Well it’s been three months since the Scientific Assembly was held in Philadelphia. Reflections of the time that has passed have been easy because it’s not a recollection of memories but rather an ongoing idea process and evolution of major themes. After accepting the gavel from outgoing president Alex Rosenau, DO, FACEP, I challenged the membership that the organization would show value. Later, as I spoke with members in attendance from all across the state, I heard the recurrent concerns of ED boarding, hospital crowding and ambulance diversion that have, like across the nation, permeated our state and made our jobs more difficult. However, of greater concern was the effect it is having on our patients. One member I met reversed the challenge to me and said that if PaACEP wanted to show the most value it could to its members, it should “solve the boarding problem.” That conversation started the ball rolling into a non-stop effort to accomplish this. The strategic planning retreat in November 2006 attended by the board of directors and committee chairs, which delineated the chapter’s long range plans for the next eighteen months, was redefined and a new focus of the chapter had emerged.

Next came the Governor’s Prescription for Pennsylvania plan. The obvious concern to emergency medicine was the misunderstanding our state leadership had of emergency department usage. Clearly, we know, it is not the “inappropriate use” by minor medical complaints that bottlenecks our departments on a daily basis. Education of the governor’s office then also became a priority.

In true form of his exemplary leadership Bruce MacLeod, MD, FACEP, while wearing his Pennsylvania Medical Society hat, met with Governor Ed Rendell and Director Rosemarie Greco from the Office of Health Care Reform (OHCR) and on the basis of his emergency medicine background planted the seed for understanding of our issues. An almost simultaneous discussion between myself, Executive Director David Blunk, and Larry Clark, the OHCR Director of Legislative Affairs also effected a better understanding of the problem. Within 48 hours of both of these conversations PaACEP had a formal invitation to meet with the OHCR to discuss these issues. This is something we have never had in the past.

Larry Clark was invited to sit as a panelist at the Town Hall Meeting and a reciprocal relationship was developed. The Town Hall meeting, by the way, was a great success. PaACEP leaders and members have attended the Hospital & Healthsystems Association of Pennsylvania (HAP) summit conference on capacity management. With one of the moderators and lecturers being one of our own, Chris DeFlitch, MD, FACEP, emergency medicine was well represented and recognized as an area of significant concern. Your chapter has worked closely with Cheri Reinhart from HAP on this very issue to develop manageable and agreeable solutions. This will continue.

David Blunk, President-Elect Jack Kelly, DO, FACEP, and I have since formally met with Rosemarie Greco and Larry Clark, and plans were undertaken to continue the process of improvement to solve our crisis. A “white paper” on the issue was requested and by the guidance of Dan Wehner, MD, continued on page 3.
Belonging to your specialty society is important. But belonging to the organization that represents all physicians is vital as well. Pennsylvania ACEP encourages emergency physicians to join the Pennsylvania Medical Society.

“PaACEP members should join the Pennsylvania Medical Society because there are issues that require a united physician voice to be heard. Today’s two pressing issues are liability reform and reimbursement,” said Bruce MacLeod, MD, FACEP, chair of the Pennsylvania Medical Society Board of Trustees and past president of PaACEP.

“As an organization representing over 18,000 Pennsylvania physicians, residents and medical students, the Medical Society can marshal resources unobtainable for specialty societies. The Medical Society develops positions and actions based upon the needs of its membership, which must include a strong, active contingent of emergency physicians,” he explained.

In addition to legislative advocacy and reimbursement help, you benefit from these programs and services by becoming a Medical Society member:

- **Clinical Updates**: Receive pertinent and timely information to help you stay up-to-date on clinical and public health topics and patient safety news.
- **CME**: Gain access to Tracker, a system that allows you to report and track your CME hours (as well as request certificates for credentialing). Obtain the patient safety CME credits required for licensure.

For more information on Pennsylvania Medical Society membership, call 800-228-7823, ext. 1418, or visit the Medical Society’s Web site at www.pamedsoc.org.

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Chapter Members Thank Senator Specter as Chief Sponsor of ACEP’s Access to Emergency Medical Care Legislation

In May, members of the Pennsylvania delegation who attended the April 30–May 2 ACEP Legislative and Advocacy Conference in Washington thanked Senator Arlen Specter for introducing the Access to Emergency Medical Services Act of 2007 (S.1003). Senator Debbie Stabenow (D-MI) cosponsored the bill.

Chapter members commended Senator Specter for his strong leadership in sponsoring this important legislation that calls for the creation of a national bipartisan commission on access to emergency medical services to examine factors that affect and may impede the delivery of care; recognizes the need for additional resources in support of care delivery; and directs a working group within the Centers for Medicare and Medicaid Services be convened to develop boarding and diversion standards, as well as guidelines and incentives for implementation of those standards.
Chapter Hosts Town Hall Meeting on Access

More than 50 people attended Pennsylvania ACEP’s Town Hall meeting on May 31 at the Whitaker Center in Harrisburg. Discussion at the meeting centered on patient access and quality threats to emergency care in Pennsylvania. The group also debated the potential impact of Governor Ed Rendell’s health care reform package, Prescription for Pennsylvania.

In true form for a Town Hall meeting, audience members peppered panelists with questions and stories of their experiences in emergency departments. Many who participated were emergency medicine providers, but the audience also included representatives from patient-oriented associations, such as the Multiple Sclerosis Society, the American Heart Association, and the Kidney Foundation.

PaACEP President Ron Strony opened the program with brief remarks and introduced the day’s panelists who included:

- Douglas McGee, DO, FACEP, Past President, Pennsylvania ACEP
- Lawrence Clark, JD, Director of Legislative Affairs for the Governor’s Office of Health Care Reform
- Cheri L. Reinhart, Vice President, Integrated Delivery Systems, The Hospital and Healthsystem Association of Pennsylvania
- Chris Peischl, a paramedic in the Operations Office in the City of Allentown
- Diane Ross of West Chester, PA, a patient from West Chester, PA

G. Terry Madonna, PhD., Professor of Public Affairs at Franklin and Marshall College, Lancaster, moderated the lively discussion.

“A Town Hall meeting is designed to bring members of a community together to discuss an issue of common concern. The true benefit of this Town Hall was the opportunity for EM providers to relay their concerns to Lawrence Clark of the Governor’s Office of Health Care Reform (OHCR),” says Ted Christopher, MD, FACEP, co-chair of PaACEP’s Governmental Affairs Committee who coordinated the project. "The Town Hall provided the springboard for further discussion on June 4 when chapter leaders met with officials of the Governor’s Office of Health Care Reform."

Executive Privilege

continued from page 1

FACEP, and the work of the EM Practice/Medical Economics Committee and at-large members, it has been produced. In the next four weeks it will be submitted to the OHCR for review and follow up meetings of pertinent stakeholders to include PaACEP, OHCR, HAP, and the Department of Health are planned.

The outcome is not yet known. However, we have made significant progress with departments and agencies we have never had the ability to even discuss these issues with in the past.

On a national level, efforts are underway with the Access to Emergency Medical Services Act of 2007. With strong work we may be an example the nation looks to in dealing with our crisis. We hope the continuance of this aggressive work will bear fruitful results to benefit our profession, our practice, and most importantly, our patients. I know of no greater value to strive for.

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Emergency Medicine Practice/Medical Economics
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EMS
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Alan T. Forstater, MD, FACEP

PaACEP Education Foundation
John A. Skiendzielewski, MD, FACEP
One Day Can Make All the Difference

Why is inviting your senators and representatives to “Visit Your ED” so important? It enables your legislator to witness first-hand how you care for your patients—their constituents—and the problems you face everyday in providing that care. That one-day visit could also make all the difference in how your legislator votes on a bill that may affect your practice.

“Visiting the emergency department was definitely worthwhile,” said State Senator Michael O’Pake (D-District 11) who spent the day at St. Joseph’s Hospital in Reading. “It was an eye-opening experience to see how crowded the emergency department was. I also learned how significant the cost of unreimbursed care has become for our hospitals.”

Summer is a great time to invite your legislator to visit your emergency department. Both you and your legislator will benefit because...

• It builds relationships with those voting for issues affecting emergency physicians.
• It allows you to educate your legislator about the specialty.
• It allows your legislator to learn more about your hospital.
• One visit can lead to one “yea” vote that can swing a crucial vote on legislation in PaACEP’s favor.

When Pennsylvania’s General Assembly reconvenes in September, many issues affecting emergency medicine will be on the agenda, including both Rendell’s and the Republicans’ plans for health care reform. The only way these legislators can vote intelligently on these issues is to be informed. That job is up to you.

“I think meetings like these allow emergency physicians to forge a stronger connection between us—the providers—and the lawmakers who are so critically important in the future of emergency medicine within the state,” said Hank Unger, MD, FACEP, whose state representative, Josh Shapiro (D-153rd District), visited Holy Redeemer Hospital’s emergency department last year. “I believe it gave Josh an opportunity to better understand the challenges we face. We discussed emergency preparedness, patient safety, malpractice issues, reimbursement, work force challenges, electronic charting, and data repositories. He really saw things a bit more clearly after his visit and can better ‘touch’ the real challenges facing emergency care.”

PaACEP can help you plan your ED visit. Check out the chapter’s Web site at www.paacep.org/HostingEDVisit.htm to learn the “how to” of scheduling and preparing for the visit. There are also tips on how to make an impression on your legislator and suggestions for follow up.

Health Care Tops Legislative Agenda

Prior to the summer recess, in addition to passing the 2007-2008 state budget, a package of bills expanding scope of practice of allied health professionals were also adopted, and at press time, were expected to be signed into law by the governor.

• **Scope of Practice:** The bills—considered part of Governor Rendell’s *Prescription for Pennsylvania* health care reform plan—make relatively modest changes to the scope of practice of certified registered nurse practitioners (CRNPs), nurse midwives, clinical nurse specialists (CNSs), and physician assistants (PAs).

House Bill 1253 has moderate scope expansion provisions, but CRNPs would still be required to have a collaborative agreement with physicians as in existing law, and does not change the current prescribing restrictions.

However, this may be changed in the regulatory process. The Nursing Board is drafting regulations removing the ratios of physicians to CRNPs and restrictions on CRNPs prescribing scheduled drugs. PaACEP will monitor Nursing Board activity over the summer months.

The companion PA bills, House Bill 1251 and 1252, expands the number of PAs a single physician may supervise from two to four and permits a physician to apply to the Medical or Osteopathic Board for a waiver to employ or supervise additional PAs for good cause. In licensed health care facilities, the bills also make a patient’s attending physician the primary supervising physician for a PA while the patient is under the care of the attending physician.

A bill addressing CRNAs was not included in the legislative reform package because the Pennsylvania Medical Society and PaACEP opposed proposed legislation that expands the scope of practice of CRNAs. In a letter to Representative Michael Sturla, chairman of the Professional Licensure Committee, PaACEP President Ron Strong, MD, FACEP, stated that “anesthesia can be performed by non-physician practitioners, but with the rapid introduction of more powerful drugs, the need for complex pre-operative management, the significant medical complications that can occur during a surgical procedure, and the potential for post anesthesia complications, the safe management and the best

continued on page 10
The Education Committee—the Backbone of Pennsylvania ACEP

Do you need help finding the right computer system for your emergency department? How about an intensive review to help you pass your emergency medicine board exam or a simulation of the oral boards to prepare you and reduce anxiety for your upcoming oral boards? Perhaps you would like an annual update or state of the art review of current clinical or research topics in emergency medicine presented by excellent speakers? Your needs can be met in the following nationally recognized courses:

- Oral Board Simulation Course
- Emergency Medicine Written Board Review Course
- Trauma 2007
- National Emergency Department Information Systems Symposium
- Annual Scientific Assembly

Pennsylvania has a long history of sponsoring high-quality continuing medical education (CME) programs. Each year, the chapter offers its members more than 150 hours of ACEP/AMA credit with programs that address a wide range of clinical and practice management topics. Credit for the success of PaACEP's CME programs goes to the Education Committee.

“The Education Committee strives to provide excellent, relevant, and timely CME to meet the needs of the membership. The committee helps the chapter achieve its core missions: education and advocacy for our membership and our specialty,” commented Jonathon Leiser, MD, FACEP, co-chair of the Education Committee. “The committee's programs also raise money. The significant income generated by our CME programs has become a mainstay of PaACEP’s budget and allows the chapter to fulfill many other goals and objectives.”

Dr. Leiser attributes the success of its programs to the many members who contribute their time and expertise to planning, teaching, and evaluating courses and seminars. He encourages more members to become involved.

“The Education Committee is an effective and enjoyable way to give something back our specialty,” Dr. Leiser explained. “You also benefit by meeting and spending time with other physicians of like mind.”

Names in the News

Chapter President-elect John Kelly, DO, FACEP, was recently honored as the 2007 recipient of the prestigious Albert Einstein Physician Leadership Award. Emergency Department Chairman, Carl Chudnowsky, MD, FACEP, stated that it is the highest honor an AEMC physician can receive.

The chapter thanks the following that serve as members of the Education Committee:

- Alan T. Forstater, MD, FACEP
- Jonathon B. Leiser, MD, FACEP
- Michael A. Bohn, MD, FACEP
- Robert A. Cameron, MD, FACEP
- Merle A. Carter, MD
- Ankur A. Doshi, MD, FACEP
- Michael Hugh Fitzpatrick, MD, FACEP
- Murry S. Ganti, MD
- Glenn K. Geeting, MD
- Sharon K. Griswold, MD, FACEP
- Scott C. Harter, MD, FACEP
- C. James Holliman, MD, FACEP
- Joanne E. Hullings, DO, FACEP
- Bryan G. Kane, MD, FACEP
- John J. Kelly, DO, FACEP
- Joel Kravitz, MD, FACEP
- Richard M. Levitan, MD, FACEP
- Freda Lozanoff, DO, FACEP, FACOEP
- Scott W. Melanson, MD, FACEP
- Bohdan M. Minczak, MD, PHD, FACEP
- Gerald F. O'Malley, DO
- Kenneth R. Patton, DO
- Joyce A. Pettrini, MD, FACEP
- Robert S. Porter, MD, FACEP
- Edward A. Ramoska, MD, MPH, FACEP
- Ralph J. Rivieco, MD, FACEP
- Noelle Rotondo, DO, FACEP
- Adam Kendall Rowden, DO
- Gail S. Rudnitsky, MD, FACEP
- Walter A. Schrading, MD, FACEP
- Michael A. Turturro, MD, FACEP
- Steven M. Selbst, MD, FACEP
- Elizabeth G. Sevin, MD, FACEP
- Amy J. Snover, MD, FACEP
- Jerald A. Solot, DO, FACOEP
- Ronald S. Strony, MD, FACEP
- Henry D. Unger, MD, FACEP
- Allan B. Wolfson, MD, FACEP
- Mark E. Zeitzer, MD
- Gary Zimmer, MD, FACEP.
Chapter Takes Concerns About Access to Governor’s Office

On June 4, PaACEP leaders met with officials from the Governor’s Office of Health Care Reform (OHCR) to discuss access problems facing emergency departments in Pennsylvania. Chapter representatives also shared their views on Governor Ed Rendell’s health care reform plan, Prescription for Pennsylvania.

During the meeting, Ron Strony, MD, FACEP, Jack Kelly, DO, FACEP, and Executive Director David Blunk told Rosemarie Greco, director of the Governor’s Office of Health Care Reform and Lawrence Clark, JD, director of Legislative Affairs for the office, about the impact emergency department (ED) boarding has on overcrowding and ambulance diversion.

Dr. Strony applauded Governor Rendell for recognizing that the state’s emergency departments are approaching a crisis situation, but said that provisions contained in Prescription for Pennsylvania will not solve ED overcrowding. He said that gridlock in emergency departments is not caused by too many patients with non-urgent conditions, but by boarding acutely ill patients in an emergency department because no inpatient beds are available in the hospital.

In response, Ms. Greco asked for data to support PaACEP’s contentions. She requested that the chapter submit a ‘white paper’ to the Governor’s Office of HealthCare Reform that:

- Describes the boarding/crowding/diversion problems facing Pennsylvania’s emergency departments;
- Includes Pennsylvania-specific data on the effect these problems have on quality and cost; and
- Provides some broad conceptual ideas for solutions

A July 15 deadline for submitting the paper was set.

The OHCR has agreed to take this white paper and work with us and others to find answers,” Dr. Strony explained. “Ms. Greco suggested gathering PaACEP leaders, the Secretary of Health, emergency medical service providers, third party payers, hospital CEOs, representatives of the Hospital and Healthsystems Association of Pennsylvania, and others together to work through issues in a continuous fashion and develop workable solutions. OHCR wants to facilitate this as timely as possible. We have a huge opportunity here.”

Advocacy

“Any emergency medical group that doesn’t use a company that knows their specialty is crazy.”

- Carl Chudnofsky, MD, Philadelphia, PA

Dr. Strony applauded Governor Rendell for recognizing that the state’s emergency departments are approaching a crisis situation, but said that provisions contained in Prescription for Pennsylvania will not solve ED overcrowding.
Pennsylvania ACEP has a pressing need to identify and nurture the next generation of physician leaders, according to chapter President Ron Strony MD, FACEP. To help do that, the chapter initiated the chapter’s Young Physician Leadership Fellowship in 2004.

“This Fellowship is an effort to recognize, recruit and train young physicians to be effective leaders early in their careers,” Dr. Strony explained. “We are facing an increasingly complex medical system. As the future unfolds, we’ll need young physicians who have a passion for emergency medicine and will stand up for the specialty and our patients.”

Rex Mathew, MD, Thomas Jefferson University Hospital, and Andrew Miller, DO, Lehigh Valley Hospital, recently received PaACEP Young Physician Leadership Fellowships. This $500 stipend helped them offset the cost of attending the 2007 ACEP Leadership and Advocacy Conference held April 29-May 2 in Washington DC.

“The ACEP Leadership and Advocacy Conference was definitely worthwhile. I could say this is one of the first conferences I attended that I came away with increased knowledge, skills I can use in every day practice, and the thirst to become more involved,” commented Dr. Miller. “In particular, I enjoyed the town hall style meeting, where great thinkers came together to explore ideas on future political avenues of the College. It reinforced in me that a few hundred heads are better than one, that there are many viewpoints which must be considered, and that there are many physicians dedicated to improving emergency medicine to benefit our patients,” he continued.

“As young physicians, we need to become involved because the decisions and actions that are being made today will affect our practices in the future. I think going to the conference gives young physicians that opportunity,” Dr. Miller emphasized.

Applications for the 2008 Young Physician Leadership Fellowship will be sent to emergency department directors and emergency medicine residency directors in January 2008, Dr. Strony said. In the meantime, he urges members to reach out to young physicians who have leadership potential and encourage them to become involved in the chapter.

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PaACEP News, June/July 2007
The PaACEP Board of Directors welcomes the following as members of the American College of Emergency Physicians and Pennsylvania ACEP.

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PaACEP News
777 East Park Drive, P.O. Box 8820
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HAP Summit

HAP Summit Addresses Capacity Management

Chris DeFlitch, MD, FACEP, a member of the PaACEP’s Emergency Medicine Practice/Medical Economics Committee, was among the presenters at “Perfecting Patient Flow: 2007 Pennsylvania Hospital Capacity Management Summit” on June 4 and 5 at the Holiday Inn, Harrisburg/Hershey. The conference was sponsored by the Hospital and Healthsystem Association of Pennsylvania.

Conference sessions focused on the key drivers affecting emergency departments, with a theme of addressing inpatient capacity and flow problems utilizing innovative process redesign techniques. Faculty presented leading-edge techniques, technologies, and improvement tools, and discussed how to use benchmarking to assist with overall health care delivery. National and regional case studies highlighted the positive impact these tools and strategies have on outcomes in other organizations and how they can be applied to your facility.

Some featured topics included: Options for Solving Overflow Problems; Growing Organizational Capacity; Developing a Winning Business Case for Your ED and Inpatient Capacity Strategies; Why Care About Effective Capacity Management; and Physician-Directed Queuing (PDQ): Expanding Capacity to Care in the Crowded ED.

Dr. DeFlitch represents our chapter on the HAP oversight committee on hospital crowding, and has presented nationally on innovative techniques to address hospital crowding. He is physician champion for Penn State’s Clinical Information System and director and vice-chair of the Department of Emergency Medicine at Penn State Milton S. Hershey Medical Center.

 Outstanding ED Physician Needed
State College, PA Home of Penn State University

- Independent democratic group
- All EM residency trained and EM boarded physicians
- Full-time physician assistants
- Fee for service / Excellent Compensation Package
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- Years of stable amicable relationship with administration
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- 20-24 hours of PA coverage per day
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- In-house dictation/transcription
- Excellent nursing/ED techs/IV team
- Superb admitting and consulting staff
- CT/ultrasound available 24/7
- University community: great schools and all the amenities without crime

E-mail: TZiff@Mountnittany.org
Call: Sally Arnold at 814-234-6110 ext. 7850
Or mail: Theodore L. Ziff MD FACEP, 1800 East Park Ave, State College, PA 16803. 814-234-6110. TZiff@mountnittany.org

EMERGENCY DEPARTMENT PHYSICIANS

(2) Full-time, permanent positions
$175,000 - $195,000/Year
(Commensurate with education and experience)

The Philadelphia VA Medical Center is currently seeking physicians who are board certified/eligible in emergency medicine, internal medicine or family practice to work in the emergency department. Must have recent experience in an emergency department or inpatient setting and must be ACLS certified.

Candidates must possess a degree of Doctor of Medicine or Osteopathic Medicine; a current, full, unrestricted license to practice medicine or surgery; US citizenship and proficiency in spoken and written English.

Selectees are required to pass a security background investigation and pre-employment physical.

Tour of duty: 8, 10 or 12 hour shifts including coverage of nights, holidays and weekends.

We offer an exceptional Federal Benefits Package, free parking or subsidized transit. May be eligible for consideration under the Education Debt Reduction Program (EDRP).

Forward resume and transcript to:
Philadelphia VA Medical Center
Human Resources (05)
Reference: 174-07
3900 Woodland Avenue
Philadelphia, PA 19104
Philadelphia VA Medical Center is an Equal Opportunity Employer.

EMERGENCY MEDICINE
SOUTHEASTERN PENNSYLVANIA

The Reading Hospital and Medical Center is a community teaching hospital with a Level II trauma center. The newly expanded EM department is state-of-the-art with a census of over 90,000 patient visits per year. The hospital is seeking residency-trained Emergency physicians to provide care for a growing patient base and development of a Clinical Decision Unit. Teaching opportunities are available. The hospital houses residencies in Internal Medicine, Family Medicine, Obstetrics and Gynecology, and a Paramedic Training Institute. The Reading Hospital offers a competitive salary, plus an incentive plan, and full benefits package.

Reading is located in beautiful Berks County and offers great schools, affordable housing, outstanding shopping, and a wide range of recreational and social amenities. You can be in Philadelphia in little over an hour, two hours gets you to Baltimore, and three to D.C.

Ann Lamb
800-678-7858, x63486 • 314-726-0026 (FAX)
alamb@cejkasearch.com
ID#2780460
cejkasearch.com

PaACEP News, June/July 2007 9
Health Care Tops Legislative Agenda
continued from page 4

outcome occurs when a trained, qualified an experienced anesthesiologist is directly involved with the patients’ care.”

That bill remains in committee.

When the Pennsylvania General Assembly returns to Harrisburg this September after its summer recess, these important health care issues will be high on the legislative docket:

- **Republican health care reform plan**: The House Republican Health Care Task Force will outline its alternative to Governor Ed Rendell’s Prescription for Pennsylvania. The plan attempts to close the gap between the insured and uninsured and promises that an additional 375,000 will have health insurance within four years of implementation. In broadest terms, the Republican’s version of Prescription for Pennsylvania keeps the burden of purchasing health care insurance on consumers, but forces insurance providers to offer lower-cost basic “lifeline” packages so more consumers can afford insurance. No tax increase is necessary for the plan.

- **Bill to relieve medical school debt**: State Representative Josh Shapiro (D-Montgomery) introduced a bill that reimburses physicians who agree to practice in Pennsylvania for 10 years. Under Shapiro’s proposal, the state would reimburse a doctor for 10 percent of his or her medical school debt balance at the end of each year the physician practiced in the Commonwealth. Both the Pennsylvania Medical Society and the Hospital and Healthsystem Association of Pennsylvania back Shapiro’s bill. Governor Rendell wants to work with Shapiro to adjust the program to encourage physicians to practice in underserved geographic areas in the state.

- **Access to emergency care on the national front**: The Pennsylvania Medical Society recently joined other major health care organizations (such as ACEP, the American Medical Association, the American College of Surgeons and the American Academy of Pediatrics) to support the Access to Emergency Medical Services Act of 2007 (House Bill 882 and Senate Bill 1003). Both bills call for the creation of a national bipartisan commission on access to emergency medical services to examine factors that affect and may impede the delivery of care in U.S. emergency departments. The bill also recognizes the need for additional resources in support of care delivery. In addition, Senate Bill 1003 directs that a working group within the Centers for Medicare and Medicaid Services be convened to develop boarding and diversion standards, as well as guidelines and incentives for implementation of those standards. Pennsylvania Senator Arlen Specter is a primary sponsor of Senate Bill 1003.

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Join New Salaried EM Group With Superb Benefits!

The Emergency Department at Hazleton General, in Pennsylvania, is now managed by Lehigh Valley Hospital (LVH). The new EM group is seeking several more BC/BE EM-trained physicians. Join the large and growing multi-specialty physician practice of LVH and receive our generous salary and benefits, including family health care with no employee contribution, six weeks of paid time off plus one week of CME with $4,500 annually plus ACEP/ACOEP boards paid, life insurance of 2-times salary, two forms of pension, medical liability coverage, etc. Hazleton’s ER has expanded to 17 beds in a beautiful new facility! Our ER team cares for 33,000 EM visits annually with 36 hours of physician and 12 hours of PA coverage daily, utilizing preference-based scheduling.

The greater Hazleton area, nestled in the foothills of the beautiful Pocono Mountains, is home to 100,000 people. Hazleton is a friendly, family-oriented, growing community offering the 8th lowest crime rate in the nation, a moderate cost of living, solid private and public schools, a plethora of outdoor sports activities, and some of Pennsylvania’s most breathtaking scenery!

To learn more, please e-mail CV to Michael Weinstock, Chair of Emergency Medicine, LVH, at debra.perna@LVH.com Phone (610) 969-0216.
Pennsylvania, Pittsburgh: Ohio Valley General Hospital is located in the growing area of Kennedy Township, Pennsylvania and is a 119-bed community hospital with a full range of services. The cost of living is low and the amenities of Pittsburgh are minutes away. The ED sees approximately 18,000 patients annually with 24 hours of physician coverage and 20 hours of physician-extender coverage. Excellent salary with full benefits including paid malpractice with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. Board certification/eligibility in EM or board certification in IM/FP/SUR with EM experience required. Call Dr. Robert Maha at 888-647-9077/Fax 412-432-7480 or email at mahar@upmc.edu.

Pennsylvania, Pittsburgh suburb: UPMC Passavant Hospital is located in an affluent suburban area with excellent housing and schools, and is a short commute from the amenities of Pittsburgh. The progressive ED sees 33,000 patients annually with 40 hrs of physician coverage and 20 hrs of physician-extender coverage daily. The ED is state-of-the-art with excellent nursing staff and great on-call coverage. An outstanding compensation/benefit package includes paid malpractice with tail, employer-funded retirement plan, paid health insurance, CME allowance, etc. Call Dr. Robert Maha at 888-647-9077/Fax 412-432-7480 or email at mahar@upmc.edu.


College Station, Texas: Be a part of the Texas A&M University Tradition! Traditions Medicine has a wonderful opportunity for ABEM certified Physician. Enjoy an excellent year-round climate. Easy access to Austin & Houston for dining, shopping, and travel. Great city for collegiate sports fans, hunting and fishing enthusiasts and families. ED with 24K annual volume. Single physician coverage with 2 mid-levels and a Scribe program. Full-time contract position with 12-15 eight-hour shifts per month. Paid malpractice with tail. Contact Erika Pourrajabi at 979-220-4542 or ErikaPourrajabi@affilion.com.

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CLEARFIELD, PENNSYLVANIA

EMERGENCY MEDICINE PHYSICIAN

OPPORTUNITY IN A STATE-OF-THE-ART E.D. WITH FULL COMPUTERIZED DOCUMENTATION SYSTEM, HIGHLY COMPETITIVE SALARY, AND EXCELLENT BENEFIT PACKAGE VALUED AT ROUGHLY $280,000. CHARMIN FAMILY-ORIENTED COMMUNITY WITH OUTSTANDING SCHOOL SYSTEMS LOCATED IN SCENIC MOUNTAIONOUS WEST CENTRAL PENNSYLVANIA, ONLY 45 MINUTES FROM PENN STATE UNIVERSITY. ANNUAL VOLUME: 26,000. DOUBLE COVERAGE 22 HRS. WITH FOUR CERTIFIED P.A.'S. CANDIDATES MUST BE E.M. RESIDENCY TRAINED / B.E. OR B.C. IN E.M. FOR IMMEDIATE CONSIDERATION. CONTACT KAREN RUBBE OR DR. MARK SHAW: (814) 765-5341 / FAX: (814) 768-2445 / E-MAIL: KRUBBE@CLEARFIELDHOSP.ORG / MSHAW@CLEARFIELDHOSP.ORG, OR WRITE - CLEARFIELD HOSPITAL HR DEPT., ATTN: KAREN, 809 TURNPIKE AVENUE, CLEARFIELD, PA 16830.

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The cornerstone of the formation of EMP was that is was, and STILL is, the ONLY large EM group in the country which recruits not only board-certified physicians, but ONLY Emergency Medicine residency trained physicians. Throughout our existence, we have emphasized treating patients as family and delivering the highest in customer satisfaction.
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