

A Newsletter for the Members of the Mississippi Chapter

Summer 2017



Sarah Sterling, MD, FACEP
President

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Executive Director

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From the President:
Residency Program Leadership Transitions
Sarah A. Sterling, MD

The two Emergency Medicine programs in Mississippi have undergone some recent changes in leadership. In May 2017, Brian Tollefson, MD, was appointed as the University of Mississippi Medical Center Emergency Medicine Program Director. In July 2017, Veronica Tucci, MD, was appointed as the Merit Health Wesley Emergency Medicine Program Director. Please help me welcome Dr. Tollefson and Dr. Tucci as the Program Directors for our State's only Emergency Medicine training programs.

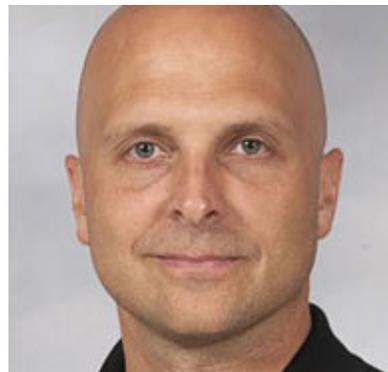
Dr. Tucci is the Academic Chair and Program Director of Merit Health Wesley's Emergency Medicine Program and Professor of Emergency Medicine and Research at William Carey University College of Osteopathic Medicine. Before joining MHW, Dr. Tucci was core faculty at Baylor College of Medicine in Houston, Texas where she served as an Assistant Program Director and Chair of the Clinical Competency Committee for Baylor's Emergency Medicine

Residency Program from 2013-2015. Dr. Tucci received her Bachelor of Arts from Yale University, Honor Juris Doctorate from the University of Florida, Levin College of Law, and her Medical Degree from the University of South Florida, Morsani College of Medicine. Dr. Tucci completed her residency at the University of South Florida before joining Baylor in 2012. She is a medico-legal consultant, educator and mentor for nurses, physicians, residents, medical students, paramedics/EMTs, physician assistants as well as premedical students. She has authored numerous textbook chapters, articles and blogs and is a national and international speaker in the field of Emergency Psychiatry and Documentation. She also has served on several national committees dedicated to medico-legal issues, patient safety, quality improvement and documentation practices through the ACEP, the Council of Emergency Medicine Residency Directors (CORD), American Academy of Emergency Medicine (AAEM) and the Society for Academic Emergency Medicine (SAEM). Dr. Tucci is also a co-President and Founder of the Interdisciplinary Collaborative on Psychiatric Emergencies (iCOPE) and is a charter member of the Coalition on Psychiatric Emergencies.

Dr. Brian Tollefson graduated from medical school at the University of Minnesota in 2000. After completing a medicine internship at Wilford Hall Medical Center, he spent the next 4 years on active duty in the Air Force serving as a flight surgeon. Dr. Tollefson completed an emergency medicine residency and sports medicine fellowship at the University of Mississippi Medical Center. Dr. Tollefson joined the faculty at UMMC in 2009 and currently serves as the emergency medicine residency program director, sports medicine fellowship program director, and emergency ultrasound director. Dr. Tollefson has also continued his military service in the Air National Guard where he currently serves as the Mississippi ANG State Air Surgeon.



Veronica Tucci, MD



Brian Tollefson, MD

MS-ACEP New BOD Members – August 2017

Sarah A. Sterling, MD President, MS-ACEP

MS-ACEP would like to welcome two of our new Board of Director members.

Representing the Merit Health Wesley Emergency Medicine program is Drew Trump, DO. Dr. Trump is a native of Beckley, West Virginia. After receiving a B.S. in Biology from West Virginia University, Dr. Trump continued his studies at The West Virginia School of Osteopathic Medicine where he received a Doctorate of Osteopathic Medicine. Currently, Dr. Trump is a PGY-2 Emergency Medicine resident at Merit Health Wesley in Hattiesburg, Mississippi. Dr. Trump's interests in emergency medicine include both critical care medicine and disaster medicine.

Representing the University of Mississippi Medical Center is Eric McDonald, MD, a PGY3 Emergency Medicine resident. After completing medical school at the University of Mississippi School of Medicine, Dr. McDonald continued his Emergency Medicine training at UMMC. Dr. McDonald is also a Board Member for the Accreditation Council for Graduate Medical Education (ACGME) Review Committee for Emergency Medicine, which provides high-level oversight of EM residency programs. In addition to past experience as a firefighter, EMT, and paramedic, Dr. McDonald is a father of seven children along with wife, Heather.



Eric McDonald, MD



Drew Trump, DO

ACEP Leadership & Advocacy Conference - 2017

Utsav Nandi, MD

Secretary-Treasurer, MS-ACEP

This year I had the wonderful opportunity to attend ACEP's Leadership and Advocacy Conference (LAC 17), and it is my pleasure to share this experience with MS-ACEP members.

LAC is an annual conference hosted by ACEP in Washington, D.C. The meeting itself is smaller than ACEP's Annual Scientific Assembly – which is perfect for what this conference aims to deliver: education, networking, and advocacy. I have had the opportunity of attending two previous LAC meetings, and I believe that this is one of our specialty's most important meetings. This year, I was joined in D.C. by MS-ACEP members Andrew Glass (UMMC senior resident), Phil Dixon (past MS-ACEP resident representative), and Eric McDonald (EMRA board member and current MS-ACEP resident representative).

The format of this conference caters to both new and seasoned physicians. One of the best facets of this meeting is the education component provided by ACEP's advocacy branch and EMRA on various health policy issues. This year was especially informative as we attended at a time of significant political debate regarding proposed changes to ACA and a new health care bill.

Attendees were treated to a wide-variety of didactic material ranging from the opioid crisis to promoting diversity and inclusion in our field. This year's keynote speech was by none other than ZDoggMD (Dr. Zubin Damania) on the important issue of burnout and resilience.



Just as the day is devoted to education, the evening focuses on networking. The smaller size of the conference allows a more intimate setting to meet EM physicians from across the country who are as passionate about advocating for their patients and improving care and access to care. We also had the opportunity to meet and discuss issues of importance with our ACEP leaders who are involved in advocacy efforts year-round. This offered us a chance to discuss matters pertinent to our state and get valuable advice from the leaders in our field. In addition to the people, I must also commend ACEP on the location of the networking receptions. We were very lucky to be able to visit The Hay-Adams as NEMPAC contributors and we were treated to great views of the White House.

After an exciting two days in D.C., we were finally ready for the highlight – the congressional visits. ACEP organizes meetings with each state’s congressmen and women as well as senators and their health policy staffers. This provides us the opportunity to educate our representatives on various health care issues and give them an insight of how we, as physicians on the front line, deal with them on a daily basis. Issues that we have discussed in recent years include the EMTALA Liability Bill (which dealt with access to emergency care and EMTALA-related services and strives to provide temporary protection under the Federal Tort Claims Act), providing resources to those suffering with mental health issues and working to reduce ED boarding of psychiatric patients. Since different states have unique problems and approaches to solving them, discussing health care issues with practicing physicians from their states and districts offers our representatives a unique perspective on why certain issues are crucial to us and how their support can improve the health of the state.

The day started with advocacy training and a discussion of both principles and bills important and relevant to EM. Attendees were also provided handouts that provide additional details on bills that have been introduced as well as our stand on various issues as a specialty. While we were attending these sessions, we received some unfortunate news. Due to the unexpected snow (yes, in March) overnight and that morning, our trip to Capitol Hill had been cancelled. This was definitely a disappointment as we had all been looking forward to “Hill Day”. Even as we all admired the snow (yes, real snow), we would not be defeated. We started contacting our representatives and found out that our meetings were still scheduled and realized that official transportation was the only thing that had been cancelled. That was welcome news indeed, so right after our advocacy training sessions, we made our way to Capitol Hill.

Braving below freezing temperatures, we visited the offices of our representatives and had productive meetings. One of our primary talking points this year revolved around how and why emergency care is an essential health benefit and that any health care legislation should include coverage for emergency care.

The final day of the meeting focused on leadership. Topics included leadership resiliency during times of change, the impact of implicit bias, and the interaction of social media and EM.

As with all good things, this day marked the end of LAC 17. However, the lessons we learned and the connections we developed would ensure that the conference was just the beginning of our advocacy efforts. As one of my mentors had pointed out, “Do you want to just be a clock-in, clock-out kind of physician or do you want to be able to do more for your patients? Do you want to be one of those who complains about the ones making the laws or be a part of a group that wants to be a part of the solution?” If you want to be more, then LAC is the perfect place to start.

I am happy to say that since the conference, Dr. Glass has accepted a position at a community hospital serving patients in Mississippi, Dr. Dixon has been accepted to, and recently started, a health policy fellowship and Dr. McDonald not only volunteered (and was happily accepted) to the position of MS-ACEP resident representative, but has also intensified his involvement with EMRA on a national level.

If any of you are interested in learning more about ACEP and their advocacy efforts, please feel free to visit their [website](#) or follow them on twitter ([@ACEPAdvocacy](#)). I would also strongly urge you to join ACEP’s 911 Legislative network (available to all ACEP members – access via ACEP advocacy website). From their website: “ACEP established the 911 Network in 1998 to encourage our members to cultivate long-term relationships with federal legislators, convey ACEP’s legislative and regulatory priorities-in an effective manner, and affect the final outcome of federal legislation important to the specialty of emergency medicine.” One of the benefits is their “Weekly Update” email summarizing the “latest legislative and political issues impacting emergency care”, delivered straight to your inbox in a concise format (for a highlight of recent communications, please visit the MS-ACEP Facebook page).

Finally, I would strongly urge all our members with an interest in advocacy, or desire to learn more about this process, to attend the upcoming LAC 18 (May 20-23, 2018). If you have any questions about this, please contact us or visit the [LAC website](#).



MS-ACEP Secretary/Treasurer Utsav Nandi, MD, with ACEP President Rebecca Parker, MD

On a final note, a lot of your work happens at night, on weekends, and behind the scenes. Thank you all once again for all you do for our patients in the ED, at the state and national level.

The Learning Curve: Executive Director Orientation

Patrick O'Brien

Executive Director, MS-ACEP

My assuming of the role of MS-ACEP executive director was much like that of assuming my “day job” of coordinating an Emergency Medicine residency program: I had no idea what I was agreeing to. However, much like my job as a residency coordinator, this experience has enriched my understanding of Emergency Medicine and sharpened my skills as a coordinator and communicator. It has been a pleasure to serve in this role over the past year.

Facilitating my understanding of the role has been Immediate Past President Dr. Greg Patiño, former Secretary/Treasurer Dr. David Sawyer, & former Executive Director Mrs. Danne Dunn. To get on the same page as national, though, required a bit more effort. In April 2017, I had the pleasure of experiencing National’s orientation in Dallas/Fort Worth, Texas. This orientation, targeting directors with five years of experience or less, was held over two days and filled with lots of introductions to ACEP committees, chairs, and directors.

The most valuable part for me, though, was interacting with other directors. In attendance with

me were executive directors from Michigan, Missouri, and Tennessee. I learned about their states. I learned about Emergency Medicine in their states. I also learned how different the Mississippi chapter of ACEP is from the majority of the country. While these other states may be managing and utilizing the efforts and initiatives of more than 1500 physicians, Mississippi has just broken the 200 member mark. The difference in numbers, however, made me grateful for the concentration of efforts. Further, I was thankful: I see and talk to our president every day (weekends and holidays sometimes included!); there are other directors who've never even met theirs.

This experience helped to reinforce my understanding of MS-ACEP and gave me a broader perspective. Though a bit daunted by the learning curve, I am confident that MS-ACEP is headed in the right direction. I am grateful and excited for the future of our chapter.

Are Insurance Companies Keeping Physician Payments in Line with the Rising Costs of Medical Practice?

Steve Demetropoulos, MD

The business of medicine is not often discussed yet directly affects our ability to care for patients. We are directed to focus on metrics, times, patient satisfaction, or core measures but need to be aware of our billings and collections so we can continue to serve our patients successfully. I wanted to share my physician group's experience in dealing with an insurance company as a way of highlighting the importance of this business aspect of our practice.

The local private physician group I work for contracts with Singing River Health System for coverage of their emergency departments at Singing River and Ocean Springs Hospitals located in Ocean Springs and Pascagoula, Mississippi. There are 22 physicians and four mid-level providers providing this service. Our group has been in existence and providing these same services for 50 years. We treated 101,354 patients in 2016 and are the only hospital system in our county (Jackson). Our coding, billing, and collections are done by Duva-Sawko, an Ormand Beach, Florida-based emergency medicine revenue cycle management company. They are a national company and have been doing business since 1998. All the data to follow is directly from that billing company from 2016.

[Access Full Article \(PDF\)](#)

[Demetropoulos S., Letters: Are insurance companies keeping physician payments in line with

the rising costs of medical practice?. J Miss Med Assoc.2017; 58(3):91-92].

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ACEP assists DMAT teams as they prepare to respond to Hurricane Harvey

Rick Murray, EMT-P

Director, Dept of EMS and Disaster Preparedness

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





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

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

National Disaster and Life Support Foundation

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

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

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

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

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

NDLSF
National Disaster Life Support Foundation

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

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

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

For more information - www.ndlsf.org
email us: info@ndlsf.org

White Coat Day on Capitol Hill at ACEP17

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

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

Register for White Coat Day at ACEP17!

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



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

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

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

WWW.ACEP.ORG/ACEP17/HILLDAY

ACEP17 Wellness Activities and Resource Center Giveaways

Wellness & ACEP Resource Center

Sunday, October 29 - Tuesday, October 31

Location: Exhibit Hall

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

Product Giveaways

Held daily in the Resource Center

Sunday –PEER

PEER one-year membership

PEER Print Companion

Monday – CDEM

Trauma special edition

2- year print

One-year Residency Education Portal

Tuesday – ACEP eCME

My Residency Learning Portal

Trauma, Stroke, Cardiovascular bundle

Procedures and skills course

Featured guest on ACEP Frontline

Articles of Interest in *Annals of Emergency Medicine*

Sandy Schneider, MD, FACEP

ACEP Associate Executive Director, Practice, Policy and Academic Affairs

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

No Emergency Department is Immune from Violence

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

Welcome New Members

Josh Bailey, MD
Joseph H Blackwell
Gregory P Bookout, DO
Brooks M Briel
Ian Broussard, DO
Josh D Burton
Andrew P Connor, DO
Nora Demchur
Nicolas E Ellis
David Erazo
Samuel Fleming, MD
Steven Graves, MD
Warren C Harvey, Jr
Aaron M Hittson, MD
Marykate Rhiannon Kalotschke, MD
Lauren Kinley, DO
Jonathan Leggett, DO
William Alexander Manning, MD
Meridith Marlow
Jacob Pope, DO
James P Pursglove
Robert Razick, MD
Anthony W Rekito, MD
S Russ Richardson, MD

Eric Ritchardson
Matthew Scalise
Bijal Shah, MD
Joshua Shinoff
Adrienne Elizabeth Soo, MD
Patrick Spotts, MD
Robert C Taylor
Caitlin Tidwell, MD
Jimmy L Turner, II
Jacob Wayland, MD
Andrew Charles Weber, MD
James A Wilkins

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