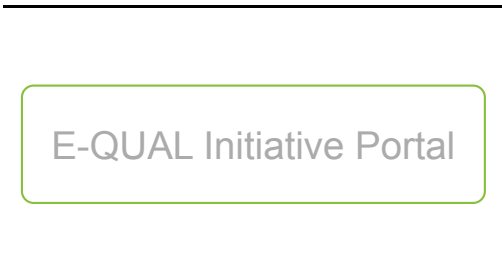


May 22, 2019 | Volume 4 | Issue 5



## E-QUAL Learning Collaboratives

[Sepsis](#) | [Avoidable Imaging](#) | [Chest Pain](#) | [Opioid](#)



Please continue completing your portal activities.

Questions?  
Contact the [E-QUAL Team](#)



The landscape of emergency medicine and acute care transforms daily and changes can be difficult to predict. But the American College of Emergency Physicians – the leaders in emergency medicine innovation – are charging strong into the future. Join us.

Gain insight into the emergency physician's perspective on technology of the future, and align your roadmap to our vision at this FREE collaboration of industry thought-leaders.

Help develop a 10-year vision for the future of emergency medicine and a tactical 3-year roadmap, and become ACEP's partner as we revolutionize care.

Scanning the horizon, we will work together to improve:

- Interoperability and data liquidity
- EHR usability and workflow
- Big data and what it means in Emergency Medicine

**Date: July 8, 2019 | Time: 7:00 AM - 5:00 PM CDT**  
**Location: ACEP's National Headquarters in Irving, TX**  
**(right next to DFW)**

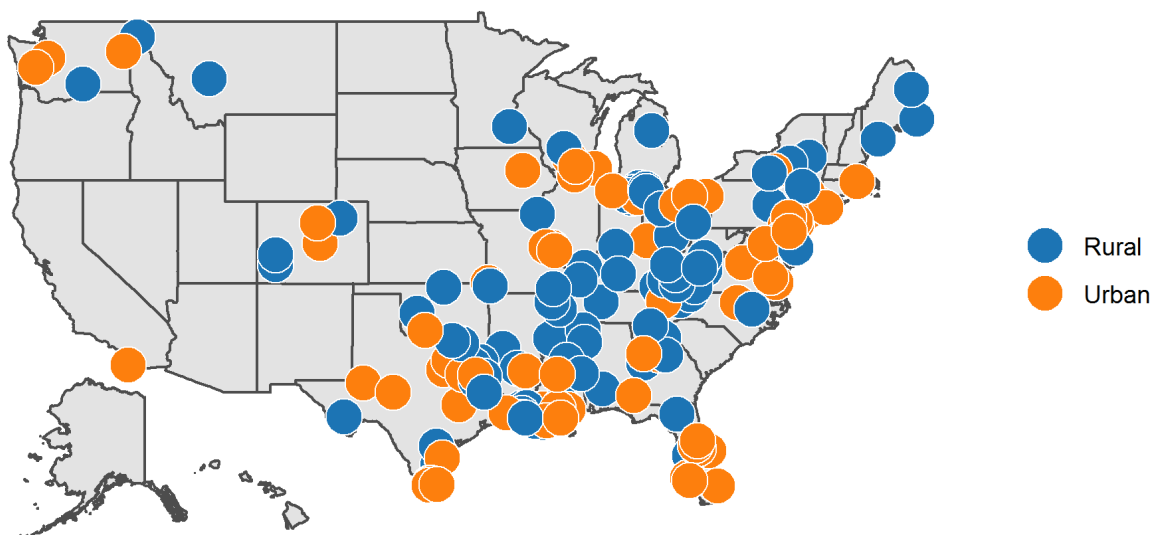
[HIT '19 Homepage & Registration](#)

## ED Innovations 2019

E-QUAL and CEDR jointly presented a poster at the recent ED Innovations 2019 conference titled Engaging, Empowering and Elevating Data-Driven Quality in Emergency Medicine.

### [ED Innovations Poster](#)

## Honor Roll Recognition



E-QUAL proudly recognizes **top performing** and **most improved** EDs from our 2018 collaboratives.

Visit the E-QUAL Honor Roll page to view recognized sites and the selection criteria for each category.

### [E-QUAL Honor Roll](#)

## Toolkit & Educational Content

**Sepsis**

**Avoidable  
Imaging**

**Chest  
Pain**

**Opioid**

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[Webinars](#)  
[Podcasts](#)  
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**Quality Tip of the Month**





“Patients who present to the emergency department in opioid withdrawal are suffering and vulnerable to dangerous addiction harms if symptoms are not managed effectively. There are a multitude of non-opioid therapies that have been traditionally used to treat opioid withdrawal that can be used in combination to improve symptoms, but non-opioid treatments do not address the underlying problem, do not mitigate cravings, and often result in prolonged ED lengths of stay and return visits. Optimal ED management takes advantage of the occasion of opioid withdrawal to initiate the best therapy for opioid addiction: medication assisted treatment with buprenorphine.”

*Reuben Strayer, MD*

*Maimonides Medical Center*

## Frequently Asked Questions



[View the FAQ page](#) | [Download the Portal Access Guide](#)

If you have questions regarding your collaborative, please be sure to reference these resources. If your site's questions are not answered, please reach out to the [E-QUAL team](#).

Click [here](#) if you are having trouble viewing this message.

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