



 American College of  
Emergency Physicians®  
*ADVANCING EMERGENCY CARE* 

**2018**

A N N U A L R E P O R T



Caring. Courageous. Committed.  
These are the faces of emergency medicine.  
These are the faces of ACEP.



# Letter from Leadership

When a profession evolves as quickly as ours, it can be easy to lose sight of where it all began. Marking our 50th anniversary in 2018 afforded us the opportunity to pause, reflect and appreciate five decades of advancing emergency medicine. Looking back at ACEP's rich history reminds us that our profession was built on the backs of tenacious, tireless leaders who laid the path for our specialty to become what it is today.

As we compiled this annual report, we did so with appreciation for the past and an eye toward the future. The past 50 years have been an incredible, rapid ascent, and we've only just begun.

We know you face challenges in the current health care environment, and ACEP is dedicated to protecting your interests and making it easier for you to provide the highest quality care for your patients. We have a strong, unified voice in Washington, D.C. that passionately advocates on your behalf. In 2018, emergency medicine had a seat at the table, providing input to policymakers about dangerous insurance policies, drug shortages, the opioid crisis and alternative payment models.

Your member dues are funneled into valuable initiatives that move the profession forward, from clinical policies and educational resources to bedside tools and beyond. We're listening to your concerns and developing new educational opportunities to support your daily practice, like the first EM-specific MAT training. We're addressing your changing patient populations with new bedside tools to help you with problems specific to the elderly patient, the suicidal patient and the agitated patient. We're publishing a library of valuable journals, magazines and newsletters that give you just-in-time clinical and career information.

With 50 years under our belt, we want to use what we've learned to continue pushing for progress. We'll continue to navigate the changing health care system by advocating fiercely for our specialty and your career.

As we move into the next half-century, we thank you for the work you do every single day. We know our progress is made possible by thousands of members who volunteer their time to serve on committees, create resources, review journal papers, develop programming, and so much more.

While you're busy caring for others, we're honored to care for you.



A handwritten signature in black ink, appearing to read "Vidor E. Friedman". The signature is fluid and cursive.

Vidor E. Friedman, MD, FACEP  
ACEP President



A handwritten signature in black ink, appearing to read "Dean Wilkerson". The signature is fluid and cursive.

Dean Wilkerson, JD, MBA, CAE  
ACEP Executive Director

# We Believe

Quality emergency care is a fundamental right and unobstructed access to emergency services should be available to all patients who perceive the need for emergency services.

There is a body of knowledge unique to emergency medicine that requires continuing refinement and development.

Physicians entering the practice of emergency medicine should be residency trained in emergency medicine.

Quality emergency medicine is best practiced by qualified, credentialed emergency physicians.

The best interests of patients are served when emergency physicians practice in a fair, equitable, and supportive environment.

Emergency physicians have the responsibility to play the lead roles in the definition, management, evaluation, and improvement of quality emergency care.



American College of  
Emergency Physicians®

ADVANCING EMERGENCY CARE 

# Our Mission

*The American College of Emergency Physicians promotes the highest quality of emergency care and is the leading advocate for emergency physicians, their patients, and the public.*



# Emergency Physicians, Unified

For 50 years, ACEP has been working to unite and amplify the collective voice of emergency physicians around the world.

In honor of our golden anniversary, we set an aggressive agenda for 2018 that pushed the profession forward while honoring our rich history.



Let's take a look back at ACEP's  
standout moments from 2018. 





In honor of our golden anniversary, ACEP celebrated five decades of professional progress.

## Museum of Emergency Medicine

Nicholas J. Jouriles, MD, FACEP, chair of ACEP's 50th Anniversary Task Force, led the effort to create an interactive museum experience for ACEP18 attendees that chronicled the exponential growth of emergency medicine practice. The museum featured separate exhibits celebrating each decade of EM history, chapter growth, women in the profession, disaster preparedness and more. The festivities included an AI virtual docent, trivia contest, a golden ticket drawing for valuable prizes, book signings, panel discussions with historical leaders and more.

[www.acep.org/50years](http://www.acep.org/50years)



## Anniversary Task Force

We gratefully acknowledge the ACEP members who worked tirelessly to make our anniversary year a success:

- Nancy J. Auer, MD, FACEP
- Pamela P. Bensen, MD, MS, FACEP
- Andrew I. Bern, MD, FACEP
- Mark Brady, MD, MPH, MMS, DTM&H, FACEP
- Michael J. Bresler, MD, FACEP
- Lisa M. Bundy, MD, FACEP
- Michael L. Callahan, MD, FACEP
- Jordan Celeste, MD, FACEP
- Nida Degesys, MD
- Marsha D. Ford, MD, FACEP
- Kelly Gray-Eurom, MD, MMM, FACEP
- Taj Hassan, MD
- Gregory L. Henry, MD, FACEP
- Zachary J. Jarou, MD
- Nicholas J. Jouriles, MD, FACEP
- Christopher S. Kang, MD, FACEP
- Chadd K. Kraus, DO, DrPH, MPH, FACEP
- Col. (ret.) Linda L. Lawrence, MD, FACEP
- Wendy Ann Lucid, MD, FACEP
- Donald L. Lum, MD, FACEP
- Gen. Lee E. Payne, MD, FACEP
- Debra G. Perina, MD, FACEP
- Paul R. Pomeroy, Jr., MD, FACEP
- Leonard M. Riggs, Jr., MD, FACEP
- Donald E. Stader, MD, FACEP
- James D. Thompson, MD, FACEP
- Arlo F. Weltge, MD, MPH, FACEP
- Brian J. Zink, MD, FACEP





## History of Military Emergency Medicine

ACEP's Government Services Chapter traced the evolution of military medicine with a living walk-through museum at ACEP18. The interactive exhibits featured lifelike depictions of trauma platoon tents equipped for patient care, the evolution of portable ultrasound and the history of tourniquets. Visitors could speak with Critical Care Air Transport Team emergency physicians and attend 10-minute mini-lectures on the unique history of military emergency medicine.

## Commemorative Books

In honor of our golden anniversary, ACEP produced two books honoring the profession's history and hosted book signings during ACEP18.

- *Anyone, Anything, Anytime – A History of Emergency Medicine* (2nd Edition) by Brian J. Zink, MD, FACEP
- *Bring 'em All: Chaos. Care. Stories from Medicine's Front Line*, images by Eugene Richards



## Special Edition

ACEP Now commemorated our 50th anniversary with a year-long content series celebrating different aspects of emergency medicine's history and evolution, culminating with a special commemorative issue. Visit [acepnow.com/fifty](http://acepnow.com/fifty) to view the content series and read the anniversary issue.

## Titan Talks

ACEP18 played host to several panel discussions with luminaries and titans of EM, highlighting the personal stories of those who had a front row seat to the profession's birth and evolution. Speakers included:

- Nancy J. Auer, MD, FACEP
- Pamela P. Bensen, MD, MS, FACEP
- Brooks F. Bock, MD, FACEP
- Rudenz (Rudy) T. Douthat, MD, FACEP
- Peter M. Fahrney, MD, FACEP
- Stanley R. Gold, MD, FACEP
- Gregory L. Henry, MD, FACEP
- Nicholas J. Jouriles, MD, FACEP
- Arthur L. Kellermann, MD, MPH, FACEP
- Col. (ret.) Linda L. Lawrence, MD, FACEP
- Paul R. Pomeroy, Jr., MD, FACEP
- A.J. Reed, MD
- Leonard M. Riggs, Jr., MD, FACEP
- Samuel C. Slimmer, Jr., MD, FACEP
- Ronald D. Stewart, MD, FACEP
- Judith E. Tintinalli, MD, MS, FACEP
- Jesse A. Weigel, MD, FACEP
- Arlo F. Weltge, MD, MPH, FACEP

## Memorable Moments

ACEP hosted a contest for emergency physicians to share their most memorable moments in the profession. Read the winning entries at [www.acep.org/who-we-are/50Years/WhatsYourMoment](http://www.acep.org/who-we-are/50Years/WhatsYourMoment).

### First Place

**Stephanie B. Benjamin, MD**  
Fresno, California

### Second Place

**Eligio S.V. Maghirang, MD**  
Manila, Philippines

### Third Place

**Brian K. Sloan, MD, FACEP**  
Zionsville, Indiana

### Fourth Place

**Jeffrey D. Lazar, MD**  
Scarsdale, New York

### Fifth Place

**Laura Janneck, MD, FACEP**  
Boston, Massachusetts

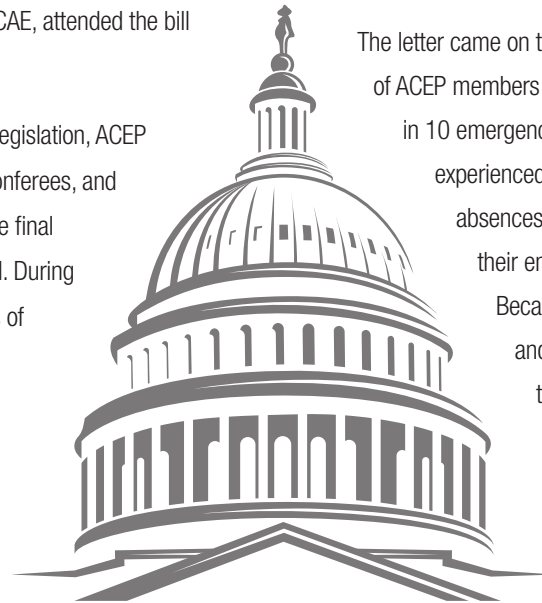


## Key Federal Issues

### A Leading Voice on the Opioid Crisis

When President Donald Trump signed the SUPPORT for Patients and Communities Act into law on October 24, it was evidence of ACEP's efforts to ensure emergency physicians are equipped with the tools they need to fight the opioid epidemic from both a prevention and treatment standpoint. The legislative package included two ED-specific provisions ACEP worked to develop that would authorize grants to expand the Alternatives to Opioids (ALTO) program and the ED-initiated Medication Assisted Treatment (MAT) programs. It included best practices for providing a "warm handoff" of opioid use disorder patients to appropriate community resources and providers to keep them engaged in addiction treatment. ACEP Executive Director Dean Wilkerson, MBA, JD, CAE, attended the bill signing at the White House.

Throughout the many months of Congressional activity on this legislation, ACEP worked closely with congressional leadership, House-Senate conferees, and the bill sponsors to ensure these provisions were included in the final package and the ACEP-preferred legislative language was used. During the ACEP Leadership & Advocacy Conference in May, hundreds of our members advocated for these provisions during Capitol Hill visits with legislators and staff. Even more ACEP members in the 911 Network contacted their legislators about these bills by responding to action alerts.



### Addressing Drug Shortages

In response to the nation's ongoing and worsening drug shortage crisis, ACEP took the lead in efforts to urge Congress to write a letter to the Food and Drug Administration requesting the formation of a new Drug Shortages Task Force. The Task Force is meant to determine the root causes of drug shortages and develop recommendations for Congress to address them. With the help of emergency physician advocates at the ACEP Leadership & Advocacy Conference and through the 911 Network, the bipartisan letter to the FDA was signed by more than 100 members of the House of Representatives and more than 30 members of the Senate.

The letter came on the heels of a survey of ACEP members showing that nine in 10 emergency physicians have experienced shortages or absences of critical medicines in their emergency departments.

**9 in 10**  
emergency physicians  
have experienced  
drug shortages

Because of the letter and ACEP's advocacy, the FDA announced less than 60 days later the formation of the new Drug Shortages Task Force. Meetings convened by the Task Force are already well underway, and ACEP leaders have been participating.





## Battling Dangerous Insurance Policies

On July 17, ACEP and the Medical Association of Georgia filed suit against Anthem's Blue Cross Blue Shield of Georgia (BCBS) in federal court in an effort to compel the insurance giant to rescind its controversial and dangerous emergency care policy that retroactively denies coverage for emergency patients. BCBS of Georgia's policy makes subscribers pay for any emergency department visit that turns out not to be classified as an emergency, violating the prudent layperson standard, which is codified in federal law, including the Affordable Care Act. There are 47 states with a prudent layperson standard.

Over the past year, Anthem implemented its policy in Georgia and five other states, leaving patients who sought emergency care responsible for paying their entire bills if the insurance company determined retrospectively that their diagnoses were not true emergencies. Along with Georgia, the other states include Indiana, Kentucky, Missouri, New Hampshire and Ohio.



**Fair Coverage Media Kit**

- Press Releases
- Insurers Deny ER Care Fact Sheet
- Infographics
- Audio News Release
- In The News

ACEP developed a media kit, videos and other advocacy tools to help lead the effort to raise awareness about this unlawful policy. They are available at [www.faircoverage.org](http://www.faircoverage.org). Included on the website is a petition and a place for patients to submit their personal stories about being denied coverage for an emergency visit. These efforts have led to coverage of the harmful policy by major outlets, including *The New York Times*, Vox, and NBC Nightly News.

## Developing the First Emergency Medicine-focused Alternative Payment Model

On Sept. 6, the Physician-Focused Payment Model Technical Advisory Committee (PTAC) recommended an ACEP-proposed Alternative Payment Model (APM) for full implementation to Secretary of Health & Human Services Alex Azar. Developed by ACEP with a task force of emergency physician members, it was presented to the PTAC by ACEP members Randy Pilgrim, MD, FACEP; Sue Nedza, MD, MBA, FACEP; and Jeff Bettinger, MD, FACEP.

**The Acute Unscheduled Care Model is the first proposed payment model that gives emergency physicians a leading role when it comes to accountability for patient care and care coordination.**



## ACEP's 2018 Advocacy By the Numbers (as of November 15, 2018)

# 4

emergency  
medicine-focused  
bills signed into law

# 10

regulatory  
comment letters  
submitted

# 30

Congressional letters  
of support or comment  
submitted

# 555

legislative visits  
conducted by ACEP  
members and staff

# 4,000+

members in the ACEP 911 Legislative  
Grassroots Network, who respond  
to advocacy alerts when needed by  
ACEP by emailing their members  
of Congress on a particular issue of  
concern to emergency medicine.

**This network covers 95% of  
Congressional districts.**

**Learn more about our legislative efforts at [acep.org/advocacy](http://acep.org/advocacy).**



In 2018, NEMPAC contributed more than \$2 million to:

# 200

House Candidates



# 27

Senate Candidates

In 2017, NEMPAC raised

# \$1,121,241

# 7.5%

INCREASE FROM THE  
2016  
AMOUNT RAISED

and, for 2018, raised more than

# \$1,000,000

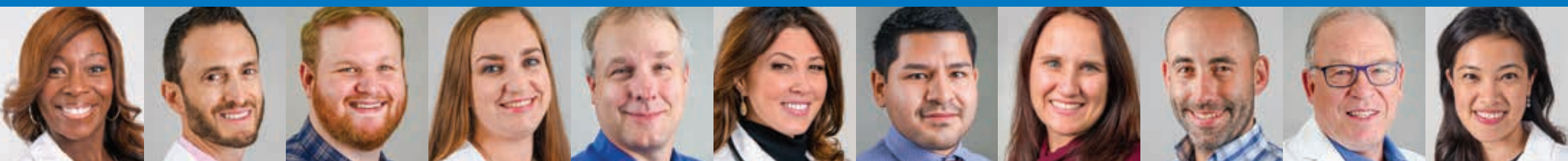


# 5,215

DONORS

**4<sup>th</sup> LARGEST**  
PHYSICIAN SPECIALTY PAC

**5<sup>th</sup> LARGEST**  
HEALTH CARE PROFESSIONAL PAC





**Viral Video Campaign Views**  
**600,000**

Campaign for Fair Insurance

The campaign for fair insurance coverage addressed the dangerous Anthem policy and included two viral video campaigns that generated more than 600,000 views.



**Poll Responses**  
**3,500**

Violence in Emergency Medicine Poll

More than 3,500 emergency physicians responded to the violence in emergency departments poll, our highest response ever, and the results generated media coverage from NBC News, NPR, *The Boston Globe*, Health Day, Kaiser Health News, CBS Boston and Fox News local affiliates across the country.



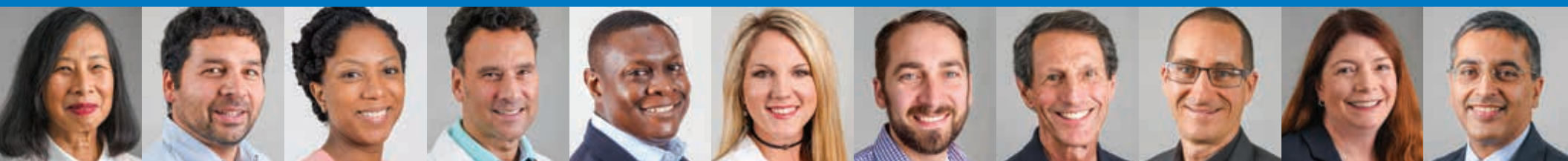
**Radio Station Airings**  
**4,442**

Disaster Preparedness/Drug Shortages Campaign

The disaster preparedness/drug shortages campaign advocated for passage of the reauthorization of the Pandemic and All Hazards Preparedness Act. Communication tools included a press release, talking points, web pages, a poll results report, an infographic and an audio news release, which aired 4,442 times on radio stations across America. It generated news stories on CBS News, Health Day, WebMD, Fierce Healthcare and NBC News affiliates across the country.

## Promoting emergency medicine

ACEP's public relations team promotes the vital role of emergency medicine in the health care system. In 2018, we conducted major media campaigns focused on disaster preparedness/drug shortages, fair insurance coverage and emergency department violence.



## Using social media to advance our mission

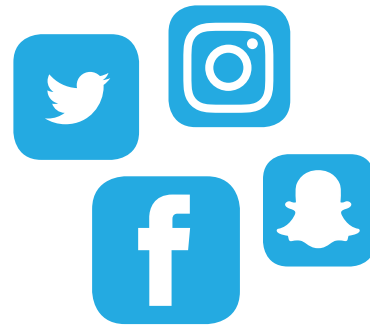
Social media is changing the way we practice medicine and advocate for our patients. Want to engage directly with politicians and ACEP leaders? Want some support after a tough shift? Get all that and more by getting plugged in on social media.



**↑653%**

### Join the Conversation

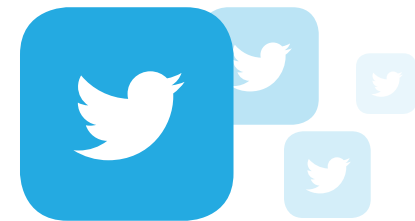
Engagement with ACEP social media channels is up 653 percent compared to 2017, and advocacy-oriented hashtags such as #FairCoverage are up more than 1,000 percent. Join the conversation on social media by following us on Twitter (@ACEPnow, @emergencydocs), Facebook (@ACEPfan), Instagram (@ACEPnation) and Snapchat (@ACEPnation).



**+18,000**

### ACEP Social Media Channels

More than 18,000 new followers started engaging with ACEP social media channels, using Twitter, Facebook, Instagram and Snapchat to stay plugged into the medical conversations happening across the world. ACEP hosts daily "What's the Dx?" from real case reports and Friday GIF parties that always bring the laughs.

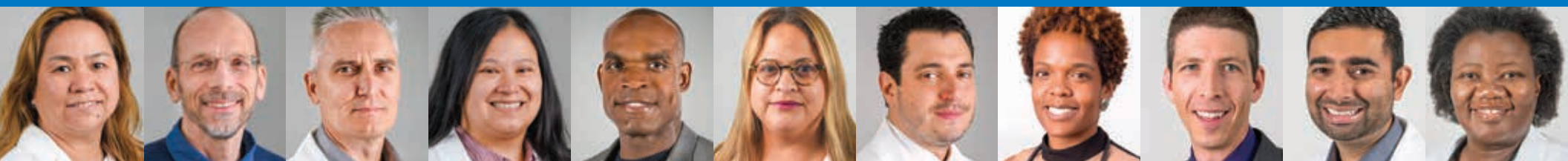


#LAC18 impressions:  
**15,000,000**

#ACEP18 impressions:  
**63,000,000**

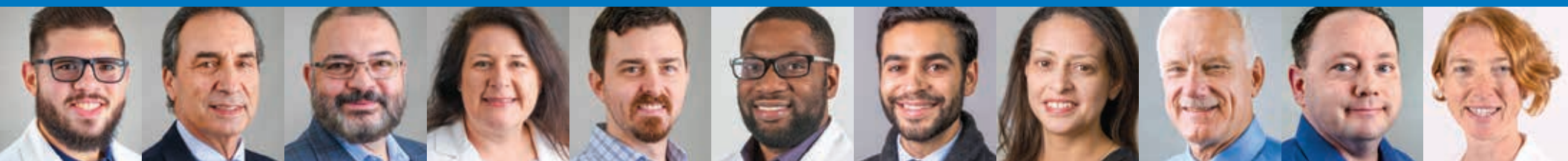
### #LAC18 and #ACEP18

ACEP events continue to grow huge audiences on Twitter, with 15 million impressions for #LAC18 and 63 million impressions for #ACEP18.



## Collaborating with other health care groups to advance patient care

We believe in strength in numbers and working together with our peers to push for quality patient care. These are just a few of the collaborations that helped us move the needle in 2018.





Our Clinical Emergency Data Registry (CEDR) is the first emergency medicine specialty-wide registry. CEDR allows for a single data capture to fulfill the requirements of multiple programs, making your quality measure reporting more efficient. It launched in 2015 and has continued to be implemented in phases. CEDR is evolving with the changing Quality Payment Program (QPP), supporting multiple approaches to data acquisition and scoring that maximize CMS scoring and financial rewards for participants. CEDR branched out in 2018 to include support for research programs including geriatric emergency medicine and the opioid epidemic. We have started leveraging the CEDR data acquisition to build an emergency medicine research platform.

## 2018 CEDR: By the Numbers

**175** Practice Groups    **750** Emergency Departments    **12,000** Clinicians

**20,000,000** Visits

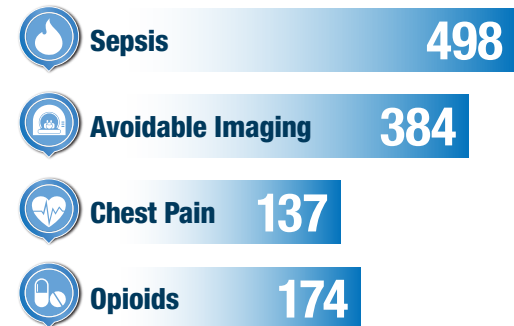
## E-QUAL

### EMERGENCY QUALITY NETWORK

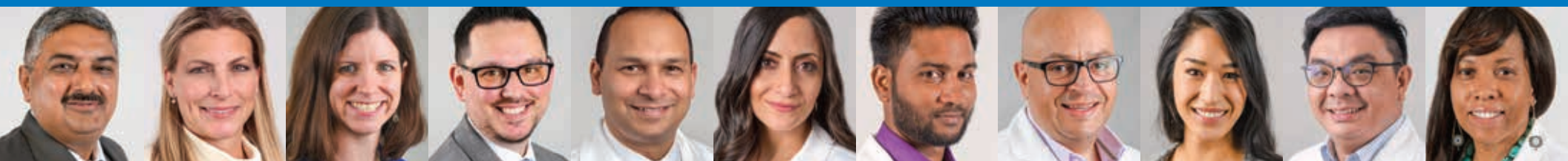
ACEP's E-QUAL Network offers learning collaboratives in four key areas to demonstrate the value of emergency care:

- Improving outcomes for patients with sepsis
- Reducing avoidable imaging in low-risk patients through implementation of ACEP's Choosing Wisely recommendations
- Improving the value of ED evaluation for low-risk chest pain by reducing avoidable testing and hospital admissions
- Reducing opioid-associated harm through safer prescribing and the implementation of evidence-base interventions

## 2018 E-QUAL Emergency Department Site Engagement:



● Rural, CAH, or Safety Net  
● Not Rural, CAH, or Safety Net





The Emergency Medicine Foundation strives to be the principal sponsor of scientifically rigorous research and education that improves the care of the acutely ill and injured.

**\$1.2 million**

awarded to 35 grantees in 2017-18 fiscal year

**\$712,357**

received from individual donors

**\$400,934**

received from corporate and Foundation donors

**\$481,000**

Partnered grant revenue

**EMF is growing an endowment**

to support emergency medicine research now and in the future. To date, the endowment is valued at approximately

**\$3.4 million**

Improving Practice, Cultivating Investigators

A recent study found that 68 percent of U.S. human trafficking survivors reported they “saw a doctor,” the majority of whom were emergency medicine professionals. With the support of an EMF Career Development Grant, Makini Chisolm-Straker, MD, MPH, is working to develop a tool that would enable emergency physicians to quickly screen and refer these vulnerable patients.

“EMF is the only organization that spans the many different diseases and organ systems and harnesses the innate creativity of EM physicians. Like so many researchers, I am not only a recipient, but also a donor to EMF because I believe in the mission.”

– Alexander T. Limkakeng, Jr., MD, MHSc, FACEP, Vice Chief of Research, Director, Acute Care Research, Division of Emergency Medicine, Duke University School of Medicine

The Wiegenstein Legacy Society

Named in honor of ACEP founder John Wiegenstein, MD, WLS is made up of 96 individuals and their families who have included EMF in their estate plans.

**WLS gifts are valued at \$2.4 million**



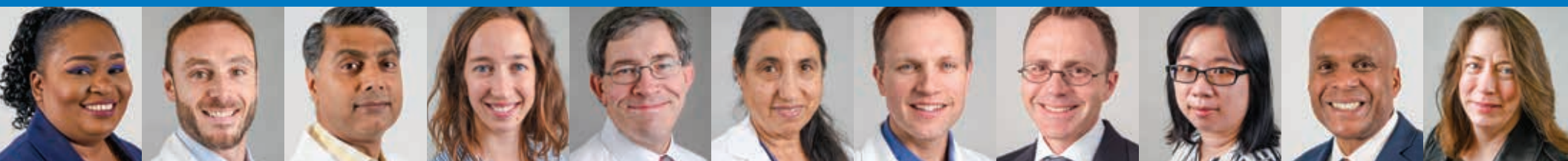
Our annual Research Forum presents original research related to emergency medicine by investigators in clinical and basic science. Abstracts go through blind peer review.

**901**

abstracts submitted

**412**

abstracts accepted for presentation



ACEP is dedicated to providing quality education for emergency physicians in a variety of formats so that all members can stay abreast of best practices and provide the highest quality patient care.



Featuring a slate of world-renowned faculty, engaging networking events and special 50th anniversary celebrations, it's no wonder that ACEP18 set our all-time attendance record!

## 7,479 Attendees

### 389

Exhibiting Companies

### 363

Educational Sessions

### 26.25

CME hours available per attendee



## Leadership & Advocacy Conference

Every year, ACEP hosts a health care advocacy conference combined with legislative visits that allow emergency physicians to personally advocate on behalf of the profession, putting a face to some of the important health care issues being debated by the Federal government. LAC18 was one of our largest and most successful advocacy conferences ever.

## 738 Attendees

### 363

Legislative visits conducted by 512 ACEP members







Advanced  
**Pediatric  
 Emergency  
 Medicine**  
 Assembly

PEM provides the most comprehensive pediatric emergency education for a wide range of specialists.

## 393 Attendees



ACEP/CORD  
**Teaching  
 Fellowship**

### 40

Completed  
 the Teaching  
 Fellowship  
 2017-18  
 Class 1

### 44

Completed  
 the Teaching  
 Fellowship  
 2017-18  
 Class 2

### 29

Completed  
 the Resident's  
 Teaching  
 Fellowship in  
 March 2018

## ACEP Addresses the Opioid Epidemic

While emergency physicians are not the cause of the opioid epidemic, they *can* be part of the solution. Emergency physicians now have options for pain control that do not involve opioids. Because patients with opioid use disorders often present to the emergency department, emergency physicians can help treat patients for their opioid use. In many states, emergency physicians can prescribe up to three days of buprenorphine, but physicians are required to complete eight hours of Medication Assisted Treatment (MAT) training to apply to the Drug Enforcement Agency for a waiver to prescribe it. ACEP provided the required MAT Training at ACEP18 and is in the process of creating the first-ever MAT training program specific to emergency physicians. That course will be available to our members in conjunction with the Leadership & Advocacy Conference in May 2019.

## New and Improved MOC Center

In December, we launched a redesigned MOC Center that's a one-stop-shop to keep track of all things MOC.

### Lifelong Learning and Self Assessment

It's the only place to find ALL of the LLSA articles you need, plus summaries. You can also access reading lists for EMS, Med Tox, Ped EM, CDEM and more.

### Improvement in Medical Practice

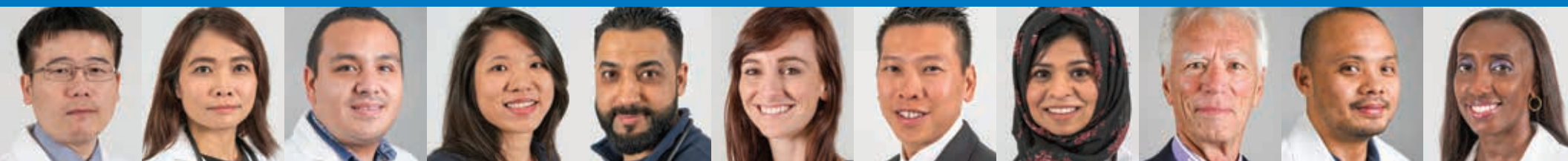
ABEM-certified physicians can satisfy a current IMP requirement by completing our Pediatric Readiness of EDs activity.

### ConCERT Exam

Access PEER, the gold standard exam resource for emergency medicine. We're developing new test experiences within PEER to help diplomates prepare for the recently announced alternative, MyEMCert.

### Professionalism and Professional Standing

Access a directory of state medical boards, plus our map that shows the CME required by each state's medical board.



## Improving Patient Care

It's your job to care for whoever walks into your emergency department. It's our job to care for **you**. ACEP's mission is to provide our members with the resources and benefits you need to help you feel supported in work and life.

### New Consensus Practice Guideline

- **Unscheduled Procedural Sedation** was developed in response to an ASA guideline that would have made it difficult for emergency physicians to provide appropriate care. ACEP organized a multidisciplinary advocacy and educational effort to create this guideline, which differs in important ways from scheduled, elective procedural sedation.

### New Clinical Policies

- Critical Issues in the Evaluation and Management of Adult Patients Presenting to the Emergency Department With Suspected Acute Venous Thromboembolic Disease
- Critical Issues in the Evaluation and Management of Emergency Department Patients With Suspected Non–ST-Elevation Acute Coronary Syndromes

### Bedside Tools

Three helpful tools were released in 2018:

- ADEPT** – Confusion and Agitation in the Elderly ED Patient
- ICARE** – A tool for managing suicidal patients in the ED
- MAP** – Managing Acute Pain in the ED

Other topics covered by the bedside tools include emergency conditions in bariatric patients, assessment of suicidality and opioid alternatives. Work is underway to make these bedside tools available through an app.

## Disaster Management

ACEP continues to facilitate and organize resources related to disaster response. We update our website and the EMS and Disaster Department microsite with established, nationally-recognized volunteer groups and volunteer opportunities and contact information. Our resources include hospital patient surge information, the Disaster Hero game for family preparedness and response, a disaster toolkit for the elderly and special needs and other pertinent information. For every disaster or emergency, we compile local, regional and state resources tailored for the disaster type and geographic area.

- California wildfires
- Hurricane Michael
- Hurricane Florence
- Tropical Storm Lane
- Indonesia Earthquake and Tsunami
- Super Typhoon Mankhut
- Alaska earthquake

## Accreditation Programs

**23**  
GEDA-accredited programs to date

**160**  
sites have expressed interest in applying

as of November 2018

**ACEP's Geriatric Emergency Department Accreditation (GEDA) program** is a national accreditation organization that strives to improve the care of older people presenting to the emergency department. This accreditation system promotes the goals of quality of care for older people: enhanced staffing and education; geriatric-focused policies and protocols including transitions of care; quality improvement and metrics; and optimal preparation of the physical environment.

**41**  
CUAP-accredited programs to date

**The Clinical Ultrasound Accreditation Program (CUAP)** is an ACEP-governed national accreditation program with an understanding of clinical bedside ultrasound and a purpose of establishing a system of review for emergency departments performing clinical, point-of-care ultrasound. This accreditation system promotes the goals of quality, patient safety, communication, responsibility, and clarity regarding the use of clinical ultrasound.



## Member Benefits: Resource Library



### Annals of Emergency Medicine

the largest circulation peer review journal in emergency medicine

**1.8 million**

Full text downloads, with more than half going to an international audience\*

**103,641**

Podcast downloads\*

**5.008**

2017 Impact Factor (top 6%)

**↑25%**

Increase in media impressions from 2016-17.

\*in 2017 and first half of 2018



### ACEP Now

must-read monthly membership magazine covering all aspects of being an emergency physician

Alister Martin, MD, and Nathan Max Kunzler, MD, won an

**APEX Award of Excellence**

for *Opioids: Our Public Health Crisis*

**↑49%**

more users visited [acepnow.com](http://acepnow.com), the magazine's companion website

**#1**

According to a range of Kantar media metrics, *ACEP Now* is top-ranking in the emergency medicine specialty.

**EM Today:** More than 24,000 physicians receive these daily, members-only email newsletters for a quick overview of current news in emergency medicine.

**Weekend Review:** More than 42,000 subscribers kick off their Saturdays by receiving this weekly summary of current EM news.

**ACEP eNow:** Approximately 31,000 members subscribe to this weekly newsletter from *ACEP Now* magazine featuring bonus online content.

**911 Report:** More than 4,000 members are part of the ACEP 911 Legislative Grassroots Network, who respond to advocacy alerts when needed by ACEP by emailing their members of Congress on a particular issue of concern to emergency medicine. Joining this network subscribes them to the *911 Report*, a weekly e-newsletter focused on legislative issues relevant to emergency medicine.

### Each year, a 911 Network Member of the Year is selected

from among the most active advocates in the network based on an accrued point system which includes attending events, hosting ED visits, responding to action alerts and recruiting new members to the network.

### The 2018 winners were

**Jonathan Heidt, MD, MHA, FACEP, from Missouri and Anne Zink, MD, FACEP, from Alaska.**

**Capital Minute:** We released 20 Capital Minute videos in 2018, which are short recaps highlighting ACEP's ongoing legislative and regulatory efforts.



## Podcasts

**ACEP Frontline's audience has grown by 20 percent** in 2018. Hosted by Ryan Stanton, MD, FACEP, Frontline features in-depth conversations on the hottest topics in emergency medicine.

**Annals of EM summarizes important articles** and comments on notable editorials. The podcast recorded 103,641 downloads in 2017.

**Critical Decisions in Emergency Medicine launched** in December 2017. Hosts Danya Khoujah, MD, MBBS, and Wendy Chang, MD, discuss the hot topics and clinical pearls and pitfalls highlighted in each monthly issue of *Critical Decisions*.

## iBooks

**ACEP released two free volumes** of the *Practical Guide to Critical Ultrasound* for iTunes with "How to Scan" videos and helpful visuals.

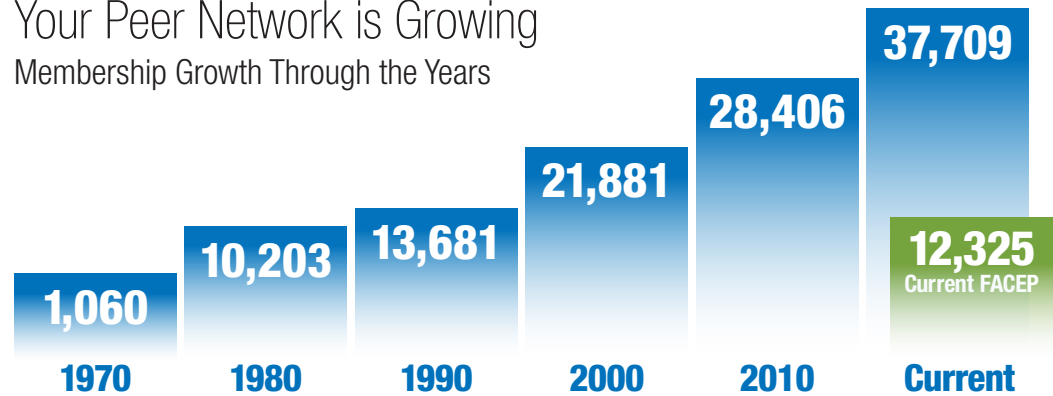
**3,150 downloads** of *Practical Guide to Critical Ultrasound*



This fall, **ACEP launched an exclusive, members-only online community** that allows emergency physicians to connect with peers, exchange valuable resources and celebrate shared successes. We've only scratched the surface of EngagED's capabilities; look for its scope and offerings to expand in 2019.

## Your Peer Network is Growing

Membership Growth Through the Years

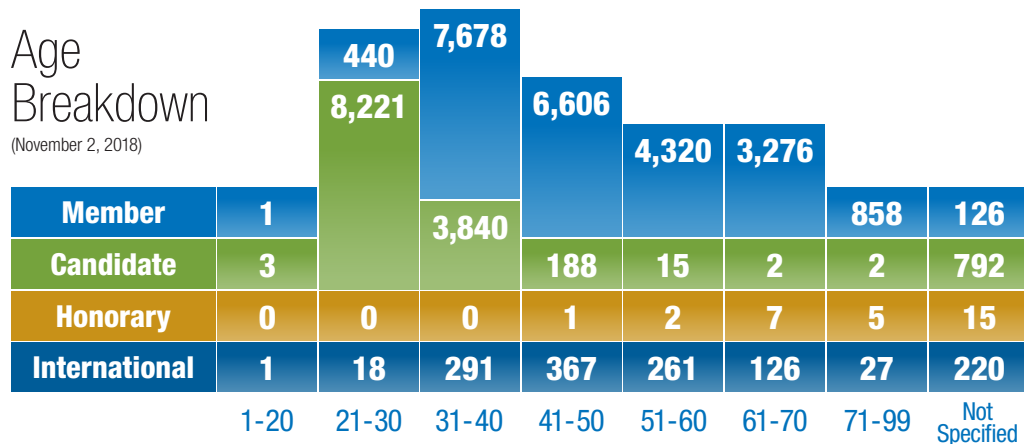


## Gender Breakdown



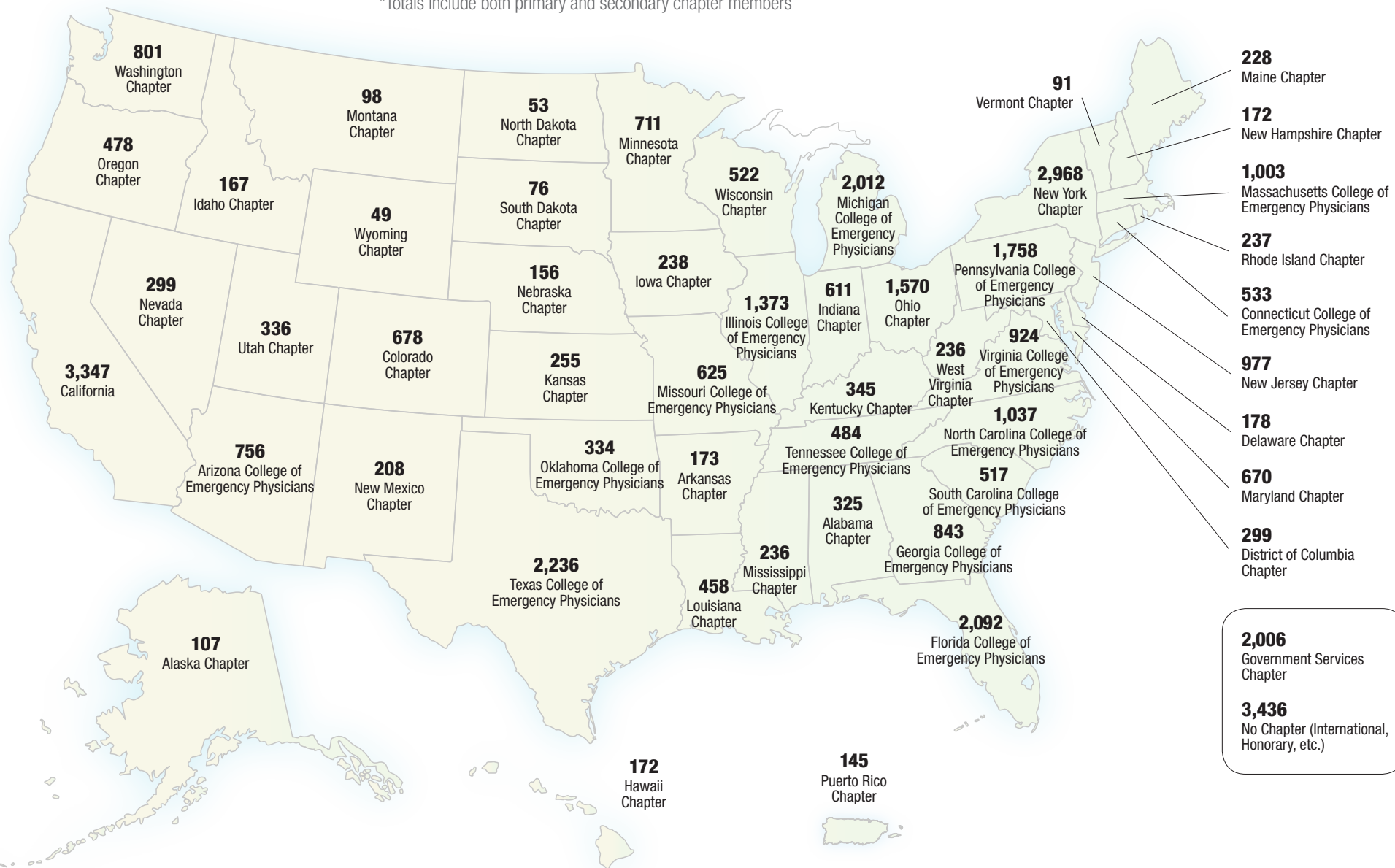
## Age Breakdown

(November 2, 2018)



# Chapter Breakdown (as of November 2, 2018)

\*Totals include both primary and secondary chapter members



# Award Winners Honored During ACEP18

These prestigious honors were bestowed during ACEP18 in San Diego



*President's Awards*



John G. Wiegenstein Leadership Award  
**Nicholas J. Jouriles, MD, FACEP**



Award for  
Outstanding Contribution in Research  
**Lynne D. Richardson, MD, FACEP**



James D. Mills Outstanding Contribution to  
Emergency Medicine Award  
**Thom A. Mayer, MD, FACEP, FAAP,  
FACHE**



Outstanding Contribution in EMS Award  
**David E. Persse, MD, FACEP**



Award for  
Outstanding Contribution in Education  
**Corey Slovis, MD, FACEP**



Council Meritorious Service Award  
**James C. Mitchiner, MD, MPH, FACEP**





Colin C. Rorrie, Jr., PhD Award  
for Excellence in Health Policy  
**L. Anthony Cirillo, MD, FACEP**



John A. Rupke Legacy Award  
**David E. Wilcox, MD, FACEP**



Honorary Membership  
**Marjorie A. Geist, RN, PhD, CAE**



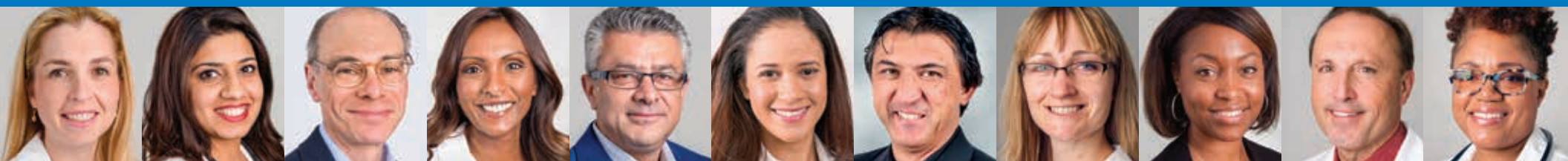
Honorary Membership  
**Barbara Tomar, MBA**

Emergency physicians across the country were recognized for their expertise by being appointed to national committees:

**Jon Mark Hirshon, MD, MPH, PhD, FACEP**, and ACEP Board of Directors member, was **appointed to the Emergency Department Sickle Cell Care Collaborative (EDSC3)**, a group formed of representatives of governmental and other society groups.

**Jennifer Wiler, MD, MBA, FACEP**, Executive Vice Chair and Professor in the Department of Emergency Medicine at the University of Colorado School of Medicine in Aurora, Colorado, was **appointed to the Physician-Focused Payment Model Technical Advisory Committee** on Oct. 18. PTAC provides recommendations to the Secretary of Health and Human Services on physician payment models.

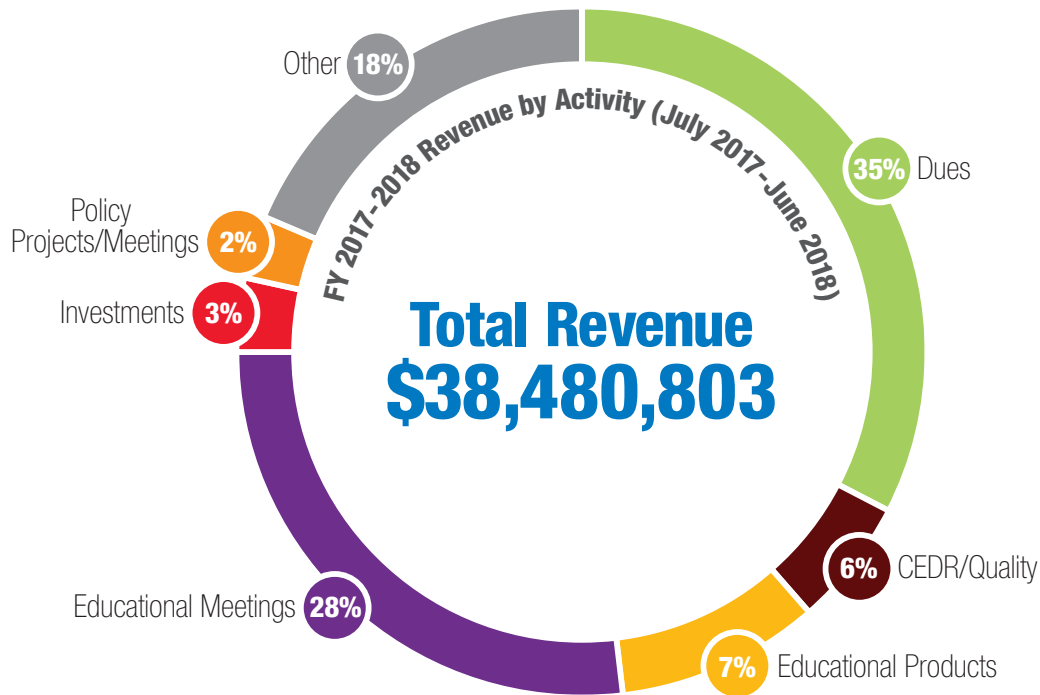
**Gerard R. Cox, MD, FACEP**, has been **appointed Deputy Under Secretary for Health in the U.S. Department of Veterans Affairs**. In that capacity, Dr. Cox is responsible for leading the VA's national policies and programs for health care quality improvement, patient safety, credentialing and privileging, risk management, medicolegal affairs, regulatory compliance, ethics, audit, investigation, and related areas.



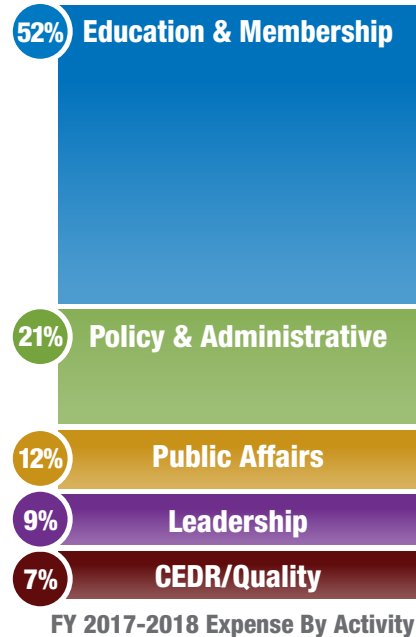
A CEP strives to be fiscally responsible with streamlined operations that allow us to pour as much funding back into member initiatives as possible.

## Financial overview

Membership dues are used to fund a variety of national programs, resources and initiatives that advance emergency medicine and assist emergency physicians in daily practice. Though we offer different rates for certain career phases, the standard national annual dues price of \$615 has not increased since 2014.



## Total Expense \$37,213,203



### Education & Membership

includes all educational products and eCME, Member Services, IT, Corporate Relations, Communications, Marketing, Educational Meetings (including ACEP18), etc.

### Policy & Administrative

includes EM Practice Management, Chapter Services, Finance, Human Resources, Legal, Office Services, etc.

### Public Affairs

includes Congressional Affairs, Federal Affairs, NEMPAC, Public Relations, etc.

### Leadership

includes Board, Council, Committees, Executive Management, etc.

### CEDR/Quality

includes CEDR, E-QUAL, Quality, etc.





## New Leadership

ACEP is led by its most diverse board in history, a true reflection of our membership. In 2018, ACEP had the most women ever elected to the Board of Directors, and a variety of practice settings are represented (10 academic, two military, five large group and six small group).

OperatED



**Top row (L to R):** Aisha Liferidge, MD, MPH, FACEP; James J. Augustine, MD, FACEP; Gillian Schmitz, MD, FACEP; John T. Finnell, MD, FACEP, FACMI; L. Anthony Cirillo, MD, FACEP.

**Middle row:** Kevin Klauer, DO, EJD, FACEP; Alison J. Haddock, MD, FACEP; Debra G. Perina, MD, FACEP; Christopher S. Kang, MD, FACEP.

**Front row:** Vice President Jon Mark Hirshon, MD, MPH, PhD, FACEP; Immediate Past President Paul D. Kivela, MD, MBA, FACEP; President Vidor E. Friedman, MD, FACEP; President-Elect William P. Jaquis, MD, FACEP; Secretary-Treasurer Mark S. Rosenberg, DO, MBA, FACEP; and Chair Stephen H. Anderson, MD, FACEP.

## Looking Ahead

In 2019, ACEP will continue to be guided by the principals of our strategic plan:

### Reform and Improve the Delivery System for Acute Care

- Develop and promote delivery models that provide effective and efficient emergency medical care in different environments across the acute care continuum.
- Promote quality and patient safety, including continued development and refinement of quality measures and resources.
- Pursue strategies for fair payment and practice sustainability to ensure patient access to care.
- Develop and implement solutions for workforce issues that promote and sustain quality and patient safety.
- Achieve meaningful liability reform at the state and federal levels.
- Position ACEP as a leader in emergency preparedness and response.
- Establish the value of emergency medicine as an important component of the health care system.

### Enhance Membership Value and Engagement

- Increase total membership and transitioning resident retention.
- Provide robust communications and educational offerings, including novel delivery methods.
- Promote member well-being and improve resiliency.
- Ensure adequate infrastructure to support growth.
- Provide and promote leadership development among emergency medicine organizations and strengthen liaison relationships.
- Promote/facilitate diversity and inclusion and cultural sensitivity within emergency medicine.

# 2019

### 2019 Strategic Opportunities & Initiatives

- Federal-level push to obtain a solution for fair out-of-network reimbursement and the elimination of balance billing
- Expansion of the Geriatric ED Accreditation Program (GEDA)
- Launch of Pain Management Center Accreditation Program
- Launch of second scientific journal (open access and online-only)
- New resources demonstrating the value of emergency medicine
- Prioritizing emergency physician wellness (BalancED, EngagED, etc.)
- Continued emphasis on opioid crisis, including EM-specific MAT training
- Increased efforts to engage international audiences

**Want to stay apprised of our  
2019 progress throughout the year?**

Follow ACEP on social media for the latest updates:



@acepnow



@emergencydocs



@acepfan





You serve your community.  
ACEP is honored to serve you.



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