

## Summary of 2017 Council Resolutions

### Resolutions Not Adopted (NA) or Withdrawn (W)

- 11 Diversity of ACEP Councillors – Bylaws Amendment (NA)
- 14 Unanimous Consent – Council Standing Rules Amendment (NA)
- 15 ABEM Financial Transparency (W)
- 16 ABEM Governance (W)
- 17 ACEP Membership and Status is Independent of Other Organization (W)
- 19 Advocacy and Support for “Scholarly Activity” Requirements for EM Residents (NA)
- 37 Medically Supervised Injection Facilities (W)
- 42 ACEP Policy Related to Cannabis (NA)
- 53 Supporting Research in the Use of Cannabidiol in the Treatment of Intractable Pediatric Seizure Disorders (NA)
- 54 Use of Cannabis as an Exit Drug for Opioid Dependency (NA)

### Referred Resolutions

- 20 Campaign Financial Reform – to the Steering Committee (as amended)
- 21 Creation of an Electronic Council Forum – to the Steering Committee
- 24 Maintenance of Competence for Practicing Emergency Physicians (as amended)
- 33 Immigrant and Non-Citizen Access to Care
- 35 Legislation Requiring Hyperbaric Medicine Facility Accreditation for Federal Payment
- 38 Prescription Drug Pricing
- 41 Reimbursement for Hepatitis C Virus Testing in the ED
- 45 Group Contract Negotiation to End-of-Term Timeframes
- 46 Impact of Climate Change on Patient Health and Implications for Emergency Physicians
- 47 Improving Patient Safety Through Transparency in Medical Malpractice Settlements
- 48 Non-Fatal Strangulation
- 50 Promoting Clinical Effectiveness in Emergency Medicine
- 62 FECs as a Care Model for Maintaining Access to Emergency Care in Underserved, Rural, and Federally Declared Disaster Areas of the United States (as amended)

### Bylaws Resolution

*Requires a 2/3 affirmative vote of the Board of Directors for adoption.*

- 10 Chapter Bylaws Conformance Standards – Housekeeping Change (as amended)
- 12 Seating of Past Chairs of the Board in the ACEP Council

### Council Standing Rules Resolution

*The Board does not take action on Council Standing Rules amendments.*

- 13 Seating of Past Chairs of the Board in the ACEP Council

### Non-Bylaws Resolutions

*Requires a 3/4 vote to amend or overrule.*

- 1 Commendation for James M. Cusick, MD, FACEP
- 2 Commendation for Robert E. O’Connor, MD, MPH, FACEP
- 3 Commendation for Gordon B. Wheeler
- 4 In Memory of Charles of R. Bauer, MD, FACEP
- 5 In Memory of Diane Kay Bollman
- 6 In Memory of Aaron T. Daggy, MD, FACEP
- 7 In Memory of Geoffrey E. Renk, MD, PhD, FACEP
- 8 In Memory of Salvatore Silvestri, MD
- 9 In Memory of Robert Wears, MD, FACEP
- 18 ACEP Wellness Center Services
- 22 Funding of Emergency Medicine Training (as amended)

- 23 Information Sharing, Regular ACEP/Chapter Contact, and Regional State/Chapter Relationships (as amended)
- 25 Resolution Co-Sponsorship Memo
- 26 Study of Locums Physicians Representation (as amended)
- 27 9-1-1 Number Access and Prearrival Instructions
- 28 Coverage for Patient Home Medication While Under Observation Status (as amended)
- 29 CPR Training (as amended)
- 30 Demonstrating the Value of Emergency Medicine to Policy Makers and the Public (as amended)
- 31 Endorsement of Supervised Injection Facilities (as amended)
- 32 Essential Medicines (as amended)
- 34 Generic Injectable Drug Shortages (as amended)
- 36 Maternity and Paternity Leave (as amended)
- 39 ACEP Involvement in State Legislative Activities (as amended)
- 40 Reimbursement for Emergency Services (as amended)
- 43 Expanding ACEP Policy on Workforce Diversity in Health Care Settings (as amended)
- 44 Guidelines for Opioid Prescribing in the ED
- 49 Participation in ED Information Exchange and Prescription Drug Monitoring Systems
- 51 Retirement or Interruption of Clinical Emergency Medicine Practice
- 52 Support for Harm Reduction and Syringe Services Programs
- 55 Workplace Violence (as amended)
- 56 In Memory of Robert E. Blake, MD, FACEP
- 57 In Memory of James H. Creel, Jr., MD, FACEP
- 58 In Memory of Paul Berger, Jr., MD, FACEP
- 59 In Memory of William Wilkerson, Jr., MD, FACEP
- 60 Commendation for First Responders to 2017 Hurricanes
- 61 In Memory of Michael G. Guttenberg, DO, FACEP

## **Resolutions Adopted by the 2017 Council and Board of Directors**

### **Resolution 1 Commendation for James M. Cusick, MD, FACEP**

RESOLVED, That the American College of Emergency Physicians commends James M. Cusick, MD, FACEP, as a practicing emergency physician rendering excellent care to the patients we serve, for his leadership in the College as Council Vice Speaker and Council Speaker over the past four years, and for his lifetime of service and dedication to the specialty of Emergency Medicine.

### **Resolution 2 Commendation for Robert E. O'Connor, MD, MPH, FACEP**

RESOLVED, That the American College of Emergency Physicians commends Robert E. O'Connor, MD, MPH, FACEP, for his service as an emergency physician, clinical investigator, educator, and leader in a life-long quest dedicated to the advancement of the specialty of Emergency Medicine.

### **Resolution 3 Commendation for Gordon B. Wheeler**

RESOLVED, That the American College of Emergency Physicians commends Gordon B. Wheeler for his service as Associate Executive Director of Public Affairs.

### **Resolution 4 In Memory of Charles of R. Bauer, MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude the many contributions made by Charles R. Bauer, MD, FACEP, as one of the leaders in emergency medicine and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of Charles R. Bauer MD, FACEP, his friends, and his colleagues our condolences and gratitude for his tremendous service to his country, the specialty of emergency medicine, and to the patients and physicians of Texas and the United States.

### **Resolution 5 In Memory of Diane Kay Bollman**

RESOLVED, That ACEP and the Michigan College of Emergency Physicians hereby acknowledges the many contributions made by Diane Kay Bollman as one of the leaders in emergency medicine and the greater medical community; and be it further

RESOLVED, That ACEP and the Michigan College of Emergency Physicians extend to the family of Diane Kay Bollman, her friends, and her colleagues, our condolences along with our profound gratitude for her tremendous service to the specialty of emergency medicine, Michigan emergency physicians, and patients, who will never fully know her impact, across the United States and likely beyond.

### **Resolution 6 In Memory of Aaron T. Daggy, MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions made by Aaron T. Daggy, MD, FACEP, as one of the leaders in pre-hospital medicine, EMS and fire, and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of Aaron T. Daggy, MD, FACEP, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine and to the patients and physicians of New York and the United States.

### **Resolution 7 In Memory of Geoffrey E. Renk, MD, PhD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions made by Geoffrey Edmund Renk, MD, PhD, FACEP, as one of the leaders in emergency medicine and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to his wife, Lisa Flaggman, his family, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine and to the patients and physicians of South Carolina and the United States.

### **Resolution 8 In Memory of Salvatore Silvestri, MD**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the contributions made by Sal Silvestri, MD, as a leader in emergency medicine and EMS; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family, friends, and colleagues of Sal Silvestri, MD, our deepest sympathy, our great sense of sadness and loss, and our gratitude for having been able to learn so much from a kind, gentle, caring leader in our emergency medicine world.

### **Resolution 9 In Memory of Robert Wears, MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions made by Robert Wears, MD, FACEP, as one of the leaders in emergency medicine and a true pioneer of the specialty; and be it further

RESOLVED, That national ACEP and the Florida College of Emergency Physicians extends to his wife, Dianne Wears, his children and grandchildren, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine.

### **Resolution 10 Chapter Bylaws Conformance Standards – Housekeeping Change – Bylaws Amendment**

RESOLVED, That the ACEP Bylaws Article VI – Chapters, Section 2 – Chapter Bylaws, paragraph 1, be amended to read:

A petition for the chartering of a chapter shall be accompanied by the proposed bylaws of the chapter. No charter shall be issued until such bylaws are approved by the Board of Directors of the College. Chartered chapters must ensure that their bylaws conform to the College Bylaws and ~~to the “Guidelines for Bylaws and Model Chapter Bylaws for Chapters of the American College of Emergency Physicians.”~~current approved chapter bylaws guidance documents. Proposed amendments to the bylaws of a chapter shall be submitted in a format and manner designated by the College not later than 30 days following the adoption of such proposed amendments by the chapter, pursuant to its bylaws and procedures. No proposed amendment shall have any force or effect until it has been approved by the Board of Directors of the College. A proposed amendment shall be considered approved if the Board of Directors or its designee fails to give written notice of any objection within 90 days of receipt as documented by the College.

### **Resolution 11 Seating of Past Chairs of the Board in the ACEP Council – Bylaws Amendment**

RESOLVED, That the ACEP Bylaws Article VIII – Council, Section 5 – Voting Rights, paragraph two, be amended to read:

“ACEP Past Presidents, ~~and ACEP~~ Past Speakers, and Past Chairs of the Board, if not certified as councillors or alternate councillors by a sponsoring body, may participate in the Council in a non-voting capacity. Members of the Board of Directors may address the Council on any matter under discussion but shall not have voting privileges in Council sessions.”

### **Resolution 18 ACEP Wellness Center Services**

RESOLVED, That ACEP explore alternative funding opportunities (e.g., use of personal insurance reimbursement and/or sponsorship by third parties) to restore the traditional (and possibly expanded) services available at the Annual Conference Wellness Center; and be it further

RESOLVED, That ACEP explore ways to better promote available resources for the wellness center at the Annual Conference and in general throughout the year.

### **Resolution 22 Funding of Emergency Medicine Training (as amended)**

RESOLVED, That ACEP work with the appropriate organizations to optimize GME funding for all formats of emergency medicine training.

### **Resolution 23 Information Sharing, Regular ACEP/Chapter Contact, and Regional State/Chapter Relationships (as amended)**

RESOLVED, That ACEP work with state chapters to identify, develop, and implement processes that enhance the relationship, optimizing appropriate and timely information sharing; and be it further

RESOLVED, That individual Board members and an appropriate staff member participate in regular contact with state chapters and report back to the Council in 2018

### **Resolution 25 Resolution Co-Sponsorship Memo**

RESOLVED, That the Council Steering Committee develop and promote a standardized format for a “co-sponsorship memo” that can be distributed through the Council listserv or other platform so that councillors may collaborate and further refine resolutions prior to submission.

### **Resolution 26 Study of Locums Physicians Representation (as amended)**

RESOLVED, That the ACEP Board study the impact and potential membership benefit of a new chapter or section representing locums physicians and report back to the Council at the 2018 meeting.

**Resolution 27 9-1-1 Number Access and Prerival Instructions**

RESOLVED, That ACEP create a policy statement supporting 9-1-1 number access to a Public Safety Answering Points for 100% of the U.S. population at next generation 9-1-1 level; and be it further

RESOLVED, That ACEP create and advocate for broad recognition of a policy statement supporting every Public Safety Answering Point or EMS dispatch point be able to give appropriate medical prerival instruction for bystander aid, including CPR and hemorrhage control, and include EMS physician involvement in their creation, implementation, and quality improvement activities; and be it further

RESOLVED, That ACEP work with appropriate stakeholders to inventory and summarize models for 9-1-1 and Public Safety Answering Point funding as a resource for areas in need of increased service levels; and be it further

RESOLVED, That ACEP work with appropriate stakeholders to engage in development of model legislation incorporating enduring funding streams for 9-1-1 call centers/Public Safety Answering Points incorporating key elements including: bringing systems to at least the next generation 9-1-1 level, providing medically appropriate prerival instructions, and incorporating EMS physician involvement in quality oversight, response profiles, and prerival instructions.

**Resolution 28 Coverage for Patient Home Medication While Under Observation Status (as amended)**

RESOLVED, That ACEP support the coverage of all administered medications for patients under observation status without having to apply for reimbursement; and be it further

RESOLVED, That ACEP support a goal that patient out-of-pocket expenses for observation be no greater than the cost to the patient for inpatient services.

**Resolution 29 CPR Training (as amended)**

RESOLVED, That ACEP draft model state legislation and assist chapters in advocating for CPR training in schools; and be it further

RESOLVED, That ACEP work with other stakeholder organizations to advocate for legislation to support CPR training in schools; and be it further

RESOLVED, That ACEP work with other stakeholder organizations to advocate for increased CPR training for laypersons.

**Resolution 30 Demonstrating the Value of Emergency Medicine to Policy Makers and the Public (as amended)**

RESOLVED, That a repository of public relations materials demonstrating the value of emergency medicine, including printed, video, and other information including emergency medicine economic research be assembled on the ACEP web site and such materials would be accessible to all members of ACEP who wish to reach specific target markets; and be it further

RESOLVED, That specific public relations materials regarding the value of emergency medicine be developed for legislators, which would include printed material and materials in various electronic formats; and be it further

RESOLVED, That the ACEP Board of Directors provide a report to the 2018 Council on the development and distribution of public relations materials demonstrating the value of emergency medicine to policy makers and the public.

**Resolution 31 Development and Study of Supervised Injection Facilities (as amended)**

RESOLVED, That ACEP join their partner organization, the American Medical Association, in supporting the development of pilot facilities where people who use intravenous drugs can inject self-provided drugs under medical supervision and endorse Supervised Injection Facilities as an effective public health intervention in areas and communities heavily impacted by IV drug use.

**Resolution 32 Essential Medicines (as amended)**

RESOLVED, That ACEP collaborate with other medical organizations to speak with a unified voice to government agencies and elected officials as to the urgent need for resolution of the on-going crisis of lack of access to emergency drugs; and be it further

RESOLVED, That the ACEP Board of Directors make developing and promoting federal legislation to ensure adequate drug supply of critical medications a priority for ACEP's legislative agenda;

**Resolution 34 Generic Injectable Drug Shortages (as amended)**

RESOLVED, That ACEP work with other medical specialties and patient advocacy groups to achieve consensus on the root cause of the shortage of generic injectable drugs and educate our members, the general medical community, and the public on this critical issue and how to solve it; and be it further

RESOLVED, That ACEP work with other medical specialties and patient advocacy groups to seek Congressional legislative repeal of the Group Purchasing Organizations' safe-harbor protection.

**Resolution 36 Maternity and Paternity Leave (as amended)**

RESOLVED, That ACEP advocate for paid parental leave for emergency physicians; and be it further

RESOLVED, That ACEP develop an information paper on best practices regarding paid parental leave for emergency physicians; and be it further

RESOLVED, That ACEP's Board of Directors report their findings at the 2018 ACEP Council.

**Resolution 39 ACEP Involvement in State Legislative Activities (as amended)**

RESOLVED, That ACEP develop policy that addresses ACEP involvement in state level regulatory and legislative agendas, including direct lobbying efforts, by in coordination with the state chapter and consistent with ACEP policy; and be it further

RESOLVED, That ACEP present a policy that addresses ACEP involvement in state level regulatory and legislative activities for consideration and comment at the 2018 Council meeting.

**Resolution 40 Reimbursement for Emergency Services (as amended)**

RESOLVED, That the policy of many third party payers of denying payment for Emergency Medical Services is in opposition to the prudent layperson definition of an emergency and federal EMTALA laws; and be it further

RESOLVED, That ACEP work with third party payers to ensure access to and subsequent reimbursement for emergency medical care as defined by the prudent layperson definition of an emergency regardless of the initial presenting complaint, final diagnosis, or access to lower levels of care; and be it further

RESOLVED, That ACEP, in order to promote public health and patient safety, continue to uphold federal EMTALA laws by providing a medical screening examination and appropriate medical care to all patients who request emergency services and ACEP will advocate for subsequent reimbursement for such services; and be it further

RESOLVED, That ACEP continue to advocate for our patients to prevent any negative clinical or financial impact caused by the lack of reimbursement for emergency medical services; and be it further

RESOLVED, That ACEP partner with affected states and the American Medical Association to oppose this harmful policy and the denial of payment for emergency services.

**Resolution 43 Expanding ACEP Policy on Workforce Diversity in Health Care Settings (as amended)**

RESOLVED, That ACEP expand its policy statement "Workforce Diversity in Health Care Settings" to help identify and promote inclusion of qualified individuals with additional diverse characteristics (including racial and ethnic diversity, as per existing policy) and amend it to read:

The American College of Emergency Physicians believes that:

- Hospitals and emergency physicians should work together to promote staffing of hospitals and their emergency departments with qualified individuals of diverse race, ethnicity, sex (including gender, gender identity, sexual orientation, pregnancy, marital status), nationality, religion, age, ability or disability, and other characteristics that do not otherwise preclude an individual emergency physician from providing equitable, competent patient care; and
- Attaining diversity with well-qualified physicians in emergency medicine that reflects our multicultural society is a desirable goal.

**Resolution 44 Guidelines for Opioid Prescribing in the ED**

RESOLVED, That ACEP encourage electronic medical record providers to incorporate easy-to-use Prescription Monitoring Programs functionality into their products; and be it further

RESOLVED, That ACEP strongly discourage mandates for screening all emergency department patients for opioid use; and be it further

RESOLVED, That ACEP promote development of national guidelines to assist emergency physicians in their practice of prescribing opioids for acute pain.

**Resolution 49 Participation in ED Information Exchange and Prescription Drug Monitoring Systems**

RESOLVED, That the American College of Emergency Physicians collaborate with the Department of Veterans Affairs, Department of Defense, the Indian Health Services, and potentially legislatures to encourage and facilitate their participation in state prescription drug monitoring programs; and be it further

RESOLVED, That the American College of Emergency Physicians collaborate with the Department of Veterans Affairs, Department of Defense, the Indian Health Services, and potentially legislatures, to encourage and facilitate their participation, to the extent consistent with federal law, a system for real-time electronic exchange of patient information, including recent emergency department visits and hospital care plans for frequent users of emergency departments.

**Resolution 51 Retirement or Interruption of Clinical Emergency Medicine Practice**

RESOLVED, ACEP study and evaluate mechanisms to support practicing emergency physicians to help recognize potential physical and emotional limitations to clinical practice, to educate members about alternatives and opportunities for temporary interruption of active clinical practice to include mechanisms for reintegration back into clinical practice, and to support members considering career transitions including retirement; and be it further

RESOLVED, That ACEP actively engage in developing resources and communication of career transition opportunities to members, including support for members who believe they are being restricted from practice for discriminatory reasons as outlined and regulated by established federal equal employment opportunity discrimination laws.

**Resolution 52 Support for Harm Reduction and Syringe Services Programs**

RESOLVED, That ACEP endorse Syringe Services Programs for those who use injection drugs; and be it further

RESOLVED, That ACEP promote the access of Syringe Services Programs to people who inject drugs; and be it further

RESOLVED, That ACEP invest in educating its members on harm reduction techniques and the importance of Emergency Departments to partner with local Syringe Services Programs to advance the care of people who inject drugs.

**Resolution 55 Workplace Violence (as amended)**

RESOLVED, That ACEP move past policy creation and simple awareness campaigns with state and national regulatory agencies to develop actionable guidelines and measures (e.g., percent of events with legal outcome, paid post-trauma leave, use of de-escalation techniques, counseling provided), to ensure safety in the Emergency Department for patients and staff; and be it further

RESOLVED, That ACEP work with local, state, and federal bodies to provide for appropriate protections and enforcement of violations of Emergency Department patient and staff protections from violence in the workplace to provide safe and efficacious emergency care; and be it further

RESOLVED, That ACEP create model legislative and regulatory language that can be shared with state chapters and hospitals addressing workplace violence

**Resolution 56 In Memory of Robert E. Blake, MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions made by Robert Eugene Blake, MD, FACEP, as one of the leaders in the medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of Robert Eugene Blake, MD, FACEP, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine and to the patients and physicians of West Virginia and the United States.

**Resolution 57 In Memory of James H. Creel, Jr., MD, FACEP**

RESOLVED, That the American College of Emergency Physicians fondly remembers and honors the many contributions of James H. Creel, Jr., MD, FACEP, one of the truest pioneers and leaders in emergency medicine and emergency medical services; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of James H. Creel, Jr., MD, FACEP, his colleagues, friends, residents, staff, and students our heartfelt condolences and gratitude for his tremendous accomplishments, devotion, and service to the specialty of emergency medicine, the State of Tennessee, and the United States of America.

**Resolution 58 In Memory of Paul Berger, Jr., MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions by Paul Berger, Jr, MD, FACEP, as one of the leaders in emergency medicine, EMS, and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to his wife Lanie Berger, his son Paul Berger, III, DO, his friends, and his colleagues our deepest sympathy and our gratitude for having been able to learn so much from a kind, gentle, caring leader in emergency medicine and gratitude for his tremendous service to the specialty of emergency medicine and the State of Iowa.

**Resolution 59 In Memory of William Wilkerson, Jr., MD, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude and honors the many contributions made by William Wilkerson, Jr, MD, FACEP, as one of the leaders in emergency medicine and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of William Wilkerson, Jr, MD, FACEP, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine and to the patients and physicians of Michigan and the United States.

**Resolution 60 Commendation for First Responders to 2017 Hurricanes**

RESOLVED, That ACEP recognizes all ACEP members, staff, and their families that were involved in the response to Hurricanes Harvey, Irma, and Maria and commends the significant commitment they have made to the ideals of emergency medicine and the service provided to the people in the States of Texas, Louisiana, and Florida and the territories of Puerto Rico and the United States Virgin Islands.

**Resolution 61 In Memory of Michael G. Guttenberg, DO, FACEP**

RESOLVED, That the American College of Emergency Physicians remembers with gratitude the many contributions made by Michael G. Guttenberg, DO, FACEP, FACOEP, FAEMS, as one of the leaders in emergency medicine and the greater medical community; and be it further

RESOLVED, That the American College of Emergency Physicians extends to the family of Michael G. Guttenberg, DO, FACEP, FACOEP, FAEMS, his friends, and his colleagues our condolences and gratitude for his tremendous service to the specialty of emergency medicine and to the patients and physicians of New York State and the United States.