

**American College of Emergency Physicians
Section of Rural Emergency Medicine**

October 16, 2016
Las Vegas, Nevada

MINUTES

Participating in all or part of the meeting were: Dr. Tripp Wingate, Dr. Darrell Carter, Dr. Ken Gramyk and rural section members

Others participating: Jeff Fraler, ACEP staff liaison

Agenda

11:00 – 11:15 Networking/lunch

11:15 - 11:30 Dr Becky Parker - **ACEP President remarks**

11:30 – 11:45 Chris Martin (Director of Marketing) **Intro to CEMPR**A (our sponsor for this year)

11:45 – 12:15 Dr. Mark Plaster **Future of Tele-Medicine and REM**

12:15 - 12:25 Dr. Darrell Carter (Immediate Past Chair) **Updates on CALs**

12:25 - 12:30 Dr. Wingate (Past Chair) **updates on social media**, etc.

12:30 - 12:35 Dr. Ula Hwang - **Geriatric ED Collaborative**

12:35 – 12:45 Dr. John Rogers (ACEP BOD) **Update on ACEP Rural EM Task Force**

12:45 - 12:50 Dr. Edwin Leap - discuss **REM documentary film**

12:50 - close **Open discussion** on Rural Task Force updates/Future projects

Major Points Discussed

1. Chris Martin from CEMPR A (www.cempra.org) gave a corporate overview, status on pneumonia and clinical updates on antibiotic-development.
2. Dr. Becky Parker, ACEP President, discussed the current climate in rural medicine. She also discussed the approved second journal from ACEP and the Grassley bill from Iowa and its impact
3. Dr. John Rogers gave an update on the rural emergency medicine task force and discussed:
 - a. Telemedicine as a tool for rural EDs
 - b. The need to reach out to rural EDs
 - c. The importance of social media outreach
 - d. Getting rural topics in Critical Decisions in Emergency Medicine
 - e. Working as a section to define rural EM
 - f. Getting a rural track at ACEP17

- g. [Rural EM Podcast with ACEP Frontline](#)
- h. [CALs](#)

4. Mark Plaster, MD gave a short presentation of his history as a rural physician, telemedicine, increasing efficiency in rural EDs, IT upgrades, and compensation for care. <http://www.plasterforcongress.com/>
5. Dr. Darrell Carter gave a presentation and update on CALs, including the growth in courses on trauma, benchmark skills, newborn modules, and essentials. New initiatives include growing and sustaining an online learning presence, and the development of programs in Haiti, Kenya, and Ethiopia
6. Dr. Tripp Wingate discussed the rural sections social media presence in lieu of section chair Dr. Ken Milne:

The facebook page continues to grow and now has 229 likes.

Rural EM Section members can use the Facebook page to share information related to issues such as pre-hospital, initial primary hospital, and tertiary hospital care of rural emergency patients.

The Facebook page can also act as a database of relevant literature, education, and research.

If you have not liked the Rural EM Section Facebook page already please do so today and join the conversation.

Ken Milne

7. Dr. Edwin Leap discussed a REM documentary
8. Dr. David Ernst gave updates on rural hospital close statistics (over 60 have closed in the last five years). He also discussed Senate Bill 1648, for more information, visit: <https://www.congress.gov/bill/114th-congress/senate-bill/1648>

He also discussed the following accepted resolution (16) that was approved at the ACEP Council meeting 2016.

RESOLUTION: 16(16)

SUBMITTED BY: Freestanding Emergency Centers Section

Rural Emergency Medicine Section

SUBJECT: Freestanding Emergency Centers as a Care Model for Maintaining Access to

Emergency Care in Underserved and Rural Areas of the U.S.

RESOLVED, That ACEP develop a report or information paper supporting the use of Freestanding
32 Emergency Centers as an alternative care model for the replacement of
Emergency Departments in Critical Access
33 and Rural Hospitals that have closed, or are in imminent risk of closure, to
maintain access to emergency care in the
34 underserved and rural regions of the United States.

The meeting was adjourned.