectures, policies, etc. to [धारपर@acep.org](mailto:धारपर@acep.org).

Webinars were discussed, and we will continue to hold future events on Tuesday evenings (2<sup>nd</sup> or 3<sup>rd</sup> Tuesday of the month) 7:00 pm Central Time for educational webinars. Every other month, those members who watch the one-hour session, and afterwards complete a survey, will be able to obtain Category 1 ACEP CME credit at no charge. On alternate months, we will choose several new topics of interest to our group, and arrange an “open mike” discussion format, with several key leaders who will guide discussion of specific topics that evening. So, please watch for announcements, and mark your calendars. Our next webinar is on November 16, 2021, where Dr. Brian Springer will present a one-hour CME Cat 1 lecture about “**Fitness and Health for Law Enforcement Special Operations**”. This will start at 7:00 pm Central Time. You should have a link already sent to you. If not, please contact Deanna Harper ( [धारपर@acep.org](mailto:धारपर@acep.org) ).

Tactical Emergency Medicine Member Survey – the results were briefly discussed, and a summary of the key findings are listed here below. These were assembled by Dr. John Wipfler. The 2021 Survey yielded comments / replies from 64 of our 500 members.

Survey Results – 2021:

Question: Who provides direct medical in-field support of tactical LE operation (SWAT)?

Answer: 70% of the 64 respondents do currently, and 20% would like to, and 10% do not

Question: What are the barriers to getting involved as a tactical physician?

Answer: multiple factors, such as local politics not supportive of TEMS, limited funding, difficulty obtaining reasonably priced medical malpractice insurance for TacMed, several have found that local fire / EMS have tried to form TEMS units and failed; some have spouses that feel it is too dangerous for physicians to support SWAT deployments.

Question: Who is paid for tactical physician medical support?

Answer: 37 answered this question: 50% are unpaid volunteers; 40% are associated by being an EMS medical director or teacher locally that helps to partially reimburse their tactical physician prehospital work; 3 of the 37 are directly paid for their tactical medicine work.

Question: What agencies do are supported by tactical physicians?

Answer: 70% are local police, 60% are county sheriffs, and 35% are state or federal LE agencies, and 11% are “other” (stadium police, US Secret Service, others)

Question: What topics are of interest to you / our section, and what are worthwhile projects to pursue?

Answer: There were multiple topics given, and a majority are included in the following:

The following is a summary, which the author (Dr. J Wipfler) attempted to list in a systematic way that we could investigate and pursue in organized task forces to help achieve further progress in.

- Formation and Maintenance of a TEMS Unit
- What is the desired goal and mission of the TEMS Unit?
- Who may be a Tactical Medical Provider (TMP)?
  - physician, nurse/ APN, PA, paramedic, EMT, 1<sup>st</sup> responder, other
- Administrative Considerations – MOU / Memorandum Of Understanding, contracts
  - med-mal insurance policies, LE status, liability protection if armed vs unarmed,
  - employee benefits, workers comp, paid vs volunteer status, others
- Funding sources – line item in city or county budget, grants, military surplus, personal expenditure, donations, fund-raising efforts, etc
- Getting Ballistic Protective Gear – what type, rating, used vs new, cost, where to obtain?
- Getting communications gear / radios / headsets / sound-reducing electronic earmuffs, other
- Getting medical gear – what types of backpacks, personal gear, vests, raid van med gear, etc

Protocols and Policies –

- include examples of other TEMS units, what do they do, what are their protocols / policies?
- tactical topics – LE training, TacMed training options
- TMP training – initial and continued med ed/ CME.
- team health maintenance
- Management / admin issues of TEMS Units
- EMS and TacMed specific protocols
- Specific lists: uniforms, protective gear, IFAKS, med vests, backpacks, additional gear, medications, pain control meds, etc
- Medical Threat Assessment – tools, standardized lists
- LE agency team medical record-keeping, immunizations, optimizing health of teams
- Responding to OIS – officer-involved shootings – how to support officers, teams
- Suicide prevention, techniques that work, department-wide policy development
- Preventive health measures – tactical officers, TMPs, patrol, K-9, bomb teams, etc
- Callout protocols, training coordination, routine TacMed drills, scenarios, team training

Our goal is to identify the key topics above and arrange a specific leader and task force to help make progress in certain areas. If you have a specific interest in any of the above topics, please contact Chair John Wipfler at [johnwipfler@gmail.com](mailto:johnwipfler@gmail.com)

#### Residency Support of Tactical Medicine Education -

One of our key projects this coming year will be to assemble a task force that will complete the educational materials (MS PowerPoint slide series, and other materials) and make these available for the approx. 270 EM Residency Programs in the USA, as well as other location that may benefit from using these materials to help education EM and Surgery residents, med students, and others. These lectures are already started, and when we have a majority of them done, will plan to share these with our Section members for further polishing / additions / suggestions. Then we, as a section, will make them available to residency program directors / residency coordinators.

Another project is to create a databank of tactical physicians who are willing to have their name on a discrete list (made available to USA residency program directors / coordinators), and made available so that any EM or surgery or other residency program can seek their help in teaching residents and medical students about tactical medicine. If you are interested in being placed on this list, and potentially teaching at your local / regional residency program, then please contact the Chairman directly. Our Section Leaders will also be reaching out to members in the near future.

#### Partner Society Updates

The NTOA continues to support tactical medicine in multiple ways, and we have section members who remain involved in the National Tactical Officers' Association. Dr. JR Pickett is currently deployed and was unavailable, but we will plan to seek his suggestions and input on mutually beneficial projects.

The IACP – International Association of Chiefs of Police – was discussed by Dr. David McArdle, who has been a long-time member and has extensive involvement. Dr. McArdle nicely summarized some of the key issues currently and will continue to increase involvement of tactical physicians and help bring about specific training more geared towards the patrol officer / deputy sheriff / solo-working LEO, in addition to tactical medicine. He has several excellent articles he has authored, which we will share with the group soon.

C-TECC – Dr. David Callaway and Dr. Rich Kamin and other section members are involved significantly in this excellent educational organization. Dr. Kamin gave a nice summary of the key areas of improvement and a sense of the direction that the C-TECC is heading next.

Note: we are looking for 2 ACEP Section members to volunteer and serve as representatives from ACEP to the C-TECC committee. If you are interested, please email your name, contact info, and a brief CV of your experience level (including tactical / military / other special training or involvement) to Dr. John Wipfler at: [JohnWipfler@gmail.com](mailto:JohnWipfler@gmail.com)

#### Award Presentation:

The Section was proud to present our 2021 Visionary Leader Award to Dr. Matthew Sztajnkrzyer (pronounced Stein-krit-zer). When one reviews his accomplishments and looks at his 72-page CV / bibliography, one quickly realizes that this brilliant man has done so much, and contributed greatly to the subspecialty of tactical medicine. His involvement in TEMS, EMS, fellowships, fire-fighting, multiple teaching appointments, his PhD and MD degrees, and extensive research and presentations over a myriad of topics... this gentleman is brilliant and highly deserving of this award.

Note that each year, we have multiple excellent candidates, and so it is always a hard decision to make.

Congratulations to Dr. Sztajnkrzyer, and also his wife and two sons for their support of his tremendous work.

#### Keynote Presentation – Dr. Matt Sztajnkrzyer – “Leap First – The Psychology of Rescue”

We were honored and blessed by his outstanding presentation. Dr. Sztajnkrzyer has performed multiple surveys and studies that have extensively looked at the mindset and psychology of LEOs and their attitudes towards injury, medical assessment and treatment, and the psychology of when and how to perform rescue and medical care for downed fellow officers. His insights were amazing, and he discussed the cognitive processing that occurs in the human mind, including System 1 (FAST, quick decisions, more susceptible to error) and System 2 (Slow, higher level thinking). The Risk-Benefit analysis, LEO bias (risk preference and framing), prospect

theory (LEOs are risk-permissive often), heuristics, and cognitive scripting are all topics he reviewed, and they very clearly play a role in determining how LEOs and TMPs may react. He noted that civilian medical training is the type most often given to LEOs, which is likely a mistake, as there are better ways to utilize reality-based training scenarios that are more likely to be faced by a modern LEO. For police officers / deputies, there is truly “a gun at every call”, and the dynamics, threats, risks, response choices, and ways of interacting at the scene are complex and worthy of further research and arranging specific medical training that is optimal for the men and women in Blue. We would like to thank Dr. Sztajnkrzyer for his many years and congratulate him again for the honor bestowed upon him by our Section members.

Conclusion of the Section Meeting:

Dr. Wipfler summarized the meeting agenda and key discussions. The Section leaders also spoke at the end, and together our team has a strong sense of optimism and a great deal of excitement about the future projects that our Section can discuss, choose, and pursue. He and his fellow leaders Drs. Springer, Bradley, Wong, and others are planning to reach out to you, our fellow Tactical Emergency Medicine Section members, and we look forward to your involvement and participation with small task force approaches to make advances in multiple areas. It is impossible to do it all, but we will be selective and together we can choose those topics with the ‘most bang for the buck’ and with fortune and a bit of sweat and time, we surely can achieve a majority of our goals.

Meeting adjourned approximately 3:30 pm Eastern Time.

A very sincere thank you for all those involved in helping to arrange this meeting, as well as those who choose to be involved in our section.

Respectfully submitted,

John Wipfler, MD, FACEP