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Society for Academic Emergency Medicine
Newsletter

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MARCH/APRIL 2009 VOLUME XXIV NUMBER 2

Dave Wilcox, MD Challenges SAEM Colleagues

Painless Way To Donate
To Research Foundation!

Do You Have An
Effective CV?

Ethics In Action
Cultural Considerations

SAEM Member
David E. Wilcox, MD
Emeritus

“to improve patient care by advancing research and education in emergency medicine”

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SAEM MEMBERSHIP

Membership Count as of February 18, 2009

2831	Active
108	Associate
2971	Resident/Fellow
286	Medical Students
5	International Affiliates
26	Emeritus
8	Honorary
6235	Total

2009 SAEM DUES

\$510 Active	\$145 Fellow
\$475 Associate	\$125 Resident Group
\$445 Faculty Group	\$125 Medical Student
\$415 2nd yr. Graduate	\$105 Emeritus
\$300 1st yr. Graduate	\$100 CDEM
\$145 Resident	\$ 25 Interest Group

SAEM NEWSLETTER ADVERTISEMENT RATES

The SAEM Newsletter is limited to postings for fellowship and academic positions available and offers classified ads, quarter-page, half page and full page options. The SAEM Newsletter publisher requires that all ads be submitted in camera ready format meeting the dimensions of the requested ad size. See specific dimensions listed below.

- A full page AD costs \$1250.00 (7.5" wide x 9.75" high)
- A half page AD costs \$675 (7.5" wide x 4.75" high)
- A quarter page AD costs \$350 (3.5" wide x 4.75" high)
- A classified AD (100 words or less) is \$120

If there are logos, images and/or special fonts, please send the files for each, along with the completed advertisement.

We appreciate your proactive commitment to education, as well as personal and professional advancement, and strive to work with you in any way we can to enhance your goals. Contact us today to reserve your Ad in an upcoming SAEM newsletter. The due dates for 2009 are:

April 1, 2009 for the May/June issue
June 1, 2009 for the July/August issue


August 1, 2009 for the September/October issue
October 1, 2009 for the November/December issue



Lisa Moreno-Walton

In a recent development that confirms the potential emergency medicine physicians have to develop and sustain serious research careers, Lisa Moreno-Walton, MD, MS, FACEP, FAAEM, Assistant Professor and Associate Residency Program Director at Louisiana State University Health Sciences Center, New Orleans, was recently the recipient of a Board of Regents Clinical Research Scholars grant. The grant, valued at \$120,000.00, will cover tuition, fees and some protected time over a two year

period during which Dr. Moreno will complete her Masters Degree in Clinical Research at Tulane University School of Public Health and Tropical Medicine. Dr. Moreno, along with co-investigator and LSUHSC Physiology Department Chair, Patricia Molina, MD, PhD, was also awarded a Phase II Translational Research Initiative Grant for \$65,000.00 to study Consequences of Alcohol Intoxication on Outcome from Traumatic Injury. Her career path to date highlights the importance of dedicated multidisciplinary mentorship for junior faculty interested in pursuing a path toward becoming independent EM researchers.

Dr. Moreno-Walton's research career got its start in 2007 when she was recruited to LSU by Dr. Peter DeBlieux. While interviewing, she met with Dean of the LSU School of Medicine, Dr. Steve Nelson. Dr. Nelson realized that Dr. Moreno-Walton would be an ideal candidate for the Clinical Research Scholars program, a mentored research Masters Degree program supported by the Clinical and Translational Research, Education and Commercialization Project, a cooperative effort between Tulane and LSU. Dr. Moreno-Walton developed a proposal for the Research Scholars program based on her interest in trauma research with the mentorship of Dr. Patricia Molina, Chair of the Dept. of Physiology at LSU School of Medicine. She was accepted as one of twelve Clinical Research Scholars, becoming the first scholar from LSU and the only emergency medicine physician from either medical school in the program. In addition to her new position as a clinical scholar, she and her mentor Dr. Molina submitted a protocol and grant application for a Phase II Transitional Research Initiative Grant that was awarded in mid-December. Having started less than two years ago at LSU, Dr. Moreno-Walton's research career is off to a promising start and has proved the ideal match for her career goals. 

Erratum:

In the January/February 2009 issue of the SAEM Newsletter acknowledgment of Dr. Emily Senecal was mistakenly omitted as one of the major contributors to the SAEM Question Bank in the article about CDEM. The author and chair of CDEM, David Manthey, personally regrets the error. She has worked countless hours and delivered scientific presentations on the Question Bank.

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President's Message

SOCIETY FOR ACADEMIC EMERGENCY MEDICINE

Katherine Heilpern, MD | *Emory University*



Katherine Heilpern, MD

'Collaboration' is one of my signature themes this year. As we round the turn into the spring, the Society continues to rise to meet new challenges in research and education. In 2009, rowing the boat together is more important than ever. To that end, the Board of Directors and the senior management team have worked to promote and endorse scholarly partnerships between and among our committees, task forces and outside organizations.

For example, in response to anticipated scrutiny regarding the relationship between academic health centers, faculty and for-profit pharmaceutical and device manufacturers, several SAEM committees (Ethics, Industry Relations and GME) are working together to draft white papers that assess conflict of interest, influence and reciprocity in scholarly endeavors. For our grant review process, the SAEM Grants Committee took a firm and noble stand on conflict of interest and transparency. This new arms-length policy was endorsed by the SAEM Board of Directors, the SAEM Research Foundation Board of Trustees and recently published in the January/February 2009 SAEM newsletter.

Under the leadership of Dr. Brent King, the Association of Academic Chairs of Emergency Medicine is partnering with the Association of Administrators in Academic Emergency Medicine to hold their inaugural conference in April 2009. To reinforce the theme of collaboration, reaching out and reaching across, the keynote speakers include Dr. Gunnar Ohlen, President of the European Society of Emergency Medicine, and Dr. Kenneth Shine, Executive Vice Chancellor for Health Affairs, UT Health System, and former President, Institute of Medicine. In addition to the opportunity gained from these interactions, the Chairs group will reflect on issues critical to our academic mission,

including faculty development, department financing/funding and undergraduate medical education initiatives.

The Administrators Association has been very active this year, uniting EM Department Administrators around the country in efforts to identify 'best practices' and best evidence in the management of our busy, complex, occasionally fragile, academic practices. In addition, the expertise of the Administrators will be reflected as we define and refine the new SAEM salary survey.

The Regional Meetings Task Force presented the Board of Directors with an elegant geographic analysis of new and existing Emergency Medicine residency programs. Based on these data, the Board endorsed the Task Force proposal to expand from six to eight recognized regions with the expressed goal of increasing our complement of SAEM regional scientific meetings. The two new regions are the Great Plains (Illinois, North Dakota, South Dakota, Missouri, Iowa, Minnesota, Wisconsin, Nebraska and Kansas) and South Central (Texas, Louisiana, Arkansas and Oklahoma). This represents yet another example of achievement, collaborative and academic, for emergency medicine.

"Crowding" has unfortunately become part of our 21st century emergency medicine lexicon. The one piece of good news is that this word is now also in the lexicon of our hospital CEOs, COOs and CFOs. Thanks to the efforts of the Crowding Task Force, led by Dr. Steve Bernstein, and strong partnership with ACEP, we are defining and developing the evidence on the negative impact of hospital crowding on patient safety and quality, education and research. This is an advocacy issue we can and should own. To help you sort through the evidence, see the robust repository of Crowding articles on our SAEM website.

So, I hope these examples demonstrate that the Society continues to anticipate and respond to our mission to advance patient care through research and education. Please help us by contributing donations of your time, ideas, money and energy. In these tenuous times, your contributions are critical and your compact with SAEM more important than ever.



Nominations for SAEM Awards

Medical Student Excellence in Emergency Medicine Award

Deadline: 4 weeks prior to certificate date

SAEM is pleased to sponsor the Excellence in Emergency Medicine award. This award is made available for each medical school to select a senior medical student who has demonstrated excellence in the specialty of emergency medicine. Each medical school is limited to one recipient each year.

For more information on our many awards, visit www.saem.org and follow the awards link at the top of the page.





Executive Director's Message

This February, I visited the ACEP Headquarters for three days. I met with staff members learning about ACEP activities, priorities and future directions. I attended part of the ACEP Board of Directors meeting and the EMF Grantee Workshop which was attended by two SAEM grantees. All this concluded with EMF and SAEM Research Foundation leadership meeting to discuss future opportunities to collaborate. The theme of my entire visit was collaboration.

In my career someone once defined collaboration and "working together" as distinctly different relationships between individuals or organizations. That person's definition emphasized collaboration's commitment, encompassing all aspects of the endeavor. A dictionary definition of Collaboration is:

***Collaboration** is a recursive process where two or more people or organizations work together toward an intersection of common goals — for example, an intellectual endeavor that is creative in nature—by sharing knowledge, learning and building consensus. In particular, teams that work collaboratively can obtain greater resources, recognition and reward when facing competition for finite resources.*


SAEM leadership has been actively reaching out to medical/healthcare organizations offering to collaborate by identifying members with expertise to assist in writing guidelines, representing academic EM perspective at meetings, etc. Too often organizations prepare guidelines for patient care or develop a conference program. Then, ask SAEM to review and endorse the activity (working together), rather than inviting participation, commitment and engagement from the earliest stages. Continued outreach enables recognition of SAEM as a resource with groups initiating contact with us more frequently at the beginning of a project.


Members can play an important role representing SAEM in these relationships. The SAEM website now has a form for members to identify their areas of expertise and help create a list for future collaborative efforts. SAEM currently collaborates with groups including the American Heart Association; Emergency Medicine Patient Safety Foundation; ACEP; AMA; Institute of Medicine; SAEM/ACEP NIH Task Force; research grants and fellowships; guidelines and conferences.

When you are at a meeting, conference or reading a group's newsletter, you may think of a potential connection for SAEM and other groups to collaborate. Send a note to the SAEM headquarters with your suggestions and the Board can assess the possibilities. Each connection builds relationships with other organizations and strengthens SAEM and its ability to serve its members.



James Tarrant, CAE
SAEM Executive Director


With an academic perspective of research and training, SAEM is in an ideal position to expand collaboration with other groups. Forward your suggestions or share your expertise as an SAEM representative allowing for continuing opportunities. By moving beyond "working together" with others to collaborating we can realize benefits for academic emergency physicians and their patients. 



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New Orleans, LA – The 2009 SAEM Annual Meeting

Craig Newgard, MD, MPH | Oregon Health & Science University | SAEM Program Committee Chair



Craig Newgard, MD, MPH

The 2009 SAEM Annual Meeting will be held in New Orleans, Louisiana from May 14 – 17. The didactic and scientific portions of the meeting are now complete and the Program Committee is finalizing preparations for a tremendous meeting. Registration, hotel, and detailed meeting information can be found on the SAEM website. Make sure to register by April 6 for the early registration discount and book your room by April 17 for the reduced SAEM group rate.

Please note that if you are speaking in one of the 33 didactic sessions, there is an adjusted registration fee schedule posted on the SAEM website.

We received many outstanding didactic submissions, 33 of which will be featured in the program. Based on evaluations from previous meetings and member suggestions, we are piloting “tracks” in the meeting. Didactic sessions will be marked based on content for ease in identifying pertinent sessions for attendees. The four targeted tracks will include: education, research, faculty development, and administration/ED operations. The didactic meeting grid will appear similar, though the sessions are organized to allow attendees to focus on topics that complement their interests and to avoid conflicts in sessions with similar content.

The deadlines for scientific abstracts and Innovations in Emergency Medicine Education (IEME) exhibits are also now behind us and, despite moving the deadline forward by one month, there was an increase in both the quantity and quality of submissions. There were 1,187 submitted abstracts (compared to 1,132 submissions for the 2008 Annual Meeting), of which 683 (58%) were accepted. The number of abstracts selected for the 2009 meeting is the largest number ever, representing a 20% increase over the number of abstracts presented last year.

Approximately 20% of abstracts have been selected for oral presentations and grouped into content themes. The Program Committee tries to vary the themes and diversify the content presented in oral abstract sessions each year; not all high-quality research can be slated for oral presentations. As I have noted in previous newsletter articles, the abstract review and standardized scoring process is rigorous, with approximately 100 expert reviewers and 20 Program Committee reviewers. There are several levels of oversight to ensure a fair and comprehensive review process. However, due to the very tight timelines involved with coordinating, organizing, and publishing the large number of abstracts, there is no appeal process. In addition to scientific submissions, we had 83 IEME submissions, of which 20 were selected for presentation. IEME exhibits will be split into two groups, each presenting for two days.

Based on positive feedback from the social events at last years' Annual Meeting, we will again have the Opening Reception on Thursday evening (May 14), Networking Breakfast for all attendees on Friday morning (May 15), and the Third Annual SAEM Fun Run on Saturday morning (May 16). On Saturday afternoon, there will be a special session featuring a national dialogue on development of the Emergency Care Coordination Center within the Department of Health and Human Services to coordinate emergency care in the U.S. This session will be followed by a wine and cheese poster session Saturday evening from 4:30 – 6:30 pm.

Finally, you might consider coming to town a day early and catching the AEM Consensus Conference on Public Health in the Emergency Department, the CPC Semi-finals, Intensive Grant Writing Workshop, or the SAEM Leadership Academy.

Thank you to the SAEM office staff, the 2009 Program Committee members, scientific reviewers and investigators, didactic submitters, and many others that have helped create an amazing 2009 Annual Meeting. Please get your meeting registration in, your travel arrangements set, and prepare to join us in New Orleans!



Call for 2010 Academic Emergency Medicine (AEM) Consensus Conference Proposals

Deadline: April 15, 2009

The editors of *Academic Emergency Medicine* (AEM) are now accepting proposals for the AEM Consensus Conference to be held on June 2, 2010, the day before the Society for Academic Emergency Medicine (SAEM) Annual Meeting in Phoenix. Proposals must advance a topic relevant to emergency medicine that is conducive to the development of a research agenda and be spearheaded by thought leaders from within the specialty.

For more information, visit www.saem.org and follow the link to 2010 AEMCC Proposal



SAEM Research Foundation Support: A Message and Plea from a Long Time SAEM Member

Research, teaching, EM practice in a cutting edge environment, interaction and networking with academic colleagues; why do you practice in academia? Those of our SAEM members in research understand the importance of establishing evidence based EM practice. For those of our members performing other, but no less important, functions in academia, we all must realize the benefit provided by research. We all benefit from EM research, including, and especially, our patients.

For those of us "mature" enough to remember the early days of EM practice, before we became an established specialty within the House of Medicine, research helped expand our knowledge base, and gradually defined our specialty. Today, research continues to solidify our knowledge base, and continues to refine the definition of our specialty.

As the organization specifically representing academic EM, we have a new opportunity to support our very own SAEM Research Foundation, and confirm our understanding that we and our patients mutually benefit from EM research. What other charities do we support where we directly benefit from our personal contribution? 100% of your donation is tax deductible. This means your contribution actually "costs" you only approximately 60% of the total after tax deductions (depending on your federal and state tax brackets, but full time EM Physicians, even academicians, tend to be in the highest tax brackets).

SAEM is searching for 1000 members to contribute \$100 (actual cost approximately \$60 after tax deductions) to build our Research Fund. My SAEM membership number is 290, but we now have over 6000 members. With several thousand attending level "Active" members, I can't understand why we don't have 100% participation at this level. \$100 (actually \$60) won't even buy dinner out for a couple at a nice restaurant. Even part time Active members or Resident "Candidate" members could afford this level of support. It is important to begin support early in your career, and increase your support as you reap your rewards from EM practice. Participation is key to success.

SAEM is searching for 100 members to contribute \$1000 (actual cost approximately \$600 after tax deductions). Despite our persistent and not unreasonable complaint about our high levels of charity care and inadequate insurance reimbursement, the average full time academician can "afford" to give back to their specialty at this level. This is considered the "Give a Shift" level, and amounts to approximately only a 0.5% income give back. We just need to realize that we can do this, we should do this, and both we and our patients directly benefit from our financial give back support.

As a new EM residency graduate university academician almost three decades ago, I started contributing to ACEP's fledgling Emergency Medicine Foundation (EMF). Despite eventually leaving research, I continued to increase my annual tax deductible

contributions to EMF, in support of my specialty and my patients.

In 1997, I established the ACEP Council EMF Challenge, matching the first \$5 of each Councilor's contribution to EMF. Over the subsequent years, the number of Councilors has grown from 250 to 307 with the growth of ACEP membership. At last October's two day Council meeting, we raised over \$70,000, averaging almost \$250 per Councilor, with almost 15% of the Councilors contributing at or above the \$1000 "Give a Shift" level. This two day accomplishment was possible despite a large portion of the Councilors already having contributed to EMF through their dues statement check off donation throughout the year.

Since the early years of the ACEP Council EMF Challenge, the Councilors now "get it". They understand the importance of EM research for our specialty and our patients, they understand that they can afford this modest give back to our specialty, and they have repeatedly demonstrated their 100% participation support year after year at the ACEP Council meeting. With their leadership, they encourage ACEP membership to support EMF and EM research.

Although I am no longer in academics, I have maintained my SAEM membership. When the SAEM Foundation called for support, I responded; my 2008 "Give a Shift" contribution is in the Foundation bank. The SAEM Research Foundation plays a role specific to SAEM, and it deserves your give back support. If you work part time, or are a resident, please feel free to adjust your donation amount to a comfortable proportionate contribution, but please participate. 100% membership participation is the key to success for our new Research Foundation.

My Challenge to my SAEM colleagues is this: We will meet (and hopefully easily exceed) the SAEM Foundation call for 100 members at \$1000 and 1000 members at \$100 by the end of our Annual Meeting this May, and I will double my "Give a Shift" contribution for 2009. Please demonstrate your understanding and financial support for our Research Foundation, and I will most gladly increase my donation in support of our specialty and our patients.

Thank you for your kind attention and generous consideration.

David E. Wilcox, MD, FACEP 



**David E. Wilcox,
MD, FACEP**

ADVOCACY CORNER

Writing a Letter to the Editor or Congressman by the SAEM National Affairs Committee

Writing a letter to the editor or congressman can be a daunting endeavor, but is an incredibly effective tool for advocacy. Usually when one is motivated to undertake such an activity, it is from emotions such as anger and outrage and frustration over public misinformation. However, writing with this tone is often not productive to the end of achieving change. Below are some tips to crafting a letter that will convey passion and encourage action.

- 1) **Be concise:** After two to three paragraphs readers and editors lose interest. Write sentences with powerful action verbs. Avoid run-on sentences.
- 2) **Be funny:** Irony and well-placed humor open reader's minds to thoughts they might not have otherwise considered.
- 3) **Be personal:** Use your own experience to make the subject real without being too emotional.
- 4) **Be an expert:** Make sure you do your homework on both sides of the argument and include a few references in the body of your letter.
- 5) **Be the solution:** A novel approach to solicit action is to go beyond describing an issue, but to offer one or more potential fixes.

To find your local representative, visit the following web page: http://my.acep.org/site/PageServer?pagename=adv_members Submissions for editorials include: local newspapers, national newspapers, and broadcast news programs.

SEEKING APPLICATIONS

The University of Michigan is currently seeking applications for a research fellowship in the use of mathematics, computation, and engineering in the area of sepsis and critical illness. Our program emphasizes a close linkage between laboratory and clinical observations and contemporary statistical and mathematical methods. An interest in working on potentially computationally-intensive projects is a prerequisite.

Advanced course work will be tailored to previous experience, and preparation for first-time extramural funding for the fellow is a primary objective of the program. The two-year program is funded by a \$150,000 Institutional Research Training Grant from the Society for Academic Emergency Medicine. Applicants should hold either an MD or PhD, but need not have completed emergency medicine clinical residency training to be eligible. Interested parties are encouraged to contact John Younger, Associate Chair for Research, Department of Emergency Medicine, at jyounger@umich.edu.

John G. Younger, MD
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University of Michigan
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(734) 647-7564
www.sitemaker.umich.edu/younger




SAEM Grants Available

Michael P. Spadafora Medical Toxicology Scholarship

Application Deadline: May 1, 2009

Dr. Michael P. Spadafora was an academic emergency physician and medical toxicologist who was a member of SAEM and the American College of Medical Toxicology (ACMT) and was dedicated to resident education. After his death in October 1999, memorial donations were directed to SAEM for the establishment of a scholarship fund to encourage Emergency Medicine residents to pursue Medical Toxicology fellowship training.

One recipient will be chosen each year to attend the North American Congress of Clinical Toxicology (NACCT) conference, which is held in different locations every fall. The award of \$1500 will provide funds for travel, meeting registration, meals, and lodging. Any PGY-1 or 2 (or PGY-3 in a 4 year program) in an RRC-EM or AOA approved residency program is eligible for the award. 

For more information on our many grants, visit www.saem.org and follow the grants link.



ETHICS IN ACTION: Cultural Considerations in End-of-Life Care

John Marshall, MD, Maimonides Medical Center
On Behalf of the SAEM Ethics Committee

The patient was 91 and clearly in shock. He was febrile, tachycardic and hypotensive. He arrived with his daughter, her husband and a third man who didn't identify himself. His two prior strokes and progressive dementia had left him with a PEG, Foley and skin ulcerations. His daughter said that he had not spoken in 4 years, was full code, and she was his legal decision maker.

The patient was from the local Hasidic Jewish community, with strong beliefs on the value of life. Experientially, few patients from this community have a DNR order. They also can hold specific beliefs about what medical treatments are appropriate, particularly regarding the hastening of death.

Immediately after arriving in the ED, the patient decompensated. He became pulseless, CPR was started and he was intubated. The monitor demonstrated PEA. The senior resident called for epinephrine. The patient's daughter asked us to wait. She wanted to know about epinephrine and its side effects. The staff was a bit confused. I explained the role of epinephrine including its adverse effects. She spoke with her husband and the third man in Yiddish; then told me, "The rabbi says the epinephrine is o.k."

We continued the code and repeated this exercise to obtain rabbinical approval for atropine, bicarbonate, pressors and defibrillation during a bout of ventricular fibrillation.

Given his code status it would have been easy to ignore the family. Given his underlying condition, it would have been easy to assert medical futility and ignore his code status. But either option would have been culturally insensitive as well as an insult to patient autonomy. His daughter represented our best approximation of his wishes at that time. To respect his autonomy, we needed to answer her questions so she could ensure that his care was appropriate under rabbinical law.

While it may have slowed his resuscitation, it did not change the likely outcome. He did not survive, but his daughter and rabbi thanked us for our effort.

At the bedside, emergency clinicians are called to carefully balance complex social and cultural considerations with the ethical principles of patient autonomy, beneficence, non-maleficance and justice. While this balance is not always perfect, careful consideration can frequently produce a satisfactory solution to the ethical questions we face every day.

Medical Director, Central Texas Poison Center
Scott & White and Texas A&M College of Medicine

The Department of Emergency Medicine of Scott & White and The Texas A&M University College of Medicine are currently seeking an outstanding physician, dual BC/BE in Emergency Medicine and Medical Toxicology, to serve as Medical Director of the Central Texas Poison Center. The Poison Center is an AAPCC certified center serving the over 2.5 million people of Central TX, and is one of six centers that comprise the Texas Poison Center Network. The Poison Center offers a collaborative practice environment with other Texas clinical toxicologists. In addition the Poison Center supports the Scott & White academic mission of research and education. A minimum of 50% protected time will be dedicated to the Poison Center and clinical toxicology services. As the only Level I Trauma department in Central Texas, the department of emergency medicine evaluates and treats approximately 75,000 patients annually. The department presently consists of 16 full-time faculty physicians, committed to quality care delivery enhanced by resident and student education. This includes a fully accredited Emergency Medicine Residency Program with 26 residents with an expansion to 30 residents over the next two years. A state-of-the-art Emergency Department was opened in 2007. The department will play a critical role in the vision of the institution to grow both its clinical services and academics. Academic appointment and rank is commensurate with experience and qualifications. Research opportunities are available for interested candidates.

Scott & White is the largest multi-specialty academic medical center in Texas. With more than 750 physicians and research scientists caring for patients at Scott & White Memorial Hospital & Clinic in Temple and within the 28 regional clinics networked throughout Central Texas, Scott & White is the only designated Level I Trauma Center between Dallas and San Antonio. Led by physicians with a commitment to patient care, education and research, Scott & White has been listed among the "Top 100 Hospitals" in America for the past five years and serves as the clinical educational site for The Texas A&M Health Science Center College of Medicine. Additionally, the +200,000-member Scott & White Health Plan is the #1 health plan in Texas. For additional information on Scott & White, please visit www.sw.org.

Scott & White offers a competitive salary and comprehensive benefit package, which begins with four weeks vacation, three weeks CME and a generous retirement plan. For additional information, please call or send your CV to: **C. Keith Stone, MD, Professor and Chairman, Department of Emergency Medicine; c/o Jason Culp, Physician Recruiter, Scott & White Clinic, 2401 S. 31st, Temple, TX 76508. (800) 725-3627 jculp@swmail.sw.org** For more information on Scott & White, please visit our web site at: www.sw.org.

*Scott & White is an Equal Opportunity Employer/Tobacco-Free Environment. *2008 Thomson 100 Top Hospitals**




DEPARTMENT OF EMERGENCY MEDICINE
SCOTT & WHITE AND TEXAS A&M COM
CENTRAL TEXAS

Scott & White and Texas A&M University College of Medicine are currently seeking outstanding physicians BC/BE in Emergency Medicine to join its Department of Emergency Medicine in Temple, TX. The state-of-the-art Emergency Department was recently completed as part of a new Center for Advanced Medicine and includes a 44-bed emergency department. As the only Level I Trauma department in Central Texas, the department evaluates and treats 75,000+ patients annually. The department presently consists of 16 full-time faculty physicians, committed to quality care delivery enhanced by resident and student education. This includes a fully accredited Emergency Medicine Residency Program with 31 residents. The department will play a critical role in the vision of the institution to grow both its clinical services and academics. Academic appointment and rank is commensurate with experience and qualifications.

Scott & White is the largest multi-specialty practice in Texas, with more than 700+ physicians and research scientists who care for patients at Scott & White Memorial Hospital in Temple and within the 20+ regional clinic system networked throughout Central Texas. Led by physicians with a commitment to patient care, education and research, Scott & White is listed among the "Top 100 Hospitals" in America and serves as the clinical educational site for The Texas A&M University College of Medicine. Additionally, the +250,000-member Scott & White Health Plan is the #1 health plan in Texas. For more information on Scott & White, please visit our web site at www.sw.org.

Scott & White offers a competitive salary and comprehensive benefit package, which begins with four weeks vacation, three weeks CME and a generous retirement plan.

For additional information, please call or send your CV to:

C. Keith Stone, MD, Professor and Chairman
Department of Emergency Medicine
c/o Jason Culp, Physician Recruiter
Scott & White Clinic
2401 S. 31st St.
Temple, TX 76508
(800) 725-3627
jculp@swmail.sw.org

EOE





ACADEMIC RESIDENT SECTION

On behalf of the SAEM GME Committee, we are pleased to re-introduce the “Academic Resident” section of the SAEM newsletter. Quarterly articles will focus on topics of interest and importance to emergency medicine residents, with topics recurring on a roughly 3-year cycle. It is our hope that you will find these articles to be useful tools in your academic/professional development. We encourage your feedback and suggestions regarding additional content areas that would be of value to residents and recent residency graduates. Feel free to email comments and suggestions to techsupport@saem.org

Jonathan Davis, MD, Georgetown University | **Douglas McGee**, DO, Albert Einstein | **Jacob Ufberg**, MD, Temple University

“How to Create an Effective CV”

David S. Howes, MD,
*Professor of Medicine and Pediatrics, University of Chicago,
Program Director, University of Chicago Emergency Medicine Residency*

Carey D. Chisholm, MD,
*Professor of Emergency Medicine, Indiana University School of Medicine
Director, IU Emergency Medicine Residency Program*

If you are lucky enough to have already landed your dream job, typically the result of being introduced to a program alumnus who is directing a desirable emergency department in the location you wish to locate to, then you may have the luxury of not spending a lot of time and effort on a fancy CV. Then your CV can be briefer, containing the essentials such as educational background, licensure, a brief summary of the highlights of your good work, and references. Don't waste time on elaborate formats or fancy paper as this CV is essentially a formality. The same rule may apply to preparing your CV for work with a multi-hospital contract management group; they mostly desire the information regarding your training period, focusing on the demographics of your residency patient care volume and intensity that will suggest to them that you can manage a busy shop.

However, and particularly for those who wish to pursue an academic, administrative, or leadership track opportunity, for most senior residents, the CV serves as the official summary of their professional accomplishments as well as a personal introduction to prospective employers. Emphasis should be placed on neatness, clarity and organization. Carefully proof for typos and grammar... a well-constructed CV will look fine on a laser printer and save the expense of a professional printer. The paper should be a high quality bond stock; avoid the frills or cutesy approach as it will detract from your message. Use an easily readable font of at least 10 point size; appreciate that your potential employer is often of a certain age where magnifiers or bifocals have come in to play and don't like to be reminded of this when they review your CV!

The following CV organizational scheme is one of many:

- **Personal Information:** Name, birth date, marital status, children (names and ages), birthplace, spouse (and occupation), email address, home and professional address, and home and work phone numbers. Much of this information is not required by law, however both authors agree that you create a better composite for the employer if you provide this information. *Do not give your social security number.*
- **Education:** Start with residency and work backwards (or vice versa). List dates of attendance and location. It may sound odd, but make sure that you get the correct title of your residency program; ask your program director if you are not sure.
- **Licensure:** List the state(s), whether permanent or temporary, and inclusive dates, *but do not list the license number on your CV.*
- **Certifications:** As you probably will not be board certified in a specialty, you won't have much to list here. However, you are likely a diplomat of the National Board of Medical Examiners (passed all 3 parts of USMLE). You also may choose to list “merit badges” here (ACLS, ATLS, APLS, etc.). Many program directors are not happy with the need to list these on a CV as other than “CME,” but many prospective employers want to see this information, so placate them.

("How to Create an Effective CV" Continued)

- **Professional Activities:** This includes memberships in medical organizations and anything that you did which gives an appreciation of your level of involvement in hospital, residency, regional and national medical organizations. Examples include membership on residency, hospital or society committees, interviewing for the residency, teaching in the medical school, etc. Many also list volunteer work for the medical school or the community in this part of their CV. Be careful not to inflate your entries as the employer often genuinely wants to know your level of commitment. It is embarrassing to have a lofty sounding community service project turn out to be a four hour social escapade at a charity golf outing on someone else's dime.

Some also list grand rounds and other presentations given in this section though this information may be better presented in a separate section entitled "**Lectures and Presentations**". Be sure to list the sponsoring organization for each of your didactic or scholarly contributions.

- **(Research and) Publications:** Give a brief, straightforward compilation of what you've done and the resultant publications. The alternative is to simply list your publications- the employer will ask you about the research and your level of participation if that is important to the particular opportunity you are exploring. Abstract presentations should be listed here (insure that these are listed as abstracts, e.g. typical citation followed by "(abstract)". Grants may also be included in this section.
- **Professional Work Experience:** List title as "staff physician", who you worked for, dates of work, and size of the ED (# visits). If your program has you perform clinical work that may have added market value, e.g. "flight physician, University Hospital Aeromedical Network" go ahead and add this information. Add work experience prior to residency if it may add to your "expertise" or marketability or overall life experiences.
- **Awards and Honors:** List all honors and awards, including scholarships (college and medical school). Don't forget to list minor awards. e.g. "Best resident teacher of the month" and similar accolades that may not seem as important; these are value-added aspects of a CV that demonstrate that your presence is truly appreciated.
- **Extracurricular Activities:** These could add to the possibility that a human interest bond is generated....but may work against you as well. For

instance, if you enjoy rebuilding old cars, and your prospective employer does this hobby, you instantly attract extra attention. Conversely, an employer may look down on an activity such as hunting and listing this could diminish the enthusiasm for hiring you (but could generate a fine bond if the person is an avid hunter). Being a member of Physicians for Social Responsibility may not sit well with a group comprised of card-carrying NRA members. If you are tightly attached to a geographic area, be very careful as to what you list in this section as you don't want to limit job opportunities. In the other hand, if you aren't ready to grovel for geography, we recommend letting them know what you are about...if you are not going to fit in with a group, you would rather know that up front.

(Rule to follow: Any item in your CV is fair game for discussion at your interview, therefore, don't list a project, activity or hobby that you are not prepared to intelligently discuss in detail- when you get the interviewer who is quite knowledgeable/passionate about a particular subject/activity, the conversation goes flat pretty fast if it is apparent that you know little or are a beginner novice.)

- **Professional References:** List a minimum of 3 (names, title, address, e-mail address, phone number and dates of involvement). Obviously ask the person ahead of time to confirm they would serve as one (don't take this for granted). All potential employers will expect that one of your referees is your Program Director (PD), thus they should be listed as one of your references (and as your "current employer"). *If you feel that your PD may not give you a strong letter of support, think twice about attempting to avoid listing him/her, as it doesn't work--- your confirmation of residency and credentialing forms for procedures for work at all hospitals will be directed to your PD whether you like it or not. If you have concerns, better to discuss with your PD in a proactive manner what you can do to improve his/her view of you so that you can obtain the best possible job.*

A résumé differs from a CV:

A resume supplies, in a selective manner, more detail about activities. For instance, you may list "Chair, XX committee" on your CV, but a reader most likely will not have any idea what that means. In a résumé you provide a description of the scope of the activity and what you actually did/accomplished in this role.

(Continued on Page 13)



Academic Announcements

The Department of Emergency Medicine at Northwestern University, Feinberg School of Medicine was awarded a \$1 million grant titled "Advancing Emergency Care Delivery" to support quality, safety, and research initiatives. The aims are focus on novel applications of information technology, development of highly reliable systems, and creation of innovative methods for rapid uptake of evidence-based therapies. A private foundation made the award to **JAMES G. ADAMS, MD AND PETER S. PANG, MD** who are co-principle investigators.

DOUGLAS ANDER, MD, Associate Professor, has just been named Assistant Dean, Emory University School of Medicine. This recognizes Dr. Ander's role in the creation and leadership of the Emory Center for Experiential Learning, a 5000 square foot state of the art simulation facility.

ROBERT A. BARISH, MD, MBA, currently serving as Vice Dean for Clinical Affairs and Professor of Emergency Medicine at the University of Maryland School of Medicine in Baltimore has been appointed as the new Chancellor of the LSU Health Sciences Center at Shreveport. Dr. Barish, was Chief of Emergency Medicine at the University of Maryland from 1985 to 1996 and was instrumental in the development of their Department and Residency Training Program. He will assume the chancellorship at LSUHSC-Shreveport this spring.

JANE BRICE, MD, Associate Professor of Emergency Medicine at the University of North Carolina (UNC) has been named Deputy Editor of Prehospital Emergency Care.

CHARLES CAIRNS, MD, Professor and Chair of Emergency Medicine at the University of North Carolina (UNC), has been named the Associate Director of the NIH US Critical Illness and Injury Trials Group (USCIITG). The USCIITG is funded by a grant from the NIH/NIGMS and created to establish national priorities for critical illness and injury research; promote clinical research and foster effective partnerships between federal agencies, academia, community practitioners, and industry.

CHRISTOPHER FEE, MD, Assistant Clinical Professor of Emergency Medicine at the University of California, was awarded a grant for his proposal: "A pre- and post-intervention analysis of prospective pharmacist review of emergency department medication orders to prevent adverse drug events". Dr. Fee hopes to determine whether there is evidence that pharmacist approval of ED medication orders prior to administration, as proposed by The Joint Commission and Centers for Medicare and Medicaid Services, will prevent medication errors and adverse drug events.

SETH GLICKMAN, MBA, Assistant Professor of Emergency Medicine at the University of North Carolina (UNC), has been awarded \$750,000 grant for his project "Regionalization of ST-elevation Myocardial Infarction Care" under the American Heart Association PRT Outcomes Research Center Grant at the DCRI.

ROBIN HEMPHILL, MD, Associate Professor, has been recruited to Emory to serve as the inaugural Director of Patient Safety and Quality for the Emory Department of Emergency Medicine.

CHERRI HOBGOOD, MD, has been named Associate Chair for Education in the Department of Emergency Medicine at the University of North Carolina (UNC).

RENEE HSIA, MD, Assistant Clinical Professor of Emergency Medicine at UCSF-SFGH has been awarded the Hellman Family Award for Early-Career Faculty (\$44,501) for her project titled "Factors associated with closure of emergency services & impact on patient outcomes.

ANNE-MAREE KELLY MD, FACEM, Joseph Epstein Centre for Emergency Medicine Research and The University of Melbourne, Australia, was awarded the Morson Taylor Research Award by the Australasian College for Emergency Medicine.

JAMES LEAMING, MD, Associate Professor and Vice Chair for Research at Penn State Hershey, received a \$97,000 grant from HRSA in order to study Critical Incident Stress Response for Hospital & Pre-hospital Personnel.

ROGER LEWIS, MD, PHD has been appointed Vice Chair for Academic Affairs for the Department of Emergency Medicine at Harbor-UCLA Medical Center.

MICHELLE LIN, MD, Associate Clinical Professor of Emergency Medicine at UCSF-SFGH has been awarded an Educational Grant from the Office of Medical Education in the School of Medicine at UCSF for her study on "The Effect of Overcrowding on Education in the ED."

DAVID J. LINDSTROM, MA, CIPP/G, Professor of Practice, Department of Emergency Medicine at Penn State Hershey, has been selected as the Project Director and Principal Investigator for a 2 year, \$3.2M Department of Homeland Security funded project to improve the evacuation preparedness for dependent care facilities surrounding Pennsylvania's 5 nuclear power plants.

JAMES MANNING, MD and **LAURENCE KATZ, MD**, faculty in the Department of Emergency Medicine at the University of North Carolina (UNC), have received a \$475,000 grant from the Naval Medical Research Center to assess "HBOC-201 with nitroglycerin for the treatment of hemorrhagic shock." The goal of Drs. Manning and Katz's study is to develop resuscitation strategies for hemoglobin based oxygen carriers.

SAMUEL MCLEAN, MD, Assistant Professor of Emergency Medicine at the University of North Carolina (UNC), has received a \$2.6 million grant award from NIH/NIAMS to support his study "Genetic predictors of acute and chronic musculoskeletal pain after minor MVC." The goal of Dr. McLean's study is to use genetic assessments to gain new insights into these disorders.

ROLAND C. MERCHANT, MD, MPH, SCD, Assistant Professor of Emergency Medicine at the Alpert Medical School of Brown University, has been awarded a 1-year, \$40,000 grant from the Tufts/Lifespan/Brown Center for AIDS Research. Dr. Merchant's project, Confluence of HIV Risk Behaviors and Drug Misuse Among RIH Emergency Department Patients, will develop a model of Screening, Brief Intervention, and Referral for Treatment (SBIRT) to reduce HIV risk-taking behaviors to avert an HIV infection among ED patients who misuse drugs.

MIKE PETERSON, MD has been appointed Vice Chair for Clinical Affairs for the Department of Emergency Medicine at Harbor-UCLA Medical Center.



Academic Announcements

TAMMIE QUEST, MD, Associate Professor Emory Department of Emergency Medicine, is the recipient of a \$3 million dollar Veterans' Affairs grant to develop and lead an inpatient palliative care unit at the Atlanta VA Medical Center.

PRASHA RAMANJUAM, MD, Assistant Clinical Professor of Emergency Medicine has received a 5-year K08 grant from AHRQ. The grant will support her study of the recognition of stroke by EMS dispatchers, and the impact of the regionalization of stroke centers.

MEGAN RANNEY, MD, Teaching Fellow in Emergency Medicine at the Alpert Medical School of Brown University, has been awarded a one-year, \$2,500 grant from the American Public Health Association. Her project, Educational Strategies to Increase Young Motorcyclists' Helmet Use, will utilize a 3-step educational program with the aim of increasing young motorcyclists' awareness of the benefits of helmet use and their actual use of helmets.

JEFFREY TABAS, MD, Associate Clinical Professor of Emergency Medicine at UCSF-SFGH has been awarded the SAEM Emergency Medicine Interest Group Grant to support his Educational Program in teaching EM procedures in a cadaver lab for students. This is the 5th year in a row he has received this award.

JEFFREY TABAS, MD, Associate Clinical Professor of Emergency Medicine at UCSF-SFGH has been appointed as the Section Editor for CME for the journal Archives of Internal Medicine.

THOMAS TERNDROP, MD, Professor of Emergency Medicine at Penn State Hershey, received a \$2.5M grant from the Department of Health and Human Services, Office of Preparedness and Emergency Operations, Division of National Healthcare Preparedness Programs (#HFPEP070002-01-01) to improve surge capacity and enhance community and hospital preparedness for public health emergencies. As a result a 17 hospital member coalition and hospital based partnership was formed in the 8 county south central Pennsylvania region (see <http://hcfp-scpa.org>).

STEPHEN H. THOMAS, MD, MPH, has been named Chairman of the Department of Emergency Medicine at the Oklahoma University School of Community Medicine. Dr. Thomas joined the OU School of Community Medicine in January, 2009. He graduated from Louisiana State University's Accelerated Medical Degree program in 1990 and completed an Emergency Medicine residency and served as Air Medical Fellow and Flight Physician at East Carolina University. He holds a master's degree in public health from the Harvard School of Public Health.

ELLEN WEBER, MD, Professor of Clinical Emergency Medicine at the University of California San Francisco and Suzanne Mason, MD, Reader in Emergency Medicine and Honorary Consultant in Emergency Medicine, University of Sheffield (England) have received a grant from BUPA Foundation. The grant will support their research into the implications of the four-hour target for emergency departments in the UK.



("How to Create an Effective CV" Continued)

On the initial approach a CV is sufficient but a follow up contact may be enhanced by the addition of a "resume." In essence, this provides elaboration and explanation of the highlights raised in your CV. For instance, if you are serving as a committee chair or an EMS system associate medical director, use the resume to explain what exactly that position entails. This should include time commitments and accomplishments.


Your CV should be accompanied by a concise cover letter:

A cover letter briefly summarizes who you are and explains why you are interested in that specific opportunity. Describe your current work environment. An example: "I have had extensive clinical experience in two ACS Level I Trauma centers with over 200,000 combined visits per year during my residency training. 20% of ED patients are admitted and 30% of admissions are to an ICU." Your program director will help you with the numbers, though this information is often found on your residency website. Keep in mind that the cover letter is your introduction to a prospective employer and outlines why they want to hire you!

A word about Professional Recruiters:

Do not offer your CV and it is simply wise in most circumstances to "just say NO". Casual conversations can be lead to unintended consequences; it has been reported that unethical recruiters have constructed a CV based on a brief phone conversation that was then circulated without the resident's knowledge. In this circumstance, if you were to subsequently (and independently) find a job at a hospital to which your CV was circulated, your group may be obligated to pay the recruiter a "finder's fee" (up to \$50,000). That money might have been offered (or may have been negotiated by you) as a moving and signing bonus.

In Summary:

The CV, resume, and cover letter are three distinctly different vehicles for letting prospective employers know just how great you are - and what a great fit you will be in their setting. Set aside at least 10-12 hours to do it right and then have your program director or another senior faculty member look it over for content, clarity and readability. With a little luck, they will offer editing that will clarify titles, activities, presentations and other scholarly activity that you have listed in a manner that gives the final product a seasoned, professional look and read... good luck! 



Start Planning Your Trip to the Annual Meeting

It's not too early to start thinking about the 2009 Annual Meeting in New Orleans, May 14 - 17. The Program Committee has been busy putting together an amazing meeting for you and we hope that you are planning to attend.

The SAEM Annual Meeting is the largest forum for the presentation of original research in emergency medicine. Over 2,000 emergency physicians are expected to attend. The Annual Meeting will include original research presentations (both oral and poster), Innovations in Emergency Medicine Education (IEME) Exhibits, and 33 didactic sessions.

The meeting will be held at the New Orleans Sheraton Hotel. The Sheraton Hotel places guests on historic Canal Street, bordering the French Quarter, just steps away from the Mississippi River, Harrah's Casino, and Aquarium of the Americas. At the Sheraton Hotel you will experience gracious Southern hospitality in a style uniquely New Orleans.

The 2009 Annual Meeting has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for continuing Medical Education (ACCME) through the joint sponsorship of SAEM and University of California – Irvine. The University of California – Irvine is accredited by the ACCME to provide continuing medical education for physicians.



New Orleans is Jazzed to Welcome SAEM

There has never been a better time to visit New Orleans, for business or pleasure. The French Quarter is cleaner than ever before, we have a fresher hotel product, more restaurants, millions of dollars in improvements to the Convention Center and Superdome, and better hospitality, blended with the same culturally authentic, sensory experience visitors have loved for decades. In 2007, New Orleans welcomed 7.1 million visitors, nearly double the amount of visitors in 2006. New Orleans has exceeded those numbers in 2008 and is looking forward to an even more successful 2009.

New Orleans is many things ...The Crescent City ...a sportsman's paradise ... the birthplace of Jazz. It is a city teeming with music bubbling up from the streets, immersed in art and architecture, lavished in celebration and beauty. New Orleans is forever a feast for the soul. Come and see for yourself.



*Hyatt Regency Lost Pines Resort and Spa
in Lost Pines, Texas*

April 22 - 24, 2009

Join Us...

**2009 AACEM Annual Conference
with the AAAEM**

The AACEM First Annual Conference is a vastly anticipated event that brings together some of our most highly acclaimed industry leaders. This year participants will be able to enjoy a rare opportunity to hear keynote speaker Gunnar Öhlén, MD, PhD, President EuSEM, along with obtaining the latest educational news to influence the decisions made within all Emergency Medicine Departments.

For a complete schedule of events and to register visit www.saem.org.

For additional questions please contact Maryanne Greketis, CMP at mgreketis@saem.org.





Medical Student Symposium - 2009 May 16

SAEM Annual Meeting in New Orleans

The Medical Student Symposium is intended to help medical students understand the residency and career options that exist in Emergency Medicine, evaluate residency opportunities, and select the right residency. At the completion of the session, participants will: 1) know the characteristics of good emergency physicians and the “right” reasons to seek a career in this specialty, 2) have a better understanding of the application process, 3) Consider factors important in determining the appropriate residency, including geographic locations, patient demographics, length of training, etc. 4) understand the composition of an emergency medicine rotation and what to expect while they are rotating in the ED, 5) discuss the skills needed to get the most out of your educational experience in the ED rotation, 6) identify the standard sources of information in the field of emergency medicine 7) have an appreciation of various career paths available in Emergency Medicine, including academics, private practice, and fellowship training, and 8) discover current areas of research in Emergency Medicine.

8:00-8:10 am

Introduction

Terry Kowalenko, MD University of Michigan

8:10-8:50 am

Is Emergency Medicine the Right Specialty for Me?

Joshua Wallenstein, MD Emory University

The speaker will discuss the attributes and personality traits of a successful Emergency Physician. What should students expect in residency and beyond? What are the positive and negatives of the specialty? Students will have a better idea if Emergency Medicine is the right specialty for them.

8:50-9:30 am

Getting the Most Out of Your Clerkship

Gus Garmel, MD Stanford University/Kaiser Permanente

This session will provide students with valuable tips for getting the most from your Emergency Department Clerkship. Specific topics to be discussed will include: 1) appropriate educational goals for an emergency medicine rotation; 2) how to best prepare for your rotation in order to make the most of your ED experience; 3) recommended textbooks and references; and 4) important considerations when and where to do your emergency medicine rotate.

9:30-10:00 am

How to Select the Right Residency for You

Annie Sadosty, MD Mayo Clinic

An overview of EM residency programs will be discussed. Important factors to consider in the selection process including length of training (3 vs. 4 years), geographic location, patient demographics, urban vs. suburban, allopathic vs. osteopathic and academic vs. clinical will be reviewed. How does a candidate gauge the reputation of a program?

10:00-10:15 am

Break

10:15- 10:45 am

The Medical Student Performance Evaluation (MSPE)

“The Dean Letter” David Seaberg, MD University of Tennessee

The speaker, an Emergency Medicine physician and Dean, will review the components of the MSPE. Medical school deans adapt the MSPE template to prepare your Dean’s letter. What is MSPE? What is the role of the MSPE in the residency process? How can you take a proactive role in your MSPE?

10:45-11:15 am

Navigating the Residency Application Process

Micelle Haydel, MD Louisiana State University

This presentation will provide students with tips on how to prepare their ERAS application. How many letters of recommendation and from whom? What volunteer and work experience should appear on the application? Tips for the Personal Statement and more. The candidate will have a much better idea of what a well written application should look like.



11:15-11:45 am

The Interview

Jamie Collings, MD Northwestern University

The speaker will explain the importance of the interview. How should a student prepare; what should he/she wear; what are appropriate questions to ask programs, etc? What are some questions the candidate should be prepared to answer? What should the candidate do after the interview? How do you follow up with your top programs? Students should have a better idea of how to prepare and what to expect at an interview.

11:45 am-1:15 pm

Lunch with Program Directors

1:15-1:45 pm

Career Paths and Prospects in Emergency Medicine

H. Gene Hern Jr, MD Highland Hospital

This session will expose students to a variety of career paths including private practice, academics, and dual training (EM-IM/EM-PEDS/FP) as well as fellowship training. The speaker will touch upon elective/career opportunities such as research, EMS, Wilderness Medicine, Rural EM, International Medicine, among others.

1:45-2:15 pm

Assessing Your Competitiveness as an Emergency Medicine Applicant and the Competitiveness of Programs

Chris Ghaemmaghami, MD University of Virginia

This session will help applicants better understand what PD's are looking for so that they can assess their own competitiveness when applying for EM residency programs. How important are USMLE scores? Do I need to be AOA or have "Honors" on my EM rotations? These and other potential predictors of success as a resident will be discussed. The speaker will also give some insight into how applicants can find out how competitive they are for individual programs. What should you be asking?

2:15-2:30 pm

Break

2:30-3:30 pm

Small Group Break-Out Sessions

- **Balancing Act** - Charlene Babcock Irvin, MD St. Johns Hospital
This session will discuss how to optimize your career and personal life.
- **Financial Planning** - Dave Overton, MD Michigan State University - Kalamazoo
This session will review practical tips on financial issues for students and residents. The speaker will address issues such as insurance coverage, loans, college expense planning, goal-setting and retirement.
- **Optimizing your 4th Year** - Douglas Ander, MD Emory University
This session will provide students with recommendations for making the most of their senior year including information about EM and other electives, research experience, and when to take their Board exams.
- **Medical Schools without Residencies** - Patricia Lanter, MD Dartmouth University
This Q&A session will help guide medical students from medical schools without EM residencies through the complicated maze that leads to a residency and career in EM. It will specifically address how this process differs from those students with an EM residency at their medical school.
- **Osteopathic Students and Programs** - Greg Garra, DO Stony Brook University
This session will be geared toward the Osteopathic medical student. The speaker will discuss the differences between Osteopathic and allopathic programs. There will be plenty of time for questions.

3:30-4:00 pm

Resident Panel

This will be a Q & A session for students to ask residents from different programs and levels questions regarding residency and the application process.

4:00-4:15 pm

Closing Comments

Terry Kowalenko, MD University of Michigan

4:30-6:30 pm

Residency Fair

Rev 20 Feb 2009.
Schedule subject to changes.
See latest revision online at www.saem.org.



Honoraria Assignment: A Painless Way to Contribute to the Research Fund

As part of the 100/1000 Campaign, SAEM is asking 100 of its members to contribute \$1000 each to the SAEM Research Fund over the next year and a half. We are well on our way toward that goal, but have a long way to go. A \$1000 contribution to anything sounds daunting, especially when gas is expensive and taxes are going up, but one method by which many of SAEM members can contribute to the Research Fund may make the donation less painful. Many SAEM members receive honoraria for speaking, consulting, etc. Often these checks are greater than the \$1000 level. Wouldn't it be easy to just sign one of those checks over to the Research Fund? If it never hits the checkbook, you may not feel it as much. It's similar to the pre-tax contributions to a 401K or pension fund, for instance, in that you never have to write the check.

The problem with assignment of honoraria to the Research Foundation, however, is that it must be done right in order to avoid tax penalties. Rather than take an honorarium as income, and be taxed on it, simply assign the honorarium to the SAEM Research Fund. When filling out the appropriate paperwork

for honoraria reimbursement, simply put that the check should be made out to the "SAEM Research Fund," and give the honorarium payer the SAEM Tax ID number: 20-4866532. Have the check sent to you, but made out to the SAEM Research Fund. You can then send the check to SAEM, with a cover letter that explains the nature of the contribution. That way you can get "credit" for the contribution from SAEM. This method is simple, painless, and most importantly, an investment in the future of academic emergency medicine. Thank you for your contributions.

If you have further questions regarding contributions to the Research Foundation please contact Holly Gouin at hgouin@saem.org or 517-485-5484 ext. 210 at SAEM headquarters.

Contributions can be mailed to:
SAEM Research Foundation
901 N. Washington Ave.
Lansing, MI 48906

Olive View – UCLA Medical Center Sylmar, California

Olive View-UCLA Medical Center is offering a full-time faculty position with UCLA appointment. We are a Los Angeles County facility, a primary UCLA teaching hospital, and an equal partner in the UCLA EM residency.

Applicants should be BC/BP in EM with demonstrated academic interests. We are especially seeking ultrasound and/or simulation expertise. We have a well-funded research program with statistical support and research assistant staff.

Join a progressive department with protected time for career development, a friendly environment, a highly competitive salary/benefit package, a modern facility, and a desirable southern California location.

Send CV to: David Talan MD, Chairman, Dept. of Emergency Medicine, Olive View-UCLA Medical Center, 14445 Olive View Drive, North Annex, Sylmar, CA 91342; 818/364-3107; dtalan@ucla.edu.



Beth Israel Deaconess
Medical Center



The Department of Emergency Medicine
At Beth Israel Deaconess Medical Center
Is seeking qualified physicians to join its faculty

Candidate Requirements

Board certified in emergency medicine with a minimum of four years of postgraduate experience and serious interest in academics

Beth Israel Deaconess Medical Center – Emergency Department

- Level I trauma center with 55,000 patient visits annually
- A major teaching hospital of Harvard Medical School
- Academic appointment at Harvard Medical School
- Outstanding academic research in both basic science and clinical areas of interest including public health and the ED, EM education, sepsis, ultrasound, neurological emergencies.
- Nationally recognized residency program and fellowships in international EM and disaster medicine.
- International emergency medicine outreach initiatives
- Strong EMS program directing three 911 services
- Competitive salary incentive based, generous benefits, funded CME

Send curriculum vitae to:

Richard E. Wolfe, M.D., Chief of Emergency Medicine
c/o mblicker@bidmc.harvard.edu

For more information go to www.bidmc.org/emergency



Chief Residents Forum Schedule - Friday, May 15, 2009

SAEM Annual Meeting in New Orleans

7:30-8:00 am	Continental Breakfast
8:00-8:10 am	Welcome Jeff Druck, MD, University of Colorado
8:10-9:00 am	Leadership Management Role Carey Chisholm, MD, Indiana University <i>This session will discuss how leadership traits and management skills can be learned, developed, and used to maximize your effectiveness as chief resident.</i>
9:00-10:00 am	Communication as a Key to Leadership Success Jim Adams, MD, Northwestern University <i>Communication is a key element of success in any leadership role. Participants will be provided with concrete examples of a "communication skill set" that will enable them to improve in their role as intermediary between faculty and residents.</i>
10:00-10:15 am	Break
10:15-11:00 am	Work Life Balance Sheryl Heron, MD, Emory University <i>The participant will be able to discuss how other elements of life affect work function and ways to weigh competing interests.</i>
11:00 am-12:00 pm	How to Enter Academic Emergency Medicine Gail D'Onofrio, MD, Yale University
12:00-1:15 pm	Lunch with Program Directors
1:15-2:45 pm	Solving Problems as Chief - An Interactive Workshop Diane Birnbaumer, MD, UCLA Harborview Susan Promes, MD, UCSF Mary Jo Wagner, MD, Synergy Medical Education Alliance
2:45-3:00 pm	Break
3:00-4:00 pm	Problem Resolution from Former Chief Residents <i>Panel Discussion of former Chief residents</i>
4:00-5:00 pm	Networking Time

Rev 20 Feb 2009.
Schedule subject to changes.
See latest revision online at www.saem.org.

Advertising Space Available in Annual Meeting Brochure

SAEM is again offering an opportunity to advertise in the on-site program. The Annual Meeting will be held May 14 - May 17 in New Orleans, LA and will attract over 2,000 academic emergency physicians.

A limited amount of space is being set aside for the position available section and only academic positions available will be accepted. The deadline for receipt of ads at the SAEM office is March 17, 2009.

The following ad requirements and prices are available for the on-site program:

Classified line ads (100 words maximum):

\$120 (contact SAEM member)
or \$145 (non-SAEM member)

Quarter page ads: 3½" wide x 4¾" deep \$350

Half page ads:

7½" wide x 4¾" deep or
3½" wide x 9¾" deep \$600

Full page ads: 7½" wide x 9¾" deep \$800

A typesetting fee (\$25-\$50) will be charged if the quarter, half, or full page ads are not camera-ready.





UNIVERSITY OF
WISCONSIN-MADISON
SCHOOL OF MEDICINE
AND PUBLIC HEALTH

Academic Emergency Physician

Exceptional opportunity for highly motivated, Emergency Medicine (EM) residency trained, board certified/prepared Emergency Physician to join the **Division of Emergency Medicine at the University of Wisconsin School of Medicine and Public Health in Madison, Wisconsin**. We are seeking applicants for faculty positions at all academic levels. Special consideration will be given to those with prior experience in an academic medical center and/or EM residency program. A commitment to excellence in clinical care, resident teaching, and academic productivity is necessary.

EM faculty provide clinical services in the Emergency Department (ED) of the University of Wisconsin Hospital & Clinics (UWHC). UWHC is a busy, university-based, tertiary care, referral hospital. Our ED is only one of two academic EDs in the state, and is a Level I Trauma and Burn center for both adult and pediatric patients. EM faculty supervise EM and off-service residents, as well as medical students. The successful candidate will join a

faculty of over 20 emergency physicians and pediatric emergency physicians.

Madison is the capital of Wisconsin and a vibrant city boasting many recreational resources, cultural, and athletic events. Madison consistently ranks as a top community in which to live, work, play, and raise a family.

This position is available immediately. Compensation and benefits are extremely competitive. To inquire, send your curriculum vitae and cover letter, E-mail preferred, to:

agh@medicine.wisc.edu

Joseph R. Cline MD FACEP

F2/211 Clinical Science Center, MC 3280

600 Highland Avenue, Madison, WI 53792-3280

The UW Madison is an EEO/AA Employer. Minorities and women are encouraged to apply. Wisconsin caregiver and open records laws apply. A background check will be conducted prior to employment.



Faculty Department of Emergency Medicine

The Department of Emergency Medicine of the Henry Ford Health System is seeking board certified/ prepared emergency physicians to join the faculty of our Emergency Medicine Residency Program. The successful candidate will join our staff of 30 full-time faculty involved in teaching and research. The Emergency Medicine residency program is in its 32nd year and has a total of 53 residents in three tracks including EM, EM/IM, and EM/IM/Critical Care. We have an active research division with NIH funding that focuses on sepsis, the emerging role of biomarkers, neurologic emergencies including stroke, hemorrhage, seizure, and brain injuries. This ED is the birthplace of early goal directed therapy.

The Henry Ford Hospital Emergency Department is an urban, level 1 trauma center with over 90,000 patient visits per year. Our facility has 80 rooms including a 16 bed emergency critical care unit. The Henry Ford Health System is known for its comprehensive, system-wide, electronic medical record (EMR). The Emergency Department is paperless and is fully integrated into the system's EMR.

Henry Ford Health System is an integrated health system that includes 25 medical centers and six hospitals. It is the largest health system in Southeast Michigan (population approaching 5 million). The Henry Ford Hospital is a 750 bed facility serving as the flagship of the system.

Qualified candidates must have a strong interest in furthering the academic mission of the department through research and education. We offer a highly competitive salary and excellent benefits. Please forward your CV for consideration to Scott Johnson, Physician Recruiter. Email: sjohns10@hfhs.org or fax to (313)874-4677.

AA/EEO



◆ Clinician-Educator ◆ Clinical Researcher ◆
 ◆ Clinical Toxicologist ◆

The Department of Emergency Medicine at the Brody School of Medicine at East Carolina University is expanding its faculty. We are seeking BC/BP emergency physicians for tenure or clinical track positions at the rank of assistant professor or above, depending on qualifications. Our current faculty possesses diverse interests and expertise leading to extensive state and national-level involvement. Through this expansion we hope to increase our depth and further develop programs in clinical toxicology and clinical research, and our cadre of clinician-educators. The emergency medicine residency is well-established and includes 12 EM and 2 EM/IM residents per year. We treat more than 83,000 patients per year in a state-of-the-art ED at Pitt County Memorial Hospital. PCMH is a rapidly growing level I trauma, cardiac and regional stroke center. Our tertiary care catchment area includes more than 1.5 million people in eastern North Carolina, many of whom arrive via our integrated mobile critical care and air medical service. Greenville, NC is a livable, family-oriented university community located ninety minutes from the Crystal Coast. Cultural and recreational opportunities are abundant. Compensation is competitive and commensurate with qualifications; excellent fringe benefits are provided. Successful applicants will possess outstanding clinical and teaching skills and qualify for appropriate privileges from ECU Physicians and PCMH. Screening begins July 1 and will remain open until filled.

Confidential inquiry may be made to Theodore Delbridge, MD, MPH, Chair, Department of Emergency Medicine (delbridge@ecu.edu). Must apply online by using ECU OneStop on the main ECU page: www.ecu.edu.

ECU is an EEO/AA employer and accommodates individuals with disabilities. Applicants must comply with the Immigration Reform and Control Act. Proper documentation of identity and employability required at the time of employment. Current references must be provided upon request.

www.ecu.edu/med www.uhseast.com



Imagine being part
 of a team that
 makes a discovery.

Emergency Department Faculty Position

UMDNJ-Robert Wood Johnson Medical School is searching for faculty physicians for its Department of Emergency Medicine on the New Brunswick campus. Candidates should be residency trained board certified/eligible in Emergency Medicine (ABEM, ABOEM).

The department is actively pursuing a residency program in Emergency Medicine, and has an established EMS/Disaster Medicine Fellowship. Responsibilities include research, education and patient care at Robert Wood Johnson University Hospital.

Robert Wood Johnson University Hospital serves as the medical school's primary teaching affiliate. Robert Wood Johnson is a 580 bed Level One trauma center with an annual ED census of greater than 60,000 adult visits. A separate pediatric Emergency Department sees approximately 13,000 patients per year.

Qualified candidates should send a letter of intent and curriculum vitae to: **Robert Eisenstein, MD Vice Chairman, Department of Emergency Medicine, Robert Wood Johnson Medical School, 1 Robert Wood Johnson Place, MEB 104, New Brunswick, New Jersey, 08903. Email eisenstm@umdnj.edu Call 732-235-8717, or FAX 732-235-7379.** Academic appointment is commensurate with experience. UMDNJ is an Affirmative Action/Equal Opportunity Employer.





**ROBERT WOOD JOHNSON
 MEDICAL SCHOOL**
University of Medicine & Dentistry of New Jersey

Department Head

Regions Hospital in St. Paul, Minnesota, is a nationally recognized Level I trauma/Level I burn center with an annual ED volume of 67,000 and an accredited EM residency. Regions is part of the HealthPartners care system, which includes a multi-specialty medical group, primary and specialty clinics, and health plan.

This highly visible leader provides physician direction to the ED in physician recruitment, program development, quality improvement, budget oversight and academic activities, and in the development and delivery of comprehensive EM services in the Twin Cities and neighboring western Wisconsin communities. The Department Head serves as a member of the core faculty for the Department of EM at the University of Minnesota Medical School.

Qualified candidates must be EM residency trained and ABEM certified. Requires a strong communicator with proven leadership and management skills, a commitment to teaching and research, and eligibility for academic appointment to the U of MN faculty. Current Level I trauma facility work experience preferred. Email CV and cover letter to sandy.j.lachman@healthpartners.com or call (952) 883-5338 or (800) 472-4695 x2 for details. EO Employer

www.healthpartners.com www.regionshospital.com

UC DAVIS

The UC Davis School of Medicine, Department of Emergency Medicine is conducting a faculty search for an EM physician in either a clinician/ educator or clinician/researcher track. Candidates must be residency trained in EM with board certification/preparation and be eligible for licensure in CA. Fellowship training and at least one year of post-training clinical experience are desired. Candidates will to enter at the Assistant/ Associate or Professor level, commensurate with experience and credentials.

The UC Davis Medical Center, one of the "Top 50 Hospitals," is a 576 bed academic medical center with approximately 55,000 emergency department visits annually. Our program provides comprehensive emergency services to a large local urban and referral population as a level 1 trauma center, paramedic base station and training center. The department also serves as the primary teaching site for a fully accredited EM residency program. Our residency training program in EM began more than a decade ago and currently has 36 residents. Next year we move to a new, state-of-the-art Emergency Department.

Competitive salary and benefits are commensurate with training and experience. Sacramento is located in close proximity to Lake Tahoe, San Francisco, and the Napa and Sonoma "wine country." Sports enthusiasts will find our climate and opportunities ideal.

Interested candidates should submit a letter outlining interests and experience, and curriculum vitae to Deborah Diercks, MD, Search Committee Chair; UC Davis Dept. of Emergency Medicine; 2315 Stockton Blvd., Sacramento, CA 95817. Applications must be received by 1/31/09 to be fully considered. The University of California is an affirmative action/equal opportunity employer.



MOUNT SINAI
SCHOOL OF
MEDICINE

www.mssm.edu

FACULTY POSITION

Emergency Medicine

The Mount Sinai Medical Center is an 1100 bed tertiary academic center with state-of-the-art ED seeing 95,000 adults and children annually. The successful candidate will be residency trained in EM, highly motivated and innovative; fellowship training preferred. Academic rank will be commensurate with experience. The four year residency program has 48 residents with fellowships in Research, Pediatrics, Informatics, Ultrasound and Global Health. Our active research division has NIH R01 funding and is fully integrated into medical school curriculum and hospital leadership. We offer a strong faculty development program and support staff infrastructure.

We offer a competitive salary and an excellent benefits package with productivity bonus. Interested candidates please send CV to: **Andy Jagoda, MD, Vice Chair and Medical Director**, at: andy.jagoda@mssm.edu. For more information, please call: 212-241-2987. Mount Sinai is an Affirmative Action, Equal Opportunity Employer

William Beaumont Hospital

Research Director, Department of Emergency Medicine

The Emergency Department of William Beaumont Hospital in Royal Oak, Michigan is seeking an exceptional **Academic Emergency physician** for a **Research Director** position. The ideal candidate will be board-certified in emergency medicine and have an established record of production in terms of extramural funding and published research. In addition, it is important that the candidate demonstrate an ongoing commitment to medical education and excellence in patient care.

William Beaumont Hospital is a 1,066-bed suburban teaching hospital and Level 1 Trauma Center whose emergency department serves approximately 115,000 patients, with approximately 25,000 pediatric patients annually. The department of emergency medicine will also be a full academic department in the new Oakland University William Beaumont School of Medicine. It is a tertiary referral center for patients with cardiovascular disease, neurologic conditions, and pediatric illness and injury. The department has a well-established emergency medicine residency program, a state of the art emergency center and accredited observation unit, and an active research division.

Competitive salary and benefits are available for qualified candidates.

Interested candidates should submit curriculum vitae and letter of interest to:

Jedd Roe, MD, MBA, FACEP
Chair, Department of Emergency Medicine
William Beaumont Hospital
3601 W. 13 Mile Road
Royal Oak, Michigan 48073-6769
Phone: (248) 898-1969
Fax: (248) 898-2017
Jedd.Roe@beaumont.edu

Beaumont

Emergency Medicine Residency
Established 1961

CLASSIFIEDS

University of Pittsburgh

Department of Emergency Medicine

Offers fellowships in the following areas:

- Toxicology
- Emergency Medical Services
- Research
- Education

Fellows enroll in a Master's level program as a part of all fellowships. We provide intensive training and interaction with the nationally-known faculty from the Department of Emergency Medicine, with experts in each domain. Faculty appointments may be available and fellows assume limited clinical responsibilities in the Emergency Department at the University of Pittsburgh Medical Center and affiliated institutions. We provide experience in basic or human research and teaching opportunities with medical students, residents and other health care providers. The University of Pittsburgh is an Equal Opportunity Employer, and we welcome candidates from diverse backgrounds. Each applicant should have an MD/DO background or equivalent degree and be board certified/prepared in emergency medicine (or have similar experience). Please contact Donald M. Yealy, MD, University of Pittsburgh, Department of Emergency Medicine, 230 McKee Place, Suite 500, Pittsburgh, PA 15213 to receive information.

OHIO, The Ohio State University:

Assistant/Associate or Full Professor. Established residency training program. Level 1 trauma center. Nationally recognized research program. Clinical opportunities at OSU Medical Center and affiliated hospitals. Duties and primary responsibilities include didactic and bedside teaching with medical students and residents; participation in other educational activities. Conducts translational research in laboratory settings and/or clinical settings with medical students and/or residents. Send curriculum vitae to: Douglas A. Rund, MD, Professor and Chairman, Department of Emergency Medicine, The Ohio State University, 146 Means Hall, 1654 Upham Drive, Columbus, OH 43210; or E-mail: Sharon.Pfeil@osumc.edu; or call 614-293-8176. Affirmative Action/Equal Opportunity Employer.

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A
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M



Society for Academic Emergency Medicine

Membership Application

Name: _____ Title: _____ Email: _____

Institution address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home address: _____

City: _____ State: _____ Zip: _____ Country: _____

Preferred mailing address: Office Home Sex: M F Birth date: _____

Office phone: (____) _____ Home phone: (____) _____ Fax: (____) _____

Medical school or university faculty appointment and institution (if applicable): _____

Membership Benefits Include:

- Subscription to SAEM's monthly, peer - reviewed journal, *Academic Emergency Medicine*
- Subscription to the bi-monthly SAEM Newsletter
- Reduced registration fees to attend the SAEM Annual Meeting

Check Membership Category

<input type="checkbox"/> Active - \$510.00 Individuals with advanced degree university appointment actively involved in EM teaching or research.	<input type="checkbox"/> Resident/Fellow - \$145.00 Open to residents/fellows interested in EM. Graduation date: _____ / _____
<input type="checkbox"/> Associate - \$475.00 Open to those with interest in EM	<input type="checkbox"/> International Affiliate - email membership for pricing Country: _____
<input type="checkbox"/> Young Physician Year One - \$300.00 First year following residency graduation.	<input type="checkbox"/> Medical Student - \$125.00 Open to medical students interested in EM. Graduation date: _____ / _____
<input type="checkbox"/> Young Physician Year Two - \$415.00 Second year following residency graduation.	<input type="checkbox"/> CDEM - \$100.00 MUST ALSO BE A MEMBER OF SAEM

Interest Groups: Society members are invited to join any of the dedicated Interest Groups listed below.

Include \$25.00 annual dues for each Interest Group you check (resident members may join one Interest Group at no charge).

- | | | | |
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| <input type="checkbox"/> Airway | <input type="checkbox"/> Ethics | <input type="checkbox"/> Palliative Medicine | <input type="checkbox"/> Toxicology |
| <input type="checkbox"/> CPR/Ischemia/Reperfusion | <input type="checkbox"/> Evidence-Based Medicine | <input type="checkbox"/> Patient Safety | <input type="checkbox"/> Trauma |
| <input type="checkbox"/> Clinical Directors | <input type="checkbox"/> Geriatrics | <input type="checkbox"/> Pediatric EM | <input type="checkbox"/> Triage |
| <input type="checkbox"/> Disaster Medicine | <input type="checkbox"/> Health Services & Outcomes | <input type="checkbox"/> Public Health | <input type="checkbox"/> Ultrasound |
| <input type="checkbox"/> Diversity | <input type="checkbox"/> International | <input type="checkbox"/> Research Directors | <input type="checkbox"/> Uniformed Services |
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SAEM, 901 N. Washington Ave., Lansing, MI 48906, USA. email: membership@saem.org You may also join at www.saem.org Rev. Date 12/2/2008



Society for Academic
Emergency Medicine
901 N. Washington Avenue
Lansing, MI 48906

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The SAEM newsletter is published bimonthly by the Society for Academic Emergency Medicine. The opinions expressed in this publication are those of the authors and do not necessarily reflect those of SAEM.

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FUTURE SAEM ANNUAL MEETINGS

2009	May 14 - 17	<i>Sheraton New Orleans, New Orleans, LA</i>
2010	June 3 - 6	<i>Marriott Desert Ridge Resort & Spa, Phoenix, AZ</i>
2011	June 1 - 5	<i>Boston, MA</i>
2012	May 9 - 13	<i>Chicago, IL</i>

SAEM REGIONAL MEETINGS

**New England
Regional Meeting**
March 18, 2009
UMass Memorial Medical Center
University Campus
55 Lake Avenue N.,
Worcester MA 01655

**MidAtlantic
Regional Meeting**
March 26-27, 2009
Christiana Care
Health System -
Newark, Delaware

**Southeastern
Regional Meeting**
March 27-28, 2009
Emory Conference Center -
Emory University
Atlanta, Georgia
Contact Todd Berger, MD
at tberger@emory.edu

At www.saem.org, you will find more information on each regional meeting in the Meetings > SAEM Regional Meetings section of the site.