

AMERICAN COLLEGE OF EMERGENCY PHYSICIANS

Emergency Medicine Practice Management and Health Policy Section Meeting
Monday, October 26, 2015
Boston, MA

Minutes

Attendees

Nicholas F. Vasquez, MD, FACEP, Chair; Anish Amin, MD; Susan M Boch; Ronald J Brace, MD, FACEP; Keri L Carstairs, MD, FACEP; Sharmistha Dev, MD; John Elliott, MD; Enrique R Enguidanos, MD, FACEP; David G Friedenson, MD, FACEP; Jessica Galarraga, MD, MPH; Heather A. Heaton, MD; Dennis Hsieh, MD, JD; Leah Honigman Warner, MD; Da Eun Im; Manjot Jassal; Abbas H Kothari, MD; Rodney B Look, MD, FACEP; Abhi Mehrotra, MD, FACEP, Immediate Past Chair; Jonathan Miller, MD; Karolyn K Moody, DO, MPH; Omer Moin, MD; Jay Mullen; Elizabeth Munding, Esq; Lauren M Nentwich, MD, FACEP; Mark D Pearlmutter, MD, FACEP; Annabella Salvador-Kelly, MD, FACEP; Jeremiah Schuur, MD, FACEP Paul M Sheehan, MD, FACEP; Sundeep Shukla, MD; Jennica Siddle;; Philippa Soskin, MD; Thomas J. Sugarman, MD, FACEP; Joseph Richard Twanmoh, MD, FACEP; Andrew Scott Ulrich, MD, FACEP; Arjun K Venkatesh, MD, MBA; David A Wein, MD, FACEP; Mackensie A Yore.

Other Participants: Margaret Montgomery, RN, MSN, staff liaison.

Agenda

1. Call to Order/Welcome
2. Section Business
3. Panel Presentations and Discussion
4. Adjourn

Major Points Discussed

1. Dr. Vasquez welcomed those in attendance and introductions were made.
2. Dr. Vasquez initiated the business portion of the section meeting. It was reported that the section currently has 394 members. Dr. Brace provided the Council report and reviewed the election results and referred to deliberations about Ketamine, naloxone and fair payment. Information about the development of the Clinical Emergency Data Registry ([CEDR](#)) was shared.

Section members were encouraged to bring forward topics that the section should address through section grants or projects. It was agreed that the section website should be open and that a log in should not be required to access the site.

Participants were informed that an information paper on potential solutions to address boarding of psychiatric patients in the ED, authored by members of the Emergency Medicine Practice Committee will be available on the ACEP website in the near future. Participants were also informed that Dr. Michael Gerardi, the immediate past ACEP president, appointed a workgroup, "Coalition on Psychiatric Emergencies" (COPE) to address these issues. A number of subgroups have been assigned specific tasks. Additional resources will be provided as they completed.

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Dr. Vasquez then proceeded to introduce the panel panelists addressing “Psychiatric Boarding: Three State Perspectives on a National Problem.”

Panelists included:

- Enrique Enguidanos, MD, FACEP- WA
- Abhi Mehrotra, MD, FACEP – NC
- Mark Pearlmutter, MD, FACEP - MA

The panelists shared information about efforts in their states to address the lack of psychiatric resources. Dr. Pearlmutter shared information about the data that was collected in Massachusetts to document the extent of the problem and specific needs. Dr. Mehrotra shared the experience of working with the psychiatric residency program and the use of telepsychiatry to reduce time to evaluation. The use of electronic bed availability information was also discussed. It was noted that this was not as helpful as expected. It was also noted that there was mixed results with telepsychiatry services. Dr. Enguidanos shared information on the experience in Washington State. All emphasized that data is important to tell the story of the lack of services and that there are multiple stakeholders that need to be involved.

Following additional discussion on psychiatric boarding two additional presentations were provided. The presentations focused on two EMF funded research projects.

Presentations

Arjun Venkatesh, MD, MBA

Evaluating the Impact of Observation Services on ED Admissions Rates: Implications for Quality Measurement

Jeremiah Schuur, MD, MHS, FACEP

An Analysis of Freestanding Emergency Departments in the U.S.

3. With no further business, Dr. Mehrotra adjourned the meeting.