

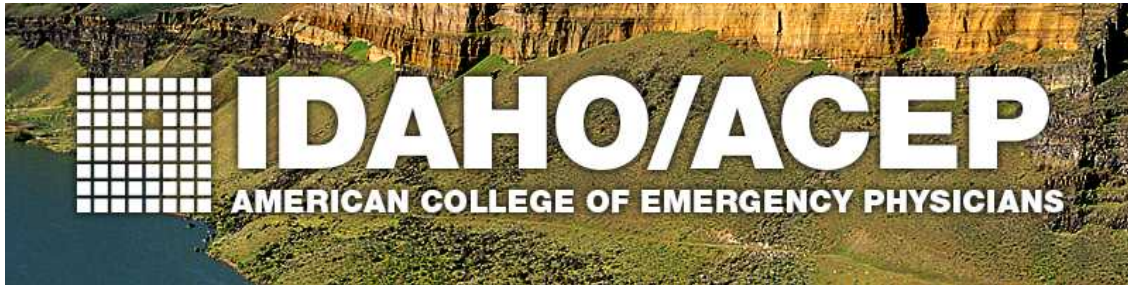
**Subject:** Idaho Chapter Summer 2017 E-Newsletter

**Date:** Friday, September 8, 2017 at 11:43:41 AM Central Daylight Time

**From:** Idaho Chapter ACEP

**To:** Maude S. Hancock

A Newsletter for the Members of the Idaho Chapter



**Heather Hammerstedt, MD, MPH, FACEP, President**

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## **From the President Heather Hammerstedt, MD, MPH, FACEP**

Hello Idaho ACEP!

A few updates from the Idaho ACEP Board of Directors.

### **IDAHO MEDICAL ASSOCIATION HOUSE OF DELEGATES:**

Idaho ACEP sponsored a successful resolution this summer, where the HOD supported the Idaho state legislature's "prudent layperson standard" on emergency care. This law has been on the books for a few years, however with attacks on emergency care access in Missouri and Georgia by an insurer who is retrospectively declining to pay for services deemed "nonemergent", Idaho ACEP wanted to be sure the IMA was on board for protecting us and our patients if our insurers choose to follow suit.

### **EMERGENCY DEPARTMENT INFORMATION EXCHANGE:**

Idaho ACEP has been working with Treasure Valley hospitals, including St Lukes and St

Alphonsus health systems, as well as those in Coeur D'Alene, Moscow and Sandpoint, to organize a mass introduction of the [EDIE / PreManage systems](#). This patient information system has been used successfully in many states, including Oregon and Washington, to identify complex care and utilization patients between hospital systems and push information to the physician/provider regardless of EMR. This will allow us to more effectively and efficiently care for complex medical and social patients. If your hospital is interested in joining the effort, please reach out to us with introductions.

#### ACEP CORPORATE COUNCIL MEETING:

In July, I had the opportunity to meet with ACEP executives in Dallas TX, including the ACEP president, EMF president, ACEP national advocacy / legal/ reimbursement team, and ACEP executive director. Among topics discussed that are relevant to rural and urban Idaho: recruitment of EM physicians to rural locations, advanced practice provider scope of practice and supervision, telemedicine hurdles, the consolidation of hospital systems, legislative attacks by insurers, national ACEP involvement in national health reform, and state chapter support. I was impressed by how seriously our Idaho needs were taken and feel that we are well supported by our executive leaders.

In closing, I hope you all had a healthy, happy, and FUN summer and that the luck continues on this fall. As always, I'm happy to take calls or emails from you on any specific EM concerns or needs that you, your group, or your community is having. We are here to work for you!

Heather Hammerstedt, MD, MPH, FACEP  
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## ACEP assists DMAT teams as they prepare to respond to Hurricane Harvey

**Rick Murray, EMT-P**

**Director, Dept of EMS and Disaster Preparedness**

ACEP was pleased to furnish classroom space over the weekend of August 26 to DMAT teams from several states that were staged before they deployed. MN Chapter Executive Shari Augustine, who is a member of the MN DMAT, contacted ACEP staff to inquire of the possibility of using the ACEP Board Room for training for the various teams. Space was provided for training for over 240 members for DMAT teams and U. S. Public Health Service personnel. This provided them the opportunity to receive some last-minute training and briefings before they deployed to various areas of the Texas coast that were impacted by Hurricane Harvey.



ACEP has a lot of [resources for the public](#) about preparing for and surviving disasters and they are being promoted to general public audiences.

Also, here are some [general talking points](#) about responding to disasters. They can help in talking with the news media.

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## National Disaster and Life Support Foundation

The National Disaster Life Support Foundation is very pleased to have partnered with the American College of Emergency Physicians (ACEP) to provide disaster medicine training and to further develop the NDLS education materials.

The NDLS program began in the late 1990's with a realization that there was a lack of standardized training for medical and nursing providers who may be responding to disasters. Individuals were medically trained within their specialty to the same National Standard, however disaster specific education was not included in the majority of medical and nursing curricula. Examples of the missing material included:




- Scene safety
- Standardized triage methodology
- Incident Management
- Identifying and requesting needed resources
- What constitutes a disaster
- Public Health impact of disasters

The NDLSF established an affiliated membership-based organization for the purpose of overseeing the development and revision of the curriculum. This organization is the National Disaster Life Support Education Consortium (NDLSEC).

**The NDLSEC Annual Meeting will be held in conjunction with ACEP's 2017 Annual Scientific Assembly in Washington, D.C., October 29 – November 1, 2017.**

**National Disaster Life Support™ Foundation** & **The American College of Emergency Physicians**

*Collaborating to offer programs that provide essential training for strengthening healthcare preparedness and response.*

- Core Disaster Life Support® (CDLS®) 
- Basic Disaster Life Support™ (BDLS®) 
- Advanced Disaster Life Support™ (ADLS®) 

For more information - [www.ndlsf.org](http://www.ndlsf.org)  
email us: [info@ndlsf.org](mailto:info@ndlsf.org)




## White Coat Day on Capitol Hill at ACEP17

Decisions made by Congress influence the practice and the future of emergency medicine on a daily basis. Join your emergency physician colleagues in Washington, DC on November 1 and spread the word to legislators and their staff about the critical role of emergency physicians in our nation's health care delivery system. White Coat Day participants will be asked to attend a special advocacy training session prior to heading to Capitol Hill. Transportation will be provided and all participants will receive a customized schedule and materials to share in the meetings.

There is no fee to participate but advanced registration is required. Participants can sign-up as with their ACEP17 registration or may sign-up separately if not registered for ACEP17. Go to [White Coat Day](#) for more information or contact [Jeanne Slade](#) in the ACEP DC Office.

## Register for White Coat Day at ACEP17!

DON'T MISS THE OPPORTUNITY TO VISIT CAPITOL HILL  
WITH YOUR EM COLLEAGUES WHILE IN WASHINGTON, DC



**Spread the word about the critical role of emergency physicians  
in the health care delivery system**

ACEP staff will schedule your visits in advance. Participants will receive advocacy training prior to the visits. Transport to and from Capitol Hill is provided. Please bring your white coat!

Advanced registration is required. Participants can sign-up with ACEP17 registration or may register separately if not attending ACEP17.

[WWW.ACEP.ORG/ACEP17/HILLDAY](http://WWW.ACEP.ORG/ACEP17/HILLDAY)

## ACEP17 Wellness Activities and Resource Center Giveaways

### Wellness & ACEP Resource Center

Sunday, October 29 - Tuesday, October 31

Location: Exhibit Hall

Stop by the wellness center in the ACEP Resource Center of the exhibit hall and discover tips from the experts to improve your well being daily. [View full list of activities and schedule.](#)

## Product Giveaways

Held daily in the Resource Center

Sunday –PEER

- PEER one-year membership
- PEER Print Companion

Monday – CDEM

- Trauma special edition
- 2- year print
- One-year Residency Education Portal

Tuesday – ACEP eCME

- My Residency Learning Portal
- Trauma, Stroke, Cardiovascular bundle
- Procedures and skills course
- Featured guest on ACEP Frontline

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## Articles of Interest in *Annals of Emergency Medicine*

**Sandy Schneider, MD, FACEP**

**ACEP Associate Executive Director, Practice, Policy and Academic Affairs**

ACEP would like to provide you with very brief synopses of the latest articles in *Annals of Emergency Medicine*. Some of these have not appeared in print. These synopses are not meant to be thorough analyses of the articles, simply brief introductions. Before incorporating into your practice, you should read the entire articles and interpret them for your specific patient population. [Read More](#)

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## No Emergency Department is Immune from Violence

But you can be better prepared and reduce the risk of harm to your patients, your staff, and yourself. You can implement security measures, changes in your processes and policies, education and training, and attention to design details. Learn how with these new free resources from ACEP, all in one place, easy to find -- [Violence in the Emergency Department: Resources for a Safer Workplace](#)

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## Welcome New Members

Seth Loofbourrow

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