

**American College of Emergency Physicians
Clinical Policies Committee Meeting
November 20, 2024
Zoom Meeting**

MINUTES

Participants

Committee members participating in all or part of the meeting: Deborah B. Diercks, MD, MSc, FACEP, Chair; Scott Silvers, MD, FACEP, Co-Chair; Benjamin W. Friedman, MD, FACEP, Methodologist; Seth R. Gemme, MD, FACEP; Charles J. Gerardo, MD, MHS, FACEP; Steven A. Godwin, MD, FACEP; Benjamin W. Hatten, MD, MPH, FACEP; Jason Haukoos, MD, MSc, FACEP, Methodologist; Sean M. Hickey, MD; Heemun Kwok, MD, MS, FACEP, Methodologist; Joyce Li, MD; Bruce M. Lo, MD, MBA, RDMS, FACEP; Susan B. Promes, MD, MBA, FACEP; Kaushal H. Shah, MD, FACEP; Richard D. Shih, MD, FACEP; Molly E. W. Thiessen, MD, FACEP; Christian A. Tomaszewski, MD, MS, MBA, FACEP; Stacy A. Trent, MD, MPH, Methodologist; Jonathan H. Valente, MD, FACEP; Stephen P. Wall, MD, MSc, MAEd, FACEP.

Also present for all or part of the meeting: Joshua Easter, MD, Writing Committee on Pediatric Fever; Sharon E. Mace, MD, FACEP, FAAP, Writing Committee on Pediatric Fever; Travis Schulz, MLS, AHIP; Kaeli Vandertulip, MBA, MS, AHIP.

Agenda

1. Welcome and Introductions
2. Disclosures Pertinent to the Agenda
3. Subcommittee and Liaison Reports
4. Policy Sunset Review
5. 2024-2025 Clinical Policies Committee Objectives
6. 30-Day Comments on Carbon Monoxide Clinical Policy
7. Non-ST-Elevation ACS Critical Question
8. Opioid Critical Question
9. 1st Draft of Pediatric Fever Clinical Policy

Major Points Discussed

1. Welcome and introductions

Dr. Diercks welcomed everyone to the meeting. Participants introduced themselves.

2. New disclosures pertinent to the agenda

There were no new disclosures pertinent to the agenda.

3. Subcommittee and Liaison Reports

The committee members chairing clinical policies currently under development updated the committee on the status of their clinical policies.

4. Policy Sunset Review

Dr. Diercks led the discussion on the policy statement and Policy Resource and Education Paper (PREP) assigned to the committee for review. Members of the committee volunteered to review the “Use of Peak Expiratory Flow Rate Monitoring for the Management of Asthma in Adults in the Emergency Department” policy statement and PREP for reaffirmation, rescindment, revision, or sunset by the December 13 deadline.

5. 2024-2025 Clinical Policies Committee Objectives

Dr. Diercks reviewed the 2024-2025 Clinical Policies Committee Objectives with the committee. There was considerable interest in Objective #10 which directs the committee to explore the use of artificial intelligence to facilitate the development of clinical policies. A workgroup was formed to address this objective.

6. 30-Day Comments on Carbon Monoxide Clinical Policy

Dr. Shih, with assistance from Dr. Tomaszewski, led the committee members in the discussion of the public comments received on the carbon monoxide clinical policy. Based on the feedback, the title of the clinical policy was clarified to better reflect its content. The remainder of the feedback, although greatly appreciated by the committee, was not considered compelling enough to warrant changes to the draft.

7. Non-ST-Elevation ACS Critical Question

Dr. Shah presented proposed critical questions for the non-st-elevation ACE clinical policy. The feedback received from the committee will be used to focus and refine the critical question and a question will be brought back to the committee for further feedback.

8. Opioid Critical Question

Dr. Gerardo presented the proposed critical question for the opioid clinical policy. Members of the committee provided feedback. After extensive discussion, the committee recommended the question be simplified and split into two questions which will be developed simultaneously and submitted as two separate clinical policies.

9. 1st Draft of Pediatric Fever Clinical Policy

Dr. Mace, with assistance from Dr. Easter, led the committee members in the discussion of the draft of the pediatric fever clinical policy. The writing committee will incorporate the committee’s suggestions to the wording of the recommendations, and the draft will be presented to the committee for review at the December 18 Clinical Policies Committee meeting.