

THE REGIONAL MEETING GUIDEBOOK

Complete guide and framework to developing a successful regional meeting.

Volume II
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Table of Contents

CHAPTER 1: THE SAEM REGIONAL MEETING CONCEPT

What are Regional Meetings?

Goals and Objectives of Regional Meetings

The Current Regions of the SAEM Meetings

SAEM Support for Regional Meetings

Linkages Between the Regional Meeting and the SAEM Annual Meeting

CHAPTER 2: HOW TO PLAN A REGIONAL MEETING

Regional Meeting Planning Committee

Designing a Regional Meeting

Financing a Regional Meeting

Addressing Potential Conflicts of Interest

Marketing the Regional Meeting: Inside and Outside the Region

CHAPTER 3: APPLYING FOR A NEW OR AN ESTABLISHED REGIONAL MEETING

The Regional Meeting Application Process

CHAPTER 4: WHAT HAS OUR EXPERIENCE TAUGHT US?

Lessons Learned from Each Region's Experience: What Works? What Doesn't?

CHAPTER 5: AFTER THE MEETING IS OVER

Reporting on the Regional Meeting: When? What? Where?

CHAPTER 6: FIGURES AND RECOMMENDED TIMETABLE

Figure 1: Regional Meeting Application

Figure 2: Sample of SAEM Landing Page

Figure 3 : SAEM Hot Off The Wire

Figure 4: Sample SAEM newsletter ad

THE SAEM REGIONAL MEETING CONCEPT

What Are Regional Meetings?

Regional Meetings provide opportunities, particularly for young investigators, to present original research and to participate in sessions designed to teach essential research skills. They also introduce medical students, residents, and junior faculty to the variety of regional resources available to them as they consider research activities or an academic career in emergency Medicine (EM).

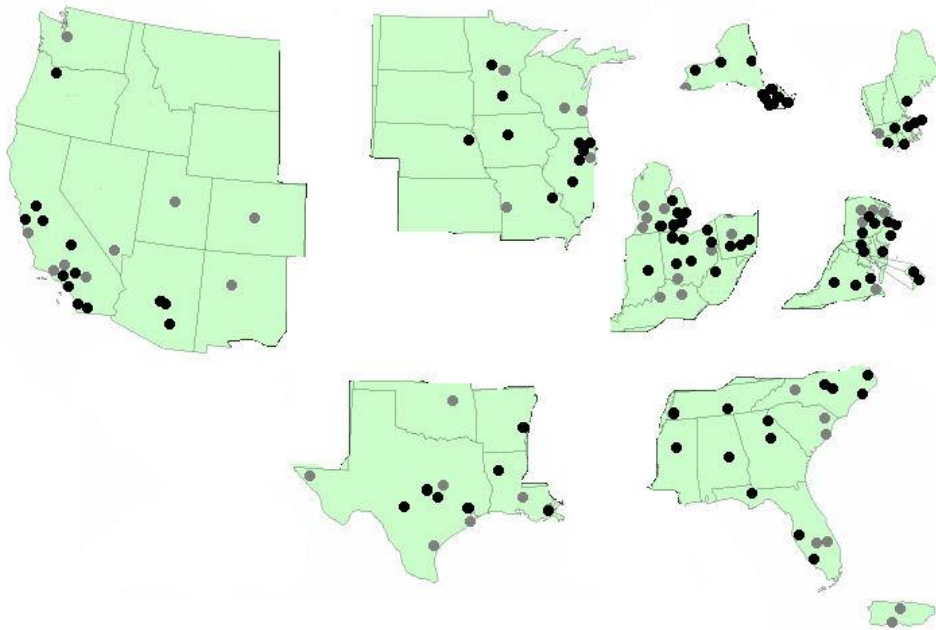
Regional Meetings are conducted in broadly defined geographic areas that include multiple residency programs. They promote academic exchange among residency programs, their faculty and residents, and the national SAEM organization. They expose young researchers and academicians to the expertise of senior faculty at nearby institutions and provide the opportunity for networking and collaboration. Finally, for those who cannot travel to the national Annual Meeting, Regional Meetings offer exposure to the excitement of cutting-edge EM research and education occurring in proximate sites. This is an especially important opportunity for medical students.

Goals and Objectives of Regional Meetings

SAEM sponsors Regional Meetings to promote participation in academics by emergency medicine faculty, residents, and medical students. Regional Meetings provide opportunities for the presentation of original research, for enhancing research and teaching skills, and for discussion of new developments that affect clinical practice and education in emergency medicine. Regional Meetings should provide content of similar quality to the SAEM Annual Meeting but with easier, less expensive access for attendees and shorter meeting duration. SAEM places considerable importance on the involvement of junior faculty, residents, and medical students in these meetings. Regional opportunities benefit the academic development of the participants, and increase their awareness of academic emergency medicine.

The Regions of the SAEM Meetings

There are currently seven established SAEM Regional Meetings (New England, Midwest, Mid-Atlantic, Great Plains, New York State, Southeastern and Western). SAEM considers applications for sponsorship of these established meetings, as well as for new regional meetings that involve a minimum of six Emergency Medicine training programs. Each Region was established based on geographic proximity to aid collaboration and connectivity. Involvement at any level in one Region does not preclude activities within a different Region.



SAEM Support for the Regional Meetings

SAEM is committed to developing successful Regional Meetings. The national organization offers a variety of support for both new and existing Regional Meetings. The various types of support are described below following the order of stages in organizing the event.

Planning Stages

- This Guide is offered as support during the early stages of meeting development. SAEM welcomes comments or make suggestions about this Guide as you gain experience with Regional Meeting planning.
- Meeting space is available at the SAEM Annual Meeting for each Regional Meeting Planning Committee (RMPC). Please inform the SAEM staff at least three months in advance to arrange a Planning Committee meeting during the Annual Meeting. This timing allows your meeting to be listed in the program guide and ensures adequate room space. SAEM staff can provide advice on selection of regional meeting sites, review of hotel contracts, and important elements of meeting planning. The names and contact information of the other regional meeting planners can be supplied.
- The SAEM name and logo may be used in any and all promotional materials, including programs, solicitations, and letterheads, thereby officially linking your event to the national meeting. Please contact the SAEM office for a copy of the artwork for the logo.
- Administrative assistance is available to develop “Calls for Abstracts” and abstract submission brochures and advertising.
- The SAEM Annual Meeting policies, scoring systems, and online submission process are readily available to facilitate planning. With advanced notice, a check-box identifying your Regional Meeting will be on the online Annual Meeting Abstract Submission form. Checking the box identifies abstract submissions that the author wishes to be considered for your regional meeting. SAEM forwards all such abstracts to you. This is an important benefit and should be used!

- Presentations developed by the SAEM committees and task forces for potential didactic sessions are available. For example, the Undergraduate Committee has developed several slide shows to facilitate medical student programming. Please contact the SAEM administrative staff for further information.
- SAEM will fund the participation of one current member of the Board of Directors at each Regional Meeting. Previous Regional Meetings have used Board members to lead a workshop, give a keynote lecture, or speak at a round-table lunch. Please contact SAEM if you are interested in having a Board member attend the Regional Meeting. We can provide you with a list of Board members and their areas of expertise. The Regional Meeting Planning Committee is responsible for contacting the Board member and confirming travel and lecture schedules. Please note that, once a Board member's participation is confirmed, please notify the SAEM Office no less than 90 days in advance in order to provide reimbursements for the Board members' travel. The Regional Meeting, not the Board member, is responsible for arranging this.

Advertising to Participants

- Your Regional Meeting's "Call for Abstracts" and other advertisements in the SAEM Newsletter; the SAEM Journal, *Academic Emergency Medicine* and the SAEM website are published at no charge. In order to take advantage of this service, please contact the regional meeting liaison to set up appropriate media coverage.

Media	When to contact
SAEM Newsletter	On the 1 st day of even months (1 month prior to desired publication date); please note that the newsletter is published every other month, in odd months
AEM Journal	Requires a minimum of 3 month lead time of publication.
SAEM website	As soon as possible. We can provide links to your abstract submission or forms
Social Media	Minimum of two days prior to pushing out social media posting. These can be scheduled in advance.
eNews	eNews is distributed via email every Wednesday. All content should be provided one week prior to date of distribution.

- If a meeting brochure or flyer is developed by your Regional Meeting Planning Committee, this promotional material can also be disseminated to SAEM members via email by the headquarters staff.

- Mailing labels for all or part of the SAEM membership list can be provided to you to promote the regional meeting. These membership lists are released for this purpose alone. Please note: SAEM cannot provide financial support for postage to promote the regional meeting.

Conducting the Regional Meeting and Afterward

- SAEM encourages, but does not require, submission of original research presented at regional meetings to *Academic Emergency Medicine (AEM)*.
- New regions may apply for funding support up to \$3000 from SAEM to help support their Regional Meeting for the first year only.
- Abstracts from the Regional Meeting may be published in AEM. This is arranged with the Editor and RMPC. There is a page charge for publishing the abstracts.

Linkages Between the Regional Meeting and the SAEM Annual Meeting

1. All Regions are recommended to seek representation on the National Program Committee. Many times a particular region may have 'local' interests that may not be apparent to national level input. In addition, some local 'regional' ideas may have great value to the national committee.

The current RMPC Chair is an excellent choice to advocate for the needs of their region, and to present ideas on their region's current research interests and presentations.

2. Regional Meeting recognized "Best" presentations (oral or poster) should be presented at the national SAEM meeting for that calendar year.

Ideally, the top quality abstracts from each region would already be accepted for presentation, but if this is not the case at a minimum a single abstract for each Region would be afforded poster presentation space.

An additional category from each regional meeting to include Best Resident and Best Student Presentation can also be submitted. The national Program Committee could then make a final decision, according to space availability and scientific interest, as to whether to afford these abstracts presentation space.

3. Regional Didactics may be suggested for Annual Program Committee presentation. These should be submitted from each region by the Regional Meeting Planning Committee. The Chair of the national Program Committee and Didactic Sub-Committee Chair decides on the appropriateness of didactic submissions for the Annual Meeting.

How to Plan a Regional Meeting

Regional Meeting Planning Committee

II

Every Region must have a Regional Meeting Planning Committee (RMPC) responsible for long-term program planning and administration. Although the major planning for the meeting may be performed by a small core of people from different programs within the region, every program in the region must be given the opportunity to be represented on the RMPC. Additional requests from programs to join a region should be welcomed and representative from those programs should be included in the planning process.

The mechanism for choosing leadership of the RMPC should be democratic and ensure stability and consistency in year-to-year planning and administration of the region's meetings. To accomplish these goals, it is recommended the immediate past, the current year, and the following year sites always have a representative on the RMPC. Members of the RMPC (including the chair) must be members of SAEM and should ideally be appointed to multi-year terms. The regional meetings will require a substantial amount of time from the chair of the RMPC and a fair amount of administrative help. It is best practice to ensure the host institution department chair gives his/her permission to sponsorship and has accepted the financial liability and time dedication to a successful meeting. The host institution should have an accredited emergency medicine residency program.

Program Planning and Content

Each RMPC develops meeting objectives and plans a program to accomplish those objectives. Consistent with SAEM's academic focus and strategic plan, emphasis should be placed on presentation of original research, development of research and teaching skills, and application of science to the clinical practice of emergency medicine. Each regional meeting must provide programming specifically directed toward residents and medical students.

SAEM will carefully review regional meeting applications and reserves the right to propose changes in program content or administration. Each year, the Board of Directors will make final decisions regarding Regional Meeting sponsorship.

Program Scheduling

SAEM encourages the scheduling of regional meetings throughout the academic year. Meetings **may not** be scheduled within **5 weeks** of the SAEM Annual Meeting. Optimally, SAEM Regional Meetings across the country should have one to two weeks between their scheduled dates. It is useful to clear the planned date with the central office.

Program Locations

Regional meeting sites are selected by the RMPC. They are chosen with the intent of maximizing accessibility to emergency medicine residents, faculty, and medical students, and minimizing travel time and cost. The RMPC may decide to rotate the meeting to various sites within the region or to

hold it at the same site each year. The RMPC should seek permission and the support from the Chair of the selected program.

Budgetary Considerations

The regional meeting application must be accompanied by a detailed budget (See financing a SAEM Regional Meeting). SAEM expects meeting organizers to carefully consider all potential expenses and ensure they are off-set by sufficient income, and/or support of the sponsoring department(s). Each RMPC must have a plan to handle regional meeting profits or deficits. SAEM will not assume responsibility for any deficits. Regional meetings **must** adhere to SAEM guidelines for commercial support. According to these guidelines, unrestricted educational grants are acceptable forms of sponsorship.

Designing a Regional Meeting

Developing Meeting Goals

As with any curriculum, formalizing the goals of the meeting is an appropriate place to start. The learning objectives, lecture and workshop curriculum and course format should all follow a well-developed set of meeting goals.

Know Your Audience

It is essential to consider the target audience while developing meeting goals. This meeting most often attracts academic physicians or students and residents considering academic careers. This is different from most “clinical” CME meetings, which tend to be geared more towards the community practitioner.

Faculty from medical school and residency based programs are a key constituency. They will primarily be junior faculty as well as senior level faculty in key educator positions. These individuals will be looking for opportunities to present scholarship and develop their interests and skills in research, education and administration. This is also a great networking opportunity for faculty to meet SAEM Board Members and other leaders in the EM academic community.

Residents from a broad range of programs will also be in attendance. They will be interested in presenting their resident scholarship, and learning about career planning and networking.

Medical students, primarily from local schools, will also attend. They will be interested in the residency application process, and will anticipate good advice on the Match process and the opportunity for some “face time” with the Program Directors.

Writing Learning Objectives

Learning objectives are clear statements of an individual’s performance that can be observed or measured. Objectives must include an action verb that implies a specific and measurable outcome. Objective writing for the curriculum (as opposed to a specific lecture) should target “higher level” cognitive objectives, such as analysis, synthesis and evaluation.

Ideally, objectives are written based on the goals. The curriculum (lecture and workshop topics) is created based on the goals. There should be at least one learning objective for each lecture topic.

An example of a correctly written objective:

Upon completion of this course the participants should be able to:

1. Identify the instruments used in vitreous surgery
2. Explain the principles of allergic reactions
3. Describe how to implement spaced follow-up billing procedures
4. Describe the name and extent of the problem

For your guidance, please find behavioral/measurable terms listed below:

Information:

cite	identify	quote	relate	tabulate
count	indicate	read	repeat	tell
define	list	recite	select	trace
describe	name	recognize	state	update
draw	point	record	summarize	write

Comprehension:

assess	contrast	distinguish	interpolate	restate
associate	demonstrate	estimate	interpret	review
classify	describe	explain	locate	translate
compare	differentiate	express	predict	compute
discuss	extrapolate	report		

Selecting Lecture and Workshop Topics: Curriculum Design

This is an important role of the Regional Meeting Planning Committee (RMPC). Whether “meetings” are conducted by conference calls or emails, the brainstorming power of a motivated group of scholars and educators from so many programs is an invaluable resource. Develop, and agree upon meeting goals for the group, and then brainstorm on lecture and workshop topics that meet those goals.

Ultimately, the number of topics will be based on the time and schedule, the different tracks in the curriculum, and the speakers and other resources that can be secured.

The RMPC is also a useful resource for identifying potential speakers. Sources include keynote speakers, SAEM Board members, and speakers from the regional academic programs.

Designing the Agenda

Ultimately, the agenda will be limited by time and space constraints, and financial resources. While most of the meeting is devoted to presentation of submitted scholarship, there is an opportunity to divide the meeting into tracks.

Tracks can divide the audience up into groups based on their goals for attending the meeting. Options include “Educator,” “Research,” and “Administrative” Tracks. Or, “Faculty,” “Resident” and “Medical Student” Tracks. Each track can address different objectives based on the goals of the designated audience. Dividing the meeting into different tracks requires more resources (meeting space, speakers, AV support, etc.) than having one general track for the audience. This can be tempered by having part of the meeting divided into tracks, while other components are designed for the general audience.

SAMPLE PROGRAM SCHEDULE

Day 1	8am-9am	Registration/Continental Breakfast
	9am-10am	Didactic Session—General Audience
	10am-11am	Didactic Session—General Audience
	11am-12:30pm	Poster Session 1
	12:30pm-1:30pm	Lunch
	1:30pm-2:30pm	Didactic Session—General Audience
	2:30pm-4pm	Poster Session 2

Day 2	7am-8am	Continental Breakfast			
	8am-10am	Oral Research Presentations			
	10am-12pm Breakout Sessions (Career Planning)	Time	Attending	Residents	Students
		10am-11am	Didactic Session—Faculty Audience	Didactic Session—Resident Audience	Getting into Residency (2hrs)
	11am-12noon	Didactic Session—Faculty Audience	Didactic Session—Resident Audience		
	12pm-1pm	Lunch—general audience			
Lunch with Program Directors (students only)					
1pm-3pm <i>Optional Lab</i>	<i>Shuttle to Simulation Lab</i>				

	1pm-2pm	Didactic Session—General Audience
	2pm-3pm	Didactic Session—General Audience

Preliminary Totals:	General Session	5hrs
	Lab (instead of General)	2hrs
	{ Breakout: Attending Breakout: Residents Breakout: Students	2hrs
		2hrs
		3hrs
	Research: Posters	3hrs
	Research: Oral	2hrs
	TOTAL	12hrs

Incorporating Scholarship Submissions

The Regional Meetings are an outstanding platform for scholarship in Emergency Medicine. Submissions come from junior faculty starting their academic careers, senior faculty sharing advanced research or educational and administrative topics, and residents and students who are testing the academic waters for the first time. It is important to take an inclusive approach to abstract submission, even if this means taking the time to mentor a junior author through the process of submitting a quality abstract.

- Abstracts are submitted through the SAEM website, and turned over to the RMPC designee after the submission deadline. Evaluating a number of abstracts can be time consuming. Abstract Reviews, using a pre-designed scoring sheet, should be a function of RMPC members. Once the abstracts are available, the following steps are recommended:
 - Divide the total by the number of members in the committee and give everyone a heads up on how many to expect.
 - Blind the abstracts, divide and distribute it to the RMPC members, along with a copy of the Abstract Scoring Sheet (see Chapter 6 and available on the SAEM website).
 - Make certain that individuals are not scoring in areas in which they have abstracts submitted. Removing conflicts of interest in scoring is essential.
- If there is the time, motivation and manpower, create a smaller committee of experts to score the abstracts again and take the average of the scores as the final number.
- Determine oral versus poster presentations based on the abstract score and how much time and space are available at the meeting.
- Structure awards for the highest scoring abstracts (separate for faculty, residents and students) for both oral and poster presentations.

When planning the agenda, the typical event allows for both oral and poster presentations. Depending on the Region and the RMPC preferences, this may not always occur. A one hour session will allow for 4-5 oral presentations per session. A brief oral presentation usually guarantees a larger audience for each presentation. Time and meeting space is set aside to review poster presentations (one hour per 25-40 posters). Ideally, this would be in one large room where it can be left up for the remainder of the day. If there are too many submissions for one poster session and it is divided into multiple sessions—both for space constraints and audience attention limits. It is important to allow sufficient time before, between and after

each session for the presenters to put up and take down their posters. Poster sessions can occur on separate days if there is time.

Writing the Schedule

The schedule arranges the lectures, workshops, breakout sessions, tracks and oral and poster presentations into the allotted time. Considerations in scheduling include speakers' travel itineraries available meeting space, breaks and lunch (including possible lunchtime sessions, such as a Program Director/Medical Student lunch), and anticipating audience's travel plans. Arriving the night before the first session, allows an early start in the morning. Consider a closing time that allows participants to fly out the same day.

Variations in Design

There is opportunity for tremendous variability in the design of each meeting. Some meetings are one day and others are two days. Some meetings are entirely based on presenting original research, while others incorporate didactic sessions into the curriculum. Some only have oral research presentations while others have additional time (and space) dedicated to poster presentations. Some meetings have breakout sessions or even entire days devoted to different tracks (e.g. Medical Student Forum, Educator Track). Some have optional workshops and skills labs—many of these have one session for residents and students and another to “train the trainer.” Some feature panel discussions and debates. Creative formats to deliver the goals and objectives of the meeting are limited only by the imagination of the RMPC.

Successful topics for keynote speakers or educational sessions have included the following:

- Research: Abstract Submission, Authoring a Manuscript, Grantsmanship, Evidence Based Medicine, Biostatistics, Research Methodology
- Academic Skills: Faculty Development, Career Planning, Time Management.
- Education: Bedside Teaching, Giving Feedback, Designing a Curriculum, Teaching Skills Labs (ultrasound, stimulation, etc.)
- Administration: Academic Promotion, Continuous Quality Insurance, Balancing Life Wellness

Financing a Regional SAEM Meeting

Determining Your Expenses (in anticipation of a budget)

Realistic budget development is a difficult task for most program chairs, as they often have little financial planning experience. Consider contacting the Continuing Medical Education (CME) Directors or coordinators employed by educational institutions that sponsor CME meetings for their advice. Items to consider include:

Pre-meeting costs

CME application fee

Brochures printing

Speaker Fees

Speaker travel

Speaker honorarium

Speaker gifts/plaques (frequently given in place of honorarium)

Awards (winning abstracts/presentations)

Hotel or space Costs

Space/room rental

Tables/table cloths/pens/paper

Poster boards' rental/screens for electronic posters

AV equipment

AV personnel on-site

Registration Fees (per registrant)

CME fees

Syllabus printing costs

Food/beverages

Meals

Breaks(coffee, tea, etc)

Alcohol (expensive, and many funding sources will not support it)

Fees associate with meals (tax, serving fees)

Extras

Signs at meeting

Special events (SIM Wars, SonoGames, Leadership forum, etc}

Other than the fact that the regional meetings are mainly a forum for the presentation of emergency medicine research, there is widespread variability in the format, content and style of the regional meetings. Therefore, budgets will vary widely. In general, honorariums are rarely offered for speakers. Although the aesthetics of hosting a meeting at a hotel can be favorable, hosting a meeting at a university may be more cost effective (even if not free).

Identify potential sources of income

The big three sources of income to support the meeting are: registration fees, academic departments, and industry support. There are several funding models across the country. The source of funding can impact the meeting environment and extras. One model relies on the academic departments to bear all expenses. This may lead to a spartan meeting attendance, but an advantage is that learner-mandated attendance may be easier to invoke when the supporting academic departments are covering the meeting expenses. The other extreme is to heavily solicit industry support, which may provide more funds for such items as food, a luxurious location, and a well-outfitted meeting space. For these heavily academically oriented meetings, travel convenience/inconvenience is more likely to affect attendance than what otherwise may be deemed a desirable location. Participants primarily come to present and hear research, while learning new academic skills.

Another important question is how much participants will be charged for attending, and what discounts will be afforded by rank of participant. While it may be an attractive option to allow medical students to attend at no cost to the student, an unexpected rise in the number of non-paying participants can destroy the well planned budget if there is a significant cost per registrant (food costs are typically the biggest expense).

SAEM supports the travel expenses of one SAEM Board member to attend and speak at each regional meeting. This is a covered expense that should be considered when planning the budget. The SAEM Board member is expected to give a talk while at the Regional Meeting, so this should be considered when planning the event. Aspects of this talk can include a description of what SAEM is, can do, the strategic plan, etc. Another option is for the SAEM Board member to give the keynote. Ultimately the SAEM Board member presentation is flexible and at the decision of the regional meeting committee and the specific board member identified.

SAEM also supports the travel expenses of one SAEM staff member. When planning the event, the availability of this person should be considered. They can assist in a variety of duties and this should be determined prior to the meeting.

Estimate Revenues from Participants

Assessing the attendance record over the last few years, and getting a sense of meeting interest across the region, is the best current means of estimating how many participants will attend during the planning stage. Academic chairs and residency program directors can have a significant impact on meeting attendance. After the basic number of attendees is estimated, an anticipated breakdown of attending, resident, student, and allied health professional is completed. One approach is to set the lowest fee per participant as close as possible to the minimum cost per individual. Alternatively, the organizers may wish to offer “scholarships” for no-cost participation to a certain group (such as students). This support may be limited to a pre-defined number to allow this expense to be appropriately budgeted. The effect of registration costs on attendance is a debated issue. In general, the younger the learner, the less willing or able they are to pay a high registration fee.

Most attendees at regional meetings are there to present research or to support those who are presenting research. Therefore, a much better idea of expected attendance will occur after the abstracts come in and acceptances are mailed. It is essential to have a system that confirms registration and attendance.

Determine Revenues from Supporting/Participating Academic Departments and Programs

As stated above, in some regional models, the primary funding agents are the academic departments in that region. Another approach is to ask departments to sponsor an event (reception, break, etc) or sponsor a certain number of students from their institution. Yet another method is to assign a fixed fee to each participating program and offset with reduced costs for participation to those programs. Excess funds can again serve as start-up monies for the next meeting.

Also critical to meeting planning is to have an entity that will pay for non-refundable expenses should the meeting attendance fall critically short of expectations. Typically the host institution takes this role, as the regional meeting moves from site to site in the region.

Identify Potential Industry Sponsors and Mechanisms of Industry Support

Of the three potential funding sources, soliciting monies from industry is the most time consuming and perhaps the most problematic. Special planning is necessary when industry supports a meeting where CME credits are being offered, so that commercial bias is minimized. Companies must also adhere to internal guidelines governing the content and method by which they fund educational programs.

SAEM's National Annual meeting has recently been receiving support from industry. In contrast, industry support has long been part of many (but not all) of the regional meetings. RMPC chairs should insure that SAEM and CME guidelines are followed.

Due to policies from the American Medical Association, American Council on Graduate Medical Education, and economic constraints on companies, the process of soliciting funds from industry has become more and more difficult. Soliciting an unrestricted educational grant is the most advantageous. However, unless you are well aware that a certain product is currently being marketed to emergency medicine physicians by a known company, the company you contact may not be interested in funding a meeting via an unrestricted grant. The lead time required to solicit funds for industry support may be 6 months or more. Most companies have an on-line system of proposal submission which may take 2-6 hours of time per company solicited. Companies typically ask for precise details about meeting content and expected audience. Because regional SAEM meetings are primarily research based, and involve many junior level learners (students and residents), companies may wish to contribute their small educational budgets to other meeting with agendas and audiences (more attending level participants) that better match their funding goals. Product display is problematic if medical students are involved. Medical schools generally have strict policies, and the LCME evaluates them on the exposure of the students to pharmaceutical and equipment company-based information.

An alternative to unrestricted educational grants are fees charged to industry for display tables. The advantage of these funds is that they require less documentation, lead time, and effort to acquire, but conversely, they provide fewer monies. Companies will want to know their proximity to the meeting space, and the mechanism by which participants will be encouraged to talk with representatives from the companies.

Handling Payment

It is helpful to accept credit card payments both on-line for advance registrants and on-site for walk-ins. The SAEM website is able to handle registration and payments both pre-meeting and on-site. Checks from institutions can be notoriously slow. It is possible for a registrant to appear who has not yet had their program or institution pay for their registration. Our advice is to have them pay on-site, give a receipt, and allow them to seek recovery.

Modify your Budget based on Anticipated Financial Support

After review of expected ~~revenues~~revenues, look for items that can be removed at the last minute if you should experience a shortfall in revenues late in the course of the pre-meeting time frame.

Post-meeting Review of Unnecessary Expenses and Failed Revenues

This final step is important to subsequent successful meetings. Over the course of time, situations change, and accommodations are necessary. Was CME credit a vital part of the meeting? Was the food expense necessary to the success of the meeting? Were there expenses that can be cut next year? Are there other means of encouraging attendance (and hence more registration revenue) that were not accomplished this year, that could be accomplished next year? A post-meeting review by the program chair and interested members of the program committee (especially those hosting the following year) is well worth the time spent.

Revenue Surplus

The current guideline is any revenue in excess of costs is typically given to the institution hosting the Regional Meeting the following year. This may be modified by mutual agreement by the individual RMPC.

SAMPLE

SAEM Conference	Event Budget	
Expenses		
	Estimated	Actual
Total Expenses	\$17,034.68	\$0.00

	Estimated	Actual
Site - Coralville Marriott		
Coral Ballroom - Salon A,B,C	\$700.00	
Audiovisual services	\$500.00	
Equipment rental	\$0.00	
6ft display tables (16)	\$560.00	
Service fees (22%) + tax	\$1,739.68	
Parking	\$0.00	
Totals	\$3,499.68	\$0.00

	Estimated	Actual
Catering		
Breakfast (\$20/person)	\$2,000.00	
Break #1(\$12/person)	\$1,200.00	
Buffet Luncheon (\$30/person)	\$3,000.00	
Break #2 (\$12/person)	\$1,200.00	
Totals	\$7,400.00	\$0.00

	Estimated	Actual
Speakers		
Travel (airfare, agency fee)	\$410.00	
Hotel	\$130.00	
Shuttles, taxis, parking, etc.	\$35.00	
Keynote Honorarium	\$1,500.00	
Totals	\$2,075.00	\$0.00

	Estimated	Actual
Announcement		
SAEM eNews	Free	
SAEM Social Media	Free	
SAEM Newsletter	Free	
Design of Brochure	\$500.00	
Printing of Brochure	\$1,000.00	
SAEM Website	Free	
Totals	\$1,500.00	\$0.00

Syllabus		
Folders	\$50.00	
Folder labels (shipping labels)	\$10.00	
Printing	\$300.00	
Totals	\$360.00	\$0.00

Totals	\$0.00	\$0.00

Miscellaneous		
Signage	\$50.00	
Poster Boards - rental (30)	\$550.00	
Name tags	\$100.00	
Deliver materials to hotel	\$450.00	
Dinner night before (12)	\$750.00	
Misc.	\$300.00	
Totals	\$2,200.00	\$0.00

SAEM Conference Event Budget

Income

	Estimated	Actual
Total income	\$17,800.00	\$0.00

Registrations

	Estimated	Actual		Estimated	Actual
	40		Physician, UI Faculty @	\$150.00	
	4		Nursing, Allied Health care @	\$50.00	
	56		Resident, Med Student @	\$25.00	
	100			\$7,600.00	\$0.00

Exhibitors/vendors/partnerships

Exhibitor/vendor/donations	6ft. covered, skirted table @	\$1,000.00			
SAEM		\$1,000.00			
9 additional		\$9,000.00			
				\$10,000.00	\$0.00

SAEM Conference Event Budget

Profit - Loss Summary

	Estimated	Actual
Total income	\$17,600.00	\$0.00
Total expenses	\$17,034.68	\$0.00

Total profit (or loss)	\$565.32	\$0.00
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Addressing Potential Conflicts of Interest

Consistent with the requirements of Continuing Medical Education meetings, financial relationships and other relevant conflicts of interest must be disclosed for each presentation. The acknowledgement of conflicts of interests is essential and relevant to the evaluation, interpretation, and application of research discoveries or recommendations made in didactic lectures.

A conflict of interest with the research presenter is defined as any significant financial or professional relationship with the manufacturer of any commercial product or the provider of any commercial service involved in the research presentation. These relationships may include, but are not limited to, grant or other research support, employment, consulting or speakers' bureau arrangements, and major stock ownership within the past 12 months.

The SAEM on-line abstract submission forms used for regional meetings include check boxes and spaces for participants to disclose financial relationships and conflicts of interest.

All presentations should include a slide of financial disclosure information and other potential conflicts of interest. For oral presentations, this is preferably the second slide in the presentation immediately following the title slide. For poster presentations this is preferably placed at the lower right corner of the poster.

Marketing the SAEM Regional Meeting

Strategies for marketing the regional meeting may assist in increasing the number and scope of attendees. Increasing attendance may enhance the attractiveness for high-caliber speakers. Since a larger audience can increase the perceived impact of their time investment, may generate greater meeting revenue, and thereby allow an honorarium and offset the speaker's expenses.

To a great extent, most regional meetings can be successfully conducted with simple marketing tools. As a general rule, reaching out to the target audience should take place early in a given academic or calendar year, allowing attendees to reserve time for the conference.

Target Participants

Within a region, the bulk of attendees are traditionally academic emergency medicine faculty and residents. This is unlikely to vary regardless of marketing strategy. Maximizing participation from within the region can be most effectively achieved by planning and adequate advertisement.

Beyond the physicians that comprise the bulk of Regional Meeting attendees, medical students, physician assistants, nurses and EMT/paramedics are also groups that have traditionally been recruited, albeit to a lesser extent. Advertising by mail, email, and posting information in practice-specific websites are methods to outreach to these groups.

Timing

Conference timing may have a tremendous influence on attendance. Within a given region, there may be unwritten but established patterns of the time of year, time of week, and duration of a conference.

Within a calendar year, the timing of a conference is typically planned so as to avoid conflict with other major national emergency medicine conferences. Regional meetings must be scheduled outside of five weeks of the SAEM national meeting. Timing of the regional meeting should also be planned with cognizance of other competing or conflicting regional EM activities, as well as potentially competing activities in other regions, such as other regional SAEM meetings.

The meeting's timing during a week, specifically planning for weekday versus weekend, will heavily influence attendance. Regions that are geographically larger and require greater travel time to reach the conference may be better suited for weekend conference and vice versa. If there is a specific weekday, such as Wednesday, that within a region is widely used as the constituent programs' didactic conference day, that may be the optimal day for hosting a regional meeting.

Regional Investment

The RMPC's advocacy at their home institutions is essential to improve attendance as well as the quality of regional meeting. The involvement of key persons such as program directors, chairs, fellowship directors, and others, as moderators and/or speakers increases the likelihood that others, particularly residents, from their respective programs attend the meeting.

As a general rule, a higher number of accepted abstracts will result in a higher number of presenting authors, and probably a higher number of attendees who attend the meeting to present their research. Maintaining the highest caliber of academics should be paramount to meeting planners. However, providing an adequate number of authors opportunity to present is also important. Due to limitations of time and physical space, some regional meetings may be more competitive, i.e. ratio of submitted abstracts to accepted abstracts, than the Annual SAEM meeting.

Reaching the Market

Email is currently the most time- and cost-effective method of marketing a Regional Meeting. The most critical email contact is with Emergency Medicine Residency Program Directors and Program Coordinators from within the region. Emails to Program Directors and Program Coordinators from areas outside the region, especially from geographically neighboring regions, may also be effective. The national SAEM office has traditionally assisted the RMPC with email advertising to SAEM email lists that can be selected geographically. Selected list serves, e.g. CORD, AACEM, may be used with permission. This is usually obtained from the organization's current president or executive director. Email to Research Directors and Department Chairs will also help attendance.

The goals and timing of email advertisements can be divided into categories: communications that advertise and encourage submission of abstracts before the abstract deadline; communications that

serve as “save-the-date” reminders to emergency medicine residency programs; and communications that give specific information about course content, including speakers and course location.

“Save-the-date” notices are most important within the context of the emergency medicine residency academic schedule. Therefore, announcement of the date and basic meeting details, such as venue, should be made as soon as possible within the respective July to June academic year. This initial email may also include the call for abstracts. Subsequent reminders of the call for abstracts may be made several (one or two) months prior to the abstract deadlines as well as one to two weeks prior to the deadline.

Medical students may be reached with emails directed to medical schools’ Emergency Medicine chairs, the site’s faculty member serving as the instructor of record or the Office of Student Affairs.

A large component of the didactic sessions in a given Regional Meeting will likely be of little or no interest to physician assistants, nurses, and paramedic groups. However, individuals with accepted abstracts are highly likely to attend a regional meeting. Advertising of the call for abstracts to these groups may therefore yield higher attendance than general advertising.

Web marketing by utilization of internet resources, such as web pages likely to be used by potential regional meeting attendees, is a mainstay. The primary source for this will be the website of the Society for Academic Emergency Medicine, but other EM websites may be used for this purpose.

Print advertisement within SAEM newsletters is an effective, cost-free, traditional manner in which to advertise Regional Meeting information. The nationally distributed newsletter is currently distributed on a semi-monthly basis. Though use of advertising in other print media, such as journals other than Academic Emergency Medicine, is possible, it does not appear to be beneficial.

Applying For A New Or Established Regional Meeting

III

The Regional Meeting Application Process

SAEM strongly recommends adherence to a meeting plan. Applications for regional meetings must be well-developed and include well-described, measurable objectives. Planning should begin at least one year prior to the proposed meeting dates. A completed application must be submitted to the SAEM office no later than 8 months prior to the date of the meeting.

1. Who performs the initial application review?

A copy of the completed application (see Chapter 6 Fig. 1), a detailed budget, and the Regional Meeting Planning Committee (RPMC) Chair's curriculum vitae must be submitted electronically to Holly Byrd-Duncan <hbyrdduncan@saem.org>

2. How is SAEM approval granted?

Once reviewed for completion, the application is sent to the SAEM Regional Meeting subcommittee for review. This is a subcommittee of the Board of Directors. Questions or suggestions regarding the meeting plan will be communicated directly to the RMPC chair by Holly Byrd-Duncan <hbyrdduncan@saem.org> Upon subcommittee approval, the application is forwarded to the entire SAEM Board of Directors for review and vote. Whenever possible, the BOD will make a final decision regarding SAEM sponsorship within 4 weeks of the original date of receipt of the application by the SAEM office. Re-application for sponsorship is required on an annual basis. The application form is available on the SAEM website:

http://www.saem.org/docs/regional-meetings/regionalmtgapplic_current.pdf?sfvrsn=2

3. What must be submitted following SAEM approval?

Following BOD approval, the RMPC will receive an approval letter accompanied by a sample call for abstracts (Chapter 6, Figure 2, and Figure 3). While the RMPC is not required to use an exact replica of the sample call for abstracts nor the online abstract submission form, the committee should adhere to the Guidelines for Submission of Abstracts published on the SAEM website. The RMPC then submits its own call for abstracts to SAEM for publication in the newsletter and eNews (Chapter 6, Figure 3A). A similar call is posted on the SAEM Web site (Chapter 6, Figure 3B) Once the abstracts have been received by SAEM, information requested in the RMPC call for abstracts is gathered and sent to the RMPC Chair.

4. After the Regional Meeting

Within 30 days of the conclusion of the Regional Meeting, the RPMC Chair must submit a report to SAEM for publication in the Society’s newsletter. Please see Chapter 5 “After the Meeting is Over,” for further details.

5. Basic Checklist for RPMC Chair (See Chapter 6 for a more detailed timeline)

1	Application submitted/approved	6-8 months
2	Work with SAEM to create a landing page	4-5 months
3	Setup abstract submission platform with open/close dates	
4	Save The Date Announcements website/eNews/Newsletter	
5	Open Registration	2-3 months
6	Review abstract submissions	6 weeks
7	Prepare onsite materials	2 weeks
8	Setup registration, walk meeting rooms and enjoy a successful event	Day of Meeting

What has Our Experience Taught Us?

Lessons Learned and Suggestions From Regional Leader's What Works? What Doesn't?

Successes/good ideas:

- One and a half day is generally sufficient.
- A Friday half day afternoon and Saturday all day leaves Sunday to for travel or relaxation. Most out-of-town attendees fly in Friday noon and stay one night. (Nb: for small geographic regions, one day is often sufficient.)
- For those invited faculty and participants coming in the prior evening, an informal lecture, e.g., what's new and exciting at this site, and/or a planned dinner is a successful model.
- A meeting can fit around 85-90 abstracts with 1 ½ day format.
- Some Regional Meetings do not use poster boards instead using mini-oral format 5 minutes presentation, 2 minutes questions. Other programs have had success with having poster boards for most abstracts, and selecting only the best abstracts from each institution for oral presentation. Some use ePosters, but this needs to be vetted carefully to insure space and IT support.
- If possible, accept a high ratio of submissions to encourage attendance and junior faculty/resident presentations. Identify posters for plenary sessions. Consider accepting the rest and have extra rooms/time to allow overflow presentations.
- Plenary session with awards may be developed. (e.g., top 6 abstracts, top abstract from each residency program, etc.)
- Awards: Best overall project, best resident project, best student project
- Try to get abstracts published in regional journal if not accepted to national SAEM

Cater to medical students using the following topics as an example:

1. How to get into residency
2. Orchestrating med school to explore EM
3. Hands on workshops, Ultrasound- best result, Splinting, Suturing, Airway management
4. Get EMIG presidents to drum up support within regional medical schools (over 120 med student registrants)
5. Good places for SimWars and SonoGamesto involve medical students

- Have one repository for excess funds generated from meeting to support subsequent meetings. Host program is allowed to keep 50% of surplus. Some regions pool the surplus to fund research efforts by the participating residency programs.
- Assign host program 2-3 years in advance
- Having a theme for the conference is helpful. For example: "Disruptive Innovation in Emergency Medicine Education". It helps focus content, and also helps to recruit panelists.
- Having a non-physician point person is key. They can keep tabs on everything and are invaluable during the planning. Identifying that go-to person early is very important.
- Printed syllabus not critical but it is optimal to have abstract listed to for young investigators. There is a significant cost and effort to get it printed in time, could use CD or on line for all presentations and could have a limited abstracts at the front of the room for attendees
- A Residency fair has been moderately successful with lunch on full day. One table is assigned for each residency. Any representative would be ok like chief resident or faculty member (does not need to be residency director). Don't let attendees leave venue for lunch in middle of full day. They may not return, or may return too late in the day.

Format:

Half day Friday

Opening remarks

Keynote address

Plenary session oral abstracts like SAEM format (only these are judged live)

2 parallel tracks for mini-oral abstracts 5 minutes presentation, then 2 minutes questions

Full day Saturday

2 parallel tracks for mini-oral abstracts plus

Med student session/hands on/residency advising

Lunch with residency fair

Oral abstracts for afternoon

Closing reception 5pm with awards

- Have future meeting organizational meeting during lunch on Saturday.
- Choose host 2-3 years in advance
- Discuss successes/failures/finances
- Put next year's host in touch with this and previous years' hosts/planners

- Moderators are required to keep things on track.
- It is essential to double check the order of presentations on the laptop and to remind everyone to have them in a format that is accessible – such as PowerPoint as not every computer may be compatible with other formats such as Keynote/Macintosh.
- It is important that the host computers have the most current version of software so that presentations made with that version are viewable and do not lose any content.
- Create mechanism for programs to front money at least \$1000 in advance to allow host program to reserve venue with deposit. Credit this to the program for faculty/resident registration.
- Provide nametags. Make font for name very large so you can see it from a few feet away.
- Recruit local programs to bring LCD projectors and laptops to avoid having to pay hotel for them.
- Require mini-oral presentation slides to be emailed in advance and loaded on laptops prior to meeting in order. Use thumb-drives to transfer from machine to machine if necessary. ALL THUMB DRIVES SHOULD BE VIRUS-SCANNED! If possible, do not perform the transfer on the primary computer that is used for the presentations. Place the same folders on all machines and label them per room.
- Limit ability to make last minute changes to presentations as it delays the session and makes it less professional.
- Supply small time clocks or use smart phone function to keep track of times.
- have a presenter (midlevel or senior faculty) also be a moderator for his/her own mini oral session.
- Alternate the venue within the region to have it close to some residency programs one year, and then the other end of the region the next year, so people may only have to travel once every other year, rather than each year.
- Choosing an inexpensive hotel was important for junior faculty, residents and medical students. Negotiate a suite for the organizers with extra room. Need storage space for equipment after each session.
- Some regions have had success holding the meetings on campus, in university lecture halls and meeting rooms.
- Insure ability to take credit cards on site to pay registration.
- Having an SAEM board member speak is helpful
- Online abstract submission process is essential
- Advertising helps with website, newsletter and hot-off-the-wire
- Emailing are helpful to advertise
- Important to involve presenters and judges from institutions within the region, or close to the region, as it encourages attendance from outside institutions and a true regional endeavor. This is important as it is easy for the regional meeting to become dominated by the hosting institution with limited regional participation.

- Planning one year in advance is important - "save the date", secure the presenters, regular e-mailings, generating interest. Planning should already be under way for the next year at the time of the meeting.
- Having your own webpage started one year in advance helps organize and publicize.
- Some outside funding is good. Work with SAEM to insure that guidelines for outside funding are met.

Challenges/failures:

- Allowing people to go off site for lunch
- A charge to medical students to attend didn't work even though we lost money on food for med students. Cost is higher due to lunch, snacks and brochures but can be considered an acceptable loss leader for the spread of the specialty.
- For some regions the CME process is too cumbersome and expensive as most attendees are academic faculty who don't need additional CME or residents and students who don't need it.
- Paper sticky nametags will fall off.
- For weekday meetings it is unlikely that a large number of attendees will come for more than one afternoon.
- Requiring payment prior to participation is far easier than tracking down persons and programs attending the meeting but did not have their attendance fee paid by the conference day.

After the Meeting is Over

Reporting on the Regional Meeting: Who? What? When? Where?

SAEM requires submission of a post-meeting report to the BOD as well as an article for publication in the SAEM Newsletter within 60 days of the close of the meeting.

Report to the SAEM Board of Directors

Region: _____

RPMC Chair: _____

Institution: _____

Phone: _____

E-mail: _____

RPMC Committee Members (name, institution):

- 1.
- 2.
- 3.

Article for SAEM Newsletter

The RMPC chair is responsible for submitting an article for publication in the SAEM Newsletter detailing the highlights of the regional meeting within 60 days of the meeting's close. It should be no longer than 1000 words and include a brief synopsis containing the date and location of the meeting, number of programs and people participating, keynote address speaker and topic, academic tracks, forums, or workshops offered, group social or extracurricular events, and winners of any competitions held. The RMPC chair may choose to acknowledge sponsors or volunteers essential to the success of the meeting.

Example Regional Meeting Article (with Permission)

18th Annual SAEM Western Regional Meeting

March 27-28, 2015

Tucson, Arizona

Hosted by The University of Arizona College of Medicine, Department of Emergency Medicine

Chair: Frank G. Walter, MD

For the first time, the 18th Annual SAEM Western Regional Meeting was held at The University of Arizona College of Medicine in Tucson, Arizona. There were 303 people registered for the meeting and 141 abstracts were presented. There were nine full-length, oral abstract presentations during the Friday afternoon plenary session and 110 lightning oral abstract presentations on Saturday. There were also 22 moderated poster abstract presentations. The full meeting schedule is available at (<http://emergencymed.arizona.edu/news/wsaem-2015-info>). Presenters came from Albert Einstein School of Medicine; Arizona State University; Hamilton High School in Chandler, Arizona; Highland Hospital; Madigan Army Medical Center; Mayo Clinic of Arizona; Naval Medical Center of San Diego; Oregon Health and Science University; Stanford University; Touro University; University of Arizona; University of California-Davis; University of California-Irvine; University of California-Los Angeles; University of California-Los Angeles-Harbor; University of California-Los Angeles-Olive View; University of California-San Diego; University of California-San Francisco; University of California-San Francisco-Fresno; University of Colorado; University of Nevada; University of New Mexico; University of Southern California; and University of Utah.

The first day began with pre-meeting activities, including behind-the-scenes tours of the Arizona Poison & Drug Information Center and the Arizona-Sonoran Desert Museum, hosted by Mazda Shirazi, MD the Medical Director of the Arizona Poison and Drug Information Center; Sono Games 2015, a competition allowing residencies to demonstrate their skills and knowledge of point-of-care ultrasound; and also a viewing of the documentary *Code Black*. The meeting officially began with a Welcome Address by Frank G. Walter, MD, the meeting chair and Sam Keim, MD, the Chair of The University of Arizona College of Medicine, Department of Emergency Medicine. The new interim Dean of the University of Arizona College of Medicine, Charles B. Cairns, MD, delivered the Keynote Address, "Time Makes a Difference to Everyone, Everywhere: Evolving Opportunities

in Emergency Care." Dr. Keim summarized Dr. Cairns's presentation as follows, "Dr. Charles Cairns gave a superb and inspirational talk about how the importance of TIME underlies our patient care and research. Dr. Cairns was personally instrumental in the development of an NIH Office of Emergency Medicine Research and he gave some highlights of how that discussion went down...with Dr. Francis Collins and other major players at NIH. Incredible!" Dr. Cairns's presentation was followed by the nine full-length, oral abstract presentations that scored the highest in the Western Region. Then Robert S. Hockberger, MD, President of the SAEM Board of Directors, spoke about the importance of "SAEM and Mentorship in Academic Emergency Medicine." The day concluded with an evening reception that included an Arizona- Sonoran Desert Museum docent who brought in a number of desert animals for attendees to view.

The next day, the meeting started with concurrent lightning oral presentations in five rooms. After these morning oral sessions, attendees were treated to a landmark panel discussion, "Looking Back & Looking Forward: Reflections on a Successful Career & Life in Academic Emergency Medicine," featuring Robert Hockberger, MD; Harvey Meislin, MD; Peter Rosen, MD; and Art Sanders, MD. After the lunch break, there were two "Point/Counterpoint" discussions. John Sakles, MD presented the benefits of video laryngoscopy, while William Mallon, MD discussed the use of direct laryngoscopy. The second "Point/Counterpoint" discussed management of calcium channel blocker and beta blocker poisoning. Mazda Shirazi, MD discussed hyperinsulin euglycemia therapy, while Robert French, MD discussed vasopressors. The afternoon panels were concluded by a presentation by the Academy of Women in Academic Emergency Medicine, featuring Deidre Anglin, MD; Mindi Guptil, MD; Tammi Thomas, MD; and Heather Whitlow, MD, discussing the importance of mentoring in their presentation, "Tips to Get your Career Up & Running." The meeting ended with the second set of abstract presentations, including three lightning oral tracks and a moderated poster session.

There was a concurrent afternoon session for medical students on Saturday. It started after the catered lunch. Ali Min, MD and Lisa Stoneking, MD organized and lead the track. The medical students had the opportunity to have lunch with Program Directors from Emergency Medicine Residencies in the Western Region. Aaron Leetch, MD and Chris Williams, MD conducted a mock interview and discussed interview techniques. Jan Shoenberger, MD described the interview process. The "4th year Structure" was outlined by Kristi Grall, MD. The medical student track finished with a panel decision among current University of Arizona Emergency Medicine residents, discussing "Life as an ED Resident."

Dr. Keim summarized the 18th Annual SAEM Western Regional Meeting as follows, "Dr. Frank Walter and program leadership staff Amy Williams and Danielle Crouse have already established a NEW STANDARD of quality for SAEM regional meetings. Multiple out-of-state EM leaders have already approached me to tell me this is the 'best Western SAEM meeting they've ever been to.' "

We greatly appreciate the leadership and expertise of SAEM and its Abstract Review Committee for reviewing and ranking all the abstracts; Dr. Hockberger and the SAEM Board for his visit and his inspiring presentations; Holly Byrd-Duncan for all her help and expertise, before, during, and after

our regional meeting; LaTanya M. Morris for all her help and expertise before our regional meeting; and the SAEM Academy of Women in Academic Emergency Medicine for their leadership and outstanding presentation. In addition, this meeting was a success because of the hard work and expertise of so many who are acknowledged and thanked on the final pages of the meeting schedule (<http://emergencymed.arizona.edu/news/wsaem-2015-info>).

Thank you for allowing us to host the 18th Annual SAEM Western Regional Meeting. We appreciate all your help and expertise.

Respectfully submitted,

Frank G. Walter, MD, FACEP, FACMT, FAACT
Professor of Emergency Medicine & Pharmacy Practice and Science
Meeting Chair
Department of Emergency Medicine, College of Medicine
The University of Arizona

Recommended Timetable and Figures

Helpful Checklist for the Host of the Regional Meeting

Completion Date	Goal	Activity	Cost
-12 months	Long Range Planning	Set up schedule with University, Department and Hospital. Establish time and place for meeting. Reserve rooms.	Time
-8 months	Ask SAEM for Support	Complete SAEM forms online at www.saem.org , creative tentative budget, schedule, sponsorships, special programming, academy involvement	Time
-6 months	Obtain SAEM Support	BOD provides final approval of application, budget, schedule etc.	No Charge
-5 months	Develop online presence	Work with SAEM on the landing page, abstract submissions open/close dates, registration platform, and linking all external sites through SAEM.	Time
-5 months	Establish Speakers	Reach out to academies, the board, local groups for a keynote	\$200-\$500
-4 months	Financial Support/Sponsorships	Contact vendors and hospitals for support in return for advertising space, table setup, etc.	\$1,500+ income
-4 months	Promotions	Begin developing advertising within, newsletter, eNews, social media, SAEM homepage, and through targeted emails.	Time
-4 months	Confirm venue	Assure adequate number and size of rooms, projection facilities and boards for posters. Rooms are blocked at a local hotel	\$8/person management fee
-4 months	Email a call for abstracts	Send an email out to previous participants and program directors	Time
-2 months	SAEM Funding	Submit request to SAEM for \$1000.00 support	No Charge
-6 weeks	Abstract Deadline	Collect and review abstract submissions	Time
-5 weeks	Setup Schedule	Contact submitters for accept/rejects and assign presentations to poster/oral slots	Time
-4 weeks	Prepare Brochure	Layout and format brochure and adding sponsorships	\$300/100
-2 weeks	Prepare onsite	Name tags, awards, schedules, onsite	\$500

	materials	registration forms	
-2 weeks	Final check list	Confirm food/beverage, AV, CME instructions, etc	
-24 hours	Venue ready?	Visit the venue make sure everything is ready to go.	Time
Day Of	Registration	Setup area, confirm printer and laptop communication	
Day Of	Enlist Volunteers	Make sure you have a few extra hands on deck to assist in trouble shooting.	Time
+1 week	Thank You	Email a personal thank you to everyone who assisted in the success of your meeting	Time
+4 weeks	Report to SAEM	Submit report to SAEM outlining the successes of the meeting, actual budget, additional sponsorships, attendance, etc.	Time
+4 weeks	Meeting Revenue	SAEM to cut a check to host institution for total amount of registration fees collected	No Charge

Figure 1: SAEM Regional Meeting Application



Society for Academic Emergency Medicine Regional Meeting Application	
<p>A completed application should be submitted to the SAEM office no later than 8 months prior to the date of the meeting. Copies of completed applications, a detailed budget, and a copy of the regional meeting program committee (RMPC) chair's curriculum vitae must be submitted electronically to the SAEM office at hbyrdduncan@saem.org. Questions regarding the status of a specific application should be directed to the SAEM office.</p>	
Name of Meeting:	
Meeting Dates:	
Meeting Location:	
Attachments:	
<input type="checkbox"/> Proposed Meeting Program including names of all speakers. If some speakers are still tentative, please make a note. At least 50% of speakers should be confirmed (required).	
<input type="checkbox"/> Proposed Meeting Budget (required).	
<input type="checkbox"/> An image of the city/location of the proposed meeting for the SAEM website. Please do not use a copyrighted image. Images should be taken with a digital camera, not a smart/cell phone (required).	
<input type="checkbox"/> Other (specify):	
Name of regional meeting program committee (RMPC) chair:	
Institutional affiliation:	
Address:	
Phone number:	Fax number:
Email address:	
List RMPC chair's prior experience in meeting planning and administration (use separate sheet if necessary). A copy of the RMPC chair's curriculum vitae must accompany the application.	
Other members of the RMPC (list name, institution, and number of years on committee for each member. Use separate sheet if necessary):	
Will there be a CME-accrediting institution for this meeting?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, name of institution:	
Briefly describe the primary meeting objective:	

List the approximate percentage of meeting sessions dedicated to each of the following activities:	
%	presentation of original peer-reviewed research
%	clinical education sessions
%	research or teaching skills development sessions
%	medical student and resident programming
%	other (committees, social, etc.)
Anticipated total meeting attendance (estimate):	
Estimate the percentage of meeting attendees from each of the following categories:	
%	residents and medical students
%	junior-level academic EM faculty (instructor, assistant professor)
%	senior-level academic EM faculty (associate professor, professor)
%	practicing clinicians
%	other (including nurses, pre-hospital providers, etc.)
Is this meeting new or established?	
If established, list prior years meeting has been held:	
Will corporate sponsors provide funds for specific speakers or sessions?	
Will corporate sponsors participate in the process of choosing sessions or speakers for the meeting program?	
Indicate the name of the SAEM BOD member who will be participating in this regional meeting. Every regional meeting should make an allowance for a 15-20 minute PowerPoint presentation by the BOD member. Additional ways to incorporate BOD members: invite them to speak, serve on panels and moderate poster sessions. (See list of BOD members on following page.)	
Name of BOD member:	
Attach a copy of a detailed budget for the meeting. In the space below, describe how the RMPC will handle any deficits or profits that might result from this meeting. *Please include \$1,000 in support from SAEM that may be requested upon approval of this application.	
Signature of RMPC chair:	
Date of application:	

Figure 2: SAEM Regional Meeting Landing Page

Great Plains 2015

When

September 18-19

Where

[Phillips Wangenstein Building](#)
Minneapolis, MN



[REGISTRATION IS NOW OPEN](#)

[HOTEL INFORMATION](#)

ABSTRACTS

Abstracts are due by September 1. [Submit now!](#)

Agenda/Preliminary Program

[Find full program information here](#)

Cutting Edge Resuscitation

RJ Frascone, MD

What's new in Minnesota: Pickings From the Grapevine

A review of the theory behind ACD/ITD CPR,

A discussion of BIS monitoring in cardiac arrest

Head up CPR!

Charles Bruen, MD

Treating Lazarus: Managing your patients after ROSC

Post-arrest management The Evolution of Bedside Ultrasound

Dave Plummer, MD Tobias Kummer, MD

Residency Fair

An opportunity for emergency medicine residencies throughout the Great Plains Region to interact with interested medical students.

Minnesono Games Ultrasound Competition

A fun competition for medical students and residents to include trivia and the great hands on scan-off. Who can get the best image possible?

Poster Session

Figure 3: Hot Off The Wire eNew

Midwest and Great Plains Abstracts Due, 1 Week Left

Regional Meetings are a great way to get top education outside of the SAEM Annual Meeting. These events, which take place around the country, have the same review process that submitting to the national meeting does. Review the top-notch agendas for the following programs. [Abstracts are due by Sept. 1.](#)

SAEM

SAEM Regional Meetings	
<p>Great Plains Sept. 18-19 Minneapolis Submit Abstracts by Sept. 1</p>	<p>Midwest 2015 Regional Meeting Brochure Sept. 24-25 Toledo, Ohio Submit Abstracts by Sept. 1</p>

Figure 4: Newsletter

SAEM Regional Meetings

SAEM has schedule four regional meetings leading up to the Annual Meeting in Atlanta. Regional meetings are a great opportunity to submit abstracts locally and possibly be chosen as one of the top five to be featured from your region at the Annual Meeting. Visit us online at www.saem.org for specific submission deadlines.

<p>Mid-Atlantic Regional Meeting February 2, 2013 George Washington School of Medicine Washington D.C. Abstracts Open</p>	<p>Southeastern Regional Meeting March 23-24, 2013 University of Florida - Jacksonville Jacksonville, FL. Abstracts Open</p>
<p>New England Regional Meeting April 3, 2013 Rhode Island Convention Center Providence, RI Abstracts Closed</p>	<p>Western Regional Meeting March 22-23, 2013 Renaissance Long Beach Hotel Long Beach, CA Abstracts Open</p>

Visit the Poster Hall in Atlanta to see who the top five winners are from each region!