American College of Emergency Medicine

Emergency Ultrasound Section

Tuesday, September 28, 2010
Las Vegas, NV

MINUTES

Participants

Approximately 250 members and guests attended the section meeting.
Board Liaison: Andrew Sama, MD, FACEP
Staff Liaison: Marilyn Bromley, RN

Agenda

1. Introduction
2. Results of Election
3. Section Grant – Online Examination.................................................................Dr. Stone
4. Section Grant – Workforce Survey .................................................................Dr. Schofer
5. Awards presentation.......................................................................................Dr. Chiricolo
6. Introduction of Subcommittee chairs – Written reports on activities will be filed in post SA Newsletter.
   a. Accreditation ..............................................................................................Dr. Chiricolo
      i. Website presentation .................................................................Dr. Hunt
   b. Community Practice .............................................................................Dr. Tillotson
      i. Website re-organization
   c. Critical care ............................................................................................Dr. Dean
   d. Media/Government Relations.................................................................Dr. Sierzenski
      i. PaACEP issue
      ii. MaACEP ........................................................................Dr. Gaspari
   e. Industry Roundtable (now Communications) .......................................Dr. Moore
      i. SRG document
   f. International..............................................................................................Dr. Price
   g. Medical Student......................................................................................Dr. Stone
   h. Military and Tactical ...........................................................................Drs. Ferre/Blankenship
      i. Reimbursement
         i. Terminology to avoid ..............................................................Dr. Hoffenberg
   j. Safety .........................................................................................................Dr. Nagdev
   k. US Management Course..........................................................................Dr. Foster
   l. US Section Web Page................................................................................Dr. Mailhot
   m. Subspecialty Development.....................................................................Dr. Lewiss
   n. Sonoguide .................................................................................................Dr. Hoffman
   o. Fellowship committee ............................................................................Dr. Chiricolo
7. Liaison Reports from
   a. Dr. Blaivas – WINFOCUS/WCU5/AIUM
   b. Dr. Mandavia – CTAF
   c. Dr. Sierzenski – NQF
8. New Chair Comments
9. SAEM Meeting............................................................................................Dr. Hoffman
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Major Points Discussed

Dr. Chiricolo welcomed everyone to the meeting and provided the results of the election. Dr. Michael Stone won the chair-elect position and Dr. Joel Schofer was elected as secretary-newsletter editor.

A report on the section grant (Workforce Survey) revealed it was well underway and was scheduled to be sent out to section members in November.

Dr. Chiricolo announced that the section had been recognized for its outstanding website and a commendation for Dr. Gary Quick was presented for his outstanding service to the section in serving as the section’s sectary/ newsletter editor for 10 years.

Ultrasonix was thanked for their generous support for the box lunches.

Accreditation
Through the efforts of this committee the development of an online accreditation process for emergency medicine practices that use ultrasound is underway. Dr. Pat Hunt (committee member) has been invaluable in helping to develop and code the sample website.

Community Practice
This subcommittee finished and posted the preceptor list for mini-fellowship opportunities for community physicians. They also updated the Emergency Ultrasound proposal paperwork available on the website for those starting a program (how to talk to your chair).

Critical Care
Despite the ABIM acceptance of EM residency trained physicians in Critical care fellowship, Emergency Medicine continues to be something of a guest at its own table when it comes to recognition as a Critical Care specialty. Emergency ultrasound is a clinical application of great utility in Critical Care in which our specialty has an established track record in research, educational, and use in patient care. Although CCM is catching up rapidly in its use of bedside ultrasound, it was suggested that ‘we’ should use our strength in this area both to bolster the standing of EM in the critical care community, and to evolve the specialty of CCM in ways that we believe will be best for patient care and for Intensivists who come to CCM through emergency medicine specialty.

Fellowship
This committee has been developing curriculum guidelines and working collaboratively with SAEM to standardize an emergency ultrasound fellowship curriculum.

Media Government Relations
This subcommittee has been busy representing the interests of emergency ultrasound to a variety of governmental organizations during the last year’s ever changing health care environment.

Industry
This subcommittee helps to organize the annual Industry Round table which takes place at the ACEP annual meeting and has worked to make manufacturers aware of the specific concerns and needs of the point of care/emergency ultrasound market. For example, one goal for this year is to encourage companies to develop QA workflows and links to EMR products that facilitate the practice of emergency ultrasound.
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**International**
Section members have been working on editing the Partners in Health Manual of US for Resource Limited Settings. It will be ready for Epub in mid September and it will be a free online text that is a resource geared toward international applications for ultrasound. Many section members contributed to it and the incoming and outgoing chair have worked incredibly hard over the last year to get it published. The “Partners in Health is excited to introduce The PIH Manual of Ultrasound for Resource Limited Settings, to be e-published online at [www.pih.org](http://www.pih.org) on September 30th 2010. This resource will be a freely downloadable, complete textbook of bedside, clinician-performed ultrasound including a case compendium of real cases from Haiti and Rwanda. The Manual is intended to be used as an educational tool for those learning and teaching ultrasound in developing world settings, with focus on specific disease processes seen in those settings.”

**Medical Student**
This year's activities have focused largely on collecting and analyzing the exam results from the online EUS exam (a section grant from this subcommittee) that was completed Dec 2009. Since last year's section meeting, the exam has gone online via ACEP's website. Over 10,000 modules have been completed by examinees. Thanks to Rob Blankenship, we've gained the ability just recently to analyze the test data by individual examinee: we hope this will provide valuable insight into the general EUS community's understanding of key concepts, and allow us to identify subjects on which to focus future educational efforts. The subcommittee has also collaborated with its corresponding subcommittee at SAEM to identify and poll leaders in medical student EUS education in an effort to provide resources for educators interested in integrating EUS into the medical student curricula at their institutions.

**Military and Tactical**
The tactical ultrasound committee is designed to advance the use of emergency ultrasound in the tactical field environment where resources are limited. It also serves to advance the use and quality of emergency ultrasound within the military community where ultrasound plays a key role in battlefield medicine.

Dr. Rob Ferre is stepping down as chair of this subcommittee and Drs. Brooks Laselle and Jeremy Johnson will be incoming co-chairs. This year Dr. Ferre spearheaded the effort to finish a white paper on tactical and battlefield ultrasound. In addition, the committee continued to create ultrasound cases but in a new and improved format. These cases detail the use of emergency ultrasound in a case-based format and discuss the clinical application of pathologic ultrasound findings in a battlefield or other austere environments.

**Pediatric**
We have had a lot going on within the field, focusing on outreach and education.

For the second year in a row, we put on a very successful pediatric emergency ultrasound course at Pediatric Academic Societies (PAS). We had over 150 participants for a variety of subspecialties including emergency medicine, critical care, neonatology, hospitalists and even one endocrinologist. Feedback was amazing. For the second year in a row, it was the most highly attended workshop at PAS.

Through the efforts of Drs. Lei Chen and Stephanie Doniger, pediatric emergency ultrasound will be the topic at the next American Academy of Pediatrics National Conference and Exhibition pre-course conference in San Francisco (October 1st, 2010).
Dr. Stephanie Doniger is currently editing the first textbook devoted to pediatric bedside ultrasound, entitled Pediatric Emergency and Critical Care Ultrasound. She has recruited multiple authors from all over the country to contribute.

Through the efforts of Drs. Jim Tsung and Lei Chen, the AIUM 2011 pre-congress course will be Ultrasound Directed Pediatric Resuscitation (Point-of-Care Ultrasound for Acute Care Pediatrics). For the first time, the most recent edition of the Textbook of Pediatric Emergency Medicine (Fleisher and Ludwig) now has a chapter devoted completely to pediatric ultrasound.

**Reimbursement**
The subcommittee completed a 2009 update of the document on reimbursement and billing which is on the website. They have been answering questions to the list-serve regarding billing issues. For next year we are going to send out a survey to gauge the scope of reimbursement issues on who is having challenges with which carriers for which codes. This way we can think about directing our efforts – for example other organizations (ex AUA) offer appeal letters for commonly rejected procedure codes. We will be trying to set an agenda and strategies this year in order to meet the challenge of maintaining fair reimbursement for emergency ultrasound in the years to come.

**Safety**
The goal of the committee is to obtain best evidence in regards to patient safety when using bedside ultrasound. Currently the committee is working on developing an evidence based guideline for ultrasound probe cleaning and doppler in first trimester pregnancy. Along with collecting data for protocols, the committee will attempt to foster research in an attempt to determine best practice standards.

**Subspeciality Development**
The committee for subspecialty development (Drs. Vivek Tayal, John Kendall, David Bahner, Deepak Chandwani, Michael Roshon and Paul Sierzenski) holds as an underlying intent to research and educate ourselves and the emergency ultrasound community on the possibilities for formalizing our sub-specialty — it is a long range task force to consider a certification model for our subspecialty.

We began by educating ourselves on the different models of certification. At this time, there is not necessarily a definitive endpoint to create a certification or board examination for our subspecialty. Our mission is to research and educate the section on the possibilities for our field.

This discussion debate can begin by considering whether we as a subspecialty endorse a certification or board or examination process for physicians pursuing fellowship training and for those who have designated themselves as sub-specialists in emergency ultrasound.

Members of the sub-committee began by looking at models of certification and credentialing that currently exist. ACGME approved subspecialties such as EMS and Toxicology models were explored as well as Echocardiography as a subspecialty, Neurology, and the RDMS. A summary of each model has been prepared.

Some of the focused questions we utilized in preparing this summary:
- History eg, date of inception, organizing body, approving body
- Is the model stand-alone or part of its own governing body?
- Who is eligible for the certification, what specialization, what are the training requirements
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-Fees to join, to take the exam, to join the group/society
-Duration of membership/certification and rules for renewal of privileges
-Examination? If yes, then format? eg, written, hands-on, oral etc.

We have spoken with ABEM about applying for subspecialty status for ultrasound. We have reviewed templates of what is required by ABEM and ABMS for recognition as a subspecialty as well as what is required by ACGME for their recognition of a new subspecialty. While ACGME does't approve the subspecialty per se, their board does approve whether or not they find an application demonstrates that there is separate unique body of knowledge required to warrant fellowship programs be recognized for a subspecialty to be managed by the RRC. Additionally, they want to see that there are adequate numbers of physicians interested in the subspecialty. While the applications need to be written by clinicians in the subspecialty, an appointed person at ABEM is available to review and confirm that the application meets all of the requirements of ABEM, ABMS, and ACGME. From a timing perspective, the application is submitted first to ABEM for approval of the ABEM Board of Directors. Once approved by ABEM, the subspecialty application is submitted by ABEM to ABMS for approval. Concurrent to the submission to ABMS, the ACGME document is developed and submitted to the ACGME Board of Directors for their consideration. Due to the timing of board meetings, in total it takes approximately 2 years for an application to get through the process. If application were pursued for ACGME approval, this application requires ABEM approval followed by a 12-18 month approval process from ABMS. The writing of such an application takes an organized and time consuming (ie, years) effort.

US Management Course
The Emergency Ultrasound Management Course Committee Chaired by Dr. Troy Foster with Senior Director Dr. Vivek Tayal and Assistant Directors Dr. Bret Nelson and Dr. Raj Geria have been busy this year preparing a couple new items for the course. The course was approved for 6.75 CME hours which was a difficult but worthy effort headed by Dr.s Tayal and Foster with the help of ACEP staff members Marilyn Bromley, RN, Julie Williams and Mary Hines. Additionally, we are going to try breakout groups in lieu of the question and answer sessions in an attempt to make a more hands on and interactive portion of the course. This portion is spearheaded by Dr. Bret Nelson.

US Webpage/Sonoguide
The ACEP Ultrasound Section website continues to be a valuable resource for our members and interested visitors. Over the last year we received very positive feedback also substantiated by solid web traffic. In recognition of this success, our section received the “Best Section Website” award from the ACEP BOD in 2010. Thanks again to everyone who contributed!

Visits to www.sonoguide.com are also increasing and are currently at about 20,000 visitors/month. We plan to add additional content and updates to both sites over the course of the year.

Liaison Reports
Dr. Sierzenski indicated that ACEP involvement with NQF has resulted in some quality measures that will be applicable in the ED. Dr. Blaivas reported on the growth and activities of WINFOCUS. Dr Tayal noted that the ASE/ACEP paper had been approved by the BOD and will be published on the ACEP Website.

Dr. Chiricolo thanked everyone for attending the meeting and asked anyone interested in working on any of the subcommittees to please contact Dr. Vicki Noble, incoming chair. The meeting was adjourned and the SAEM Special Interest Group on Ultrasound convened their meeting.