



# MCEP

ADVANCING EMERGENCY CARE

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Submissions to the July/August Newsletter should be received by the Chapter office no later than September 20, 2017.

# FROM THE PRESIDENT



I am honored and humbled by the privilege to serve as President of the Michigan College of Emergency Physicians. There is no doubt the past 9 months have been extremely difficult for the College. The loss of our Chief Executive Officer, Diane Kay Bollman, has left a tremendous void in the hearts and souls of the College and its members. Many knew Diane more closely and for longer than I did. That being said, she was a tremendous mentor and friend to me. I will remember her warm and loving spirit. She made board meetings feel like a family party. I will also remember how she had the tenacity of a pit bull when it came to the business of the College. Diane had the emotional intelligence to make combination of warmth and tenacity work. She was a special woman. Her passing marks the end of an era in MCEP's past. She will be missed, however she has made a mark on many of the leaders of the College and she will remain with all of us. While not physically present for the first time in the past 25 years at the MCEP Summer Assembly, her spirit was certainly present with all of us. Dr. Dennis Whitehead, MD, FACEP acknowledged her presence in a beautiful and emotional tribute to Diane during his opening remarks of the President's Banquet.

I want to thank our Immediate Past President, Dr. Larisa Traill, MD, FACEP for her efforts over the course of this last year, both professional and personal. Her leadership steadied the ship and kept the College moving in a positive direction. She was a close friend to Diane in her battle against leukemia, and all of her efforts are greatly appreciated. We also need to thank Christy Snitgen, our Associate Executive Director, who served as the backbone of the college for better part of the past year. She also kept us on course, ran the business of the college single handedly, and did it with her trademark smile and positive attitude. Christy is undoubtedly one the greatest assets of the College.

We must now look at the present state of MCEP and into our future. I have learned a lot about the business of the College in the last year, but what I learned the most about the College is what an outstanding group of people we currently have. The leadership we have, both past and present is second to none. The contribution of past leadership to our executive director search was invaluable. I am confident we made an excellent hire and I am happy to welcome our new executive director, Belinda Chandler,

to the College. Presently, we are pushing forward on the fight to make the assault on a health care worker become a felony in Michigan. EMTALA puts emergency physicians and our staff in a unique position to deliver care, and we all deserve this protection. This is our top legislative priority. We are also closely monitoring the opioid legislation in Congress. We are in an excellent position to give input to legislators in regards to how to best serve patients and providers in the midst of the opioid crisis.



Jacob Manteuffel, MD, FACEP

Looking to the future of MCEP and emergency medicine, I believe we will be leaders in the world of health care reform. MCEP had the foresight to prepare our own opioid prescribing guidelines in 2012, 5 years ahead of the testimony Dr. Rami Khoury MD, FACEP gave to the State of Michigan House Health Policy Committee on the opioid crisis this past spring. MCEP will continue this foresight and establish our own quality metrics via our Quality committee. We now have the technology for electronic medical record sharing and MCEP can promote this sharing, aggregate data, and demonstrate to the State of Michigan our desire to provide high value, cost effective care to our patients. The future of MCEP is bright and the leadership is strong and growing in numbers thanks to Dr. Robert Malinowski MD, FACEP and his leadership development program.

I look forward to the year ahead. We will celebrate our past, enjoy the present, and plan for the future of emergency medicine. I welcome the institutional memory of our past leaders. I also welcome all of our members to share ideas with me as to where the college should be heading. The power of the College does not rest alone with its President or the Board, but with all of its members striving to improve the future of our specialty. I look forward to working with all of you to improve emergency medicine for physicians and our patients. §



*The family of Diane Kay Bollman gives thanks and appreciation for your support, prayers, thoughts and encouragement at the death of Diane, and during the last eight months of her life. Diane fought leukemia valiantly and without complaint.*

*Love,*

*Jim, Tara, Matt, Henry, Claire, and Brian*



## 44TH MICHIGAN EM ASSEMBLY



*Gregory Gafni-Pappas, DO, FACEP*

The 44th Michigan College of Emergency Physicians was held at the beautiful Grand Hotel on Mackinac Island on July 30-August 2, 2017. Over one hundred forty physicians and other emergency medicine specialists and their families participated in three days of excellent educational programs and family fun.

The conference started Sunday afternoon with a Hyperkalemia Symposium. The MCEP traditional Opening Reception took place on the Front Porch with a breathtaking view of the Mackinaw Straights. Adults enjoyed cocktails and hors d' oeuvres, while children took pleasure in their very own reception with crafts and treats.

Monday, July 31st kicked off the educational segment of the Assembly with our exceptional speaker lineup. The Annual Membership Meeting followed with elections that were held for the 2017-2018 MCEP Board of Directors. Congratulations to the newly-elected Board members: Michael Fill, DO, FACEP, Michael Gratson, MD, Emily Mills, MD, and Marcus Moore, DO, FACEP. Congratulations are also in order for Andrew Goodrich, DO who was appointed on the Board as the new candidate representative. Dr. Traill gave her outgoing Presidential address and was presented with her presidential jacket along with handing over the gavel to MCEP's new President, Jacob Manteuffel, MD, FACEP.

Immediately following the Annual Meeting was the first 2017-2018 Board of Director's meeting. The elected officers for the 2017-2018 Executive Committee positions were:

- President: Jacob Manteuffel, MD, FACEP
- President-Elect: Rami Khoury, MD, FACEP
- Treasurer: Warren Lanphear, MD, FACEP
- Secretary: Nicholas Dyc, MD, FACEP

The annual "Minute to Win It" fundraiser for MEDPAC was once again a success. It was a fun activity for physicians, families and exhibitors to show off their talent trying to complete a particular task in 60 seconds or less. The winning team this year was Dr. Michael Baker, Jenny Hsu, Allison Baker, Jessica Baker, and Timothy Baker. Congratulations to all!

The Gregory L. Henry, MD, FACEP Lecture featured Kevin Klauer, DO, EJD, FACEP, speaking on the topic of "Litigation Stress and the Emergency Physician." The Presidents' Banquet followed where MCEP was honored by the presence of 17 Past MCEP Presidents. Annual awards were presented to the following:

- Emmanuel Rivers, MD, MPH – John A. Rupke, MD, Lifetime Achievement Award
- Tolulope Sonuyi, MD – Emergency Physician of the Year Award
- Antonio X. Bonfiglio, MD, FACEP – Legacy Award
- Kevin Monfette, MD, FACEP – Ronald L. Krome, MD, Meritorious Service Award

Thank you to the following vendors who without their support we would not be able to provide this top-notch conference to our members:

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Thank you also to the Following Exhibitors:

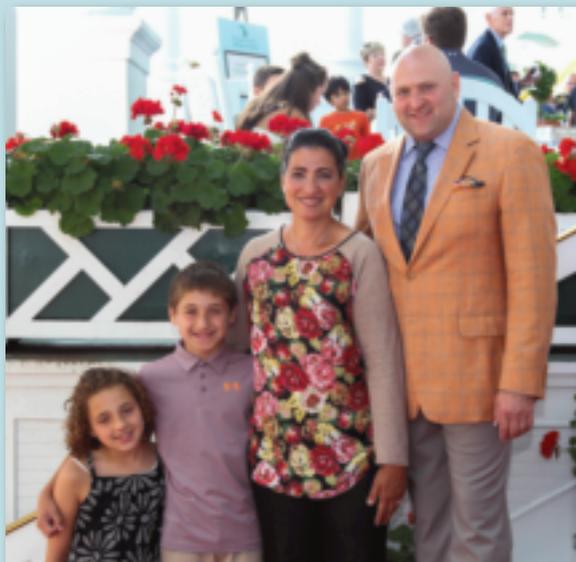
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The last weekend in July next year, July 29-August 1, 2018, the College will return to the Grand Hotel on Mackinac Island for the 45th Annual Michigan Emergency Medicine Assembly. This event will once again continue to provide up-to-date information on issues, topics, and techniques that will help emergency physicians strengthen their practice along with fun activities for the whole family. §



# 2017 Scientific Assembly

## Opening Reception



# Annual Meeting



*President, Jacob Manteuffel, MD, FACEP, presents his Inaugural address.*



*Dr. Jacob Manteuffel receives the traditional presidential gavel from Past President, Dr. Larisa Traill.*



*Dr. Larisa Traill in her President's jacket.*



*Dr. Jacob Manteuffel presents outgoing president, Dr. Larisa Traill, with the gavel award for her service to the chapter.*

# Minute to Win It Event



# President's Banquet



*MCEP was honored by the presence of 17 Past MCEP Presidents.*



*Dr. Antonio Bonfiglio (right) receives this year's Legacy Award from Dr. Bradford Walters.*



*Diane's Sparkle was still shining bright at the President's Banquet.*



*Dr. Kevin Monfette (left) receives this year's Ronald L. Krome, MD Meritorious Award from Dr. Nicholas Dyc.*



*Dr. Emmanuel Rivers (left) receives this year's John A. Rupke, MD Lifetime Achievement Award from Dr. Jacob Manteuffel.*



*Dr. Tolulope Sonuyi (right) receives this year's Emergency Physician of the Year Award from Dr. Brian O'Neil.*

## CALENDAR YEAR 2018 CMS PROPOSED RULE HIGHLIGHTS ON E&M CODING

### YOUR FEEDBACK IS NEEDED

Whether providers choose to use the CMS 1995 or 1997 Evaluation and Management (E&M) Documentation Guidelines, the following three key components are currently required to bill E&M services.

- History of Present Illness (HPI)
- Physical Examination (PE)
- Medical Decision Making (MDM)

CMS is seeking comments on whether they should relax the current E&M Documentation Guidelines for calendar year 2018, citing they create an unnecessary administrative burden for providers and, due to electronic health records, higher levels of E&M services are reported.

Specifically, CMS is seeking replies on whether they should **eliminate the documentation requirement for History and Physical Exam and allow Medical Decision Making and/or Time** to serve as the sole determinant(s) of an E&M visit.

CMS further notes that while a complete overhaul is needed of current Document Guidelines, including Medical Decision Making, it will take time, and the move to eliminate the requirement of HPI & PE would be the first step in achieving the goals of reduced clinical burden and improved documentation for patient care.

Should you wish to comment on this topic, you have until September 11th to submit your reply either electronically or by mail to CMS.



Lynn Nutting

- **Electronic Comments:**  
<http://www.regulations.gov> Search 1676-P and click on "Comment Now"

- **Standard Mail Comments:**  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attn: CMS-1676-P  
PO Box 8013  
Baltimore, MD 21244-1850

CMS is also seeking opinions on whether the Work RVUs for Emergency Department Visits, **CPT 99281-99285, have been undervalued "given the increased acuity of the patient population** and the heterogeneity of the sites." Should CMS decide to review the Work RVUs, they would be reviewed under the Misvalued Code Initiative. If you believe ED Visit Work RVUs are undervalued, please make the case with CMS and comment on this proposal as well.

Proposed Rule link: <https://www.gpo.gov/fdsys/pkg/FR-2017-07-21/html/2017-14639.htm> Page 34078/9 for E&M. Page 33978 for Emergency Medicine Work RVUs. §



### MCEP Calendar of Events

- |   |  |
|---|--|
| <p><b>September 6, 2017</b><br/>Board of Directors<br/>Chapter Office<br/>Lansing, Michigan</p>                               | <p><b>October 29 - November 1, 2017</b><br/>ACEP Scientific Assembly<br/>Washington, DC</p>    |
| <p><b>September 14-15, 2017</b><br/>Observation Medicine Course<br/>Double Tree Downtown<br/>Nashville, Tennessee</p>         | <p><b>November 13, 2017</b><br/>LLSA Review Course<br/>Chapter Office<br/>Lansing, MI</p>      |
| <p><b>October 10, 2017</b><br/>MCEP Councillor &amp; Board of Directors Meetings<br/>Chapter Office<br/>Lansing, Michigan</p> | <p><b>November 16, 2017</b><br/>Straight Talk<br/>The Johnson Center<br/>Howell, Michigan</p>  |
| <p><b>October 27-28, 2017</b><br/>ACEP Council Meeting<br/>Washington, DC</p>   | <p><b>December 6, 2017</b><br/>Board of Directors<br/>Chapter Office<br/>Lansing, Michigan</p> |

### PHYSICIANS/POSITIONS AVAILABLE

**BE/BC Emergency Medicine Physician Opportunity in Beautiful Rural Michigan:** CASS CITY, MI: Seeking a BC/BE Emergency Medicine Physician for a full-time position in our 5,500 visits/year, low volume Emergency Department. This is an opportunity to practice Emergency Medicine in a spacious new Emergency Department with supportive administration and outstanding ancillary staff. All of our ER physicians work 24-hour shifts and have an on-call suite for resting at night. The hospital offers competitive compensation which includes comprehensive benefits, CME and PTO. If interested please send CV to Cassie VanValkenburgh - Manager of Medical Staff Services at [cvanvalkenburgh@hillsanddales.com](mailto:cvanvalkenburgh@hillsanddales.com) or call 989-912-6296 for more information.

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# WELCOME TO OUR NEW EXECUTIVE DIRECTOR!

The Michigan College of Emergency Physicians recently announced the appointment of our new Executive Director, Belinda Chandler, CAE.

A native of Michigan, Ms. Chandler has over twenty years of experience in governance, communications, community relations, and program management in the healthcare field. She comes to us most recently from the Washtenaw County Medical Society, where she served as the Executive Director for the past four years, single-handedly managing one of the largest county medical societies in the state. She also has extensive experience in leadership, advocacy, fiscal management, and membership recruitment.

Ms. Chandler comes highly recommended, not only by one of her mentors, our own CEO, Diane Kay Bollman, but also by two of our past presidents, Drs. James Mitchiner and Brad Uren, who have worked with her in her previous position.

Dr. Brad Uren, MCEP President 2012-2013, is the immediate past president of the Washtenaw County Medical Society and has worked closely with Belinda over the past several years.

“Belinda brings to MCEP a wealth of knowledge from her previous

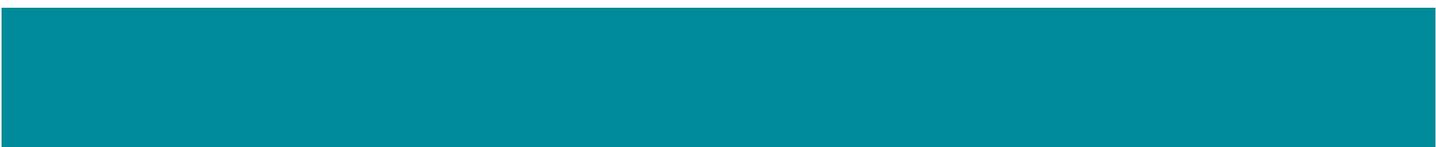
experiences, as well as endless enthusiasm and energy. We are lucky to have someone of her talent and ability managing the College as we confront the challenges ahead. I know that we are in good hands.”

Larisa Traill, Immediate Past President of MCEP: “Belinda’s background, both in her work for the State of Michigan as well as for the Washtenaw County Medical Society, will be invaluable to the College as we look to the future. Through my time working with both Diane and Belinda, it is clear that Belinda not only understands MCEP’s mission but also is ideally suited to enable our members to continue to lead advances in emergency care.”

“After being mentored by Diane for two years, and knowing MCEP’s reputation in the nation, I am excited for this opportunity to build on leadership’s and Diane’s successes, as we continue our innovative lead into the future,” said Belinda.

Ms. Chandler was formally introduced to the membership at the Annual Membership Meeting on July 31, 2017 at the Grand Hotel on Mackinac Island.

Please join us in welcoming her to MCEP!





**WHO SHOULD ATTEND?**  
Physicians preparing for a certification or recertification exam and those looking for a comprehensive review of Emergency Medicine or a CME resource.

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# MCEP OBSERVATION MEDICINE COMMITTEE

By: Rhett Brandenburg, MD, FACEP, Jason Ham, MD, FACEP, Margarita Pena, MD, FACEP, and Observation Medicine Committee members

In continuing our goal of establishing evidence-based recommendations of Observation Medicine protocols, our committee has created a protocol for the management of Acute Heart Failure in an observation unit. Protocols can help select appropriate observation candidates, and guide treatment and disposition. This protocol can serve as a compliment in the treatment of heart failure at your institution. It also requires proper vetting, support, and implementation to succeed. We hope these protocols can assist other emergency physicians that currently have or are thinking of starting an observation unit.

## MCEP HEART FAILURE PROTOCOL

### INCLUSION CRITERIA<sup>[1, 2, 5]</sup>

- Pulse ox  $\geq$  90% with normal home requirements.
- Clinical improvement with ED treatment.
- High likelihood of further clinical improvement and discharge home within 24 hours.

### ABSOLUTE EXCLUSION CRITERIA<sup>[1, 2, 3, 5, 6]</sup>

- **Clinical exam:** Acute confusion or delirium. Signs/symptoms of impending respiratory fatigue or failure (ex. High RR, requiring Bipap, accessory muscle use).
- **Objective findings:** SBP < 100mmHg or symptomatic hypotension. Troponin elevation from baseline. Significant dysrhythmia or new ischemic ECG changes.
- **Treatment requirements:** Patient requiring inotropic support or active titration of vasoactive medications.
- Clinical deterioration despite ED therapy.
- Presence of serious active co-morbidities (ex. ACS, COPD, pneumonia, thyroid storm).

### SUGGESTED EXCLUSION CRITERIA<sup>[1, 2, 6]</sup>

- Serum Na < 135 mEq/L.
- Cr > 3 mg/dL or BUN > 40 mg/dL.
- Anemia requiring transfusion.
- BNP elevations over 50% of patients baseline or BNP > 1000 pg/mL or NT-BNP > 5000 pg/mL.
- Significant barriers to self care not addressable within 24 hours.
- New onset CHF.

### CDU INTERVENTIONS AS INDICATED<sup>[7, 5, 8, 4, 12, 15]</sup>

#### Monitoring:

- Continuous cardiac and pulse oximetry monitoring.
- Daily weight as well as strict daily intake and output monitoring.
- Labs: Troponin, BMP, BNP, magnesium level.
- Repeat ECG.

#### Evaluation:

- Identify ADHF triggers [see Table 1].
- Perform thorough medication reconciliation and identify any potential medication triggers of acute decompensated heart failure (e.g. NSAIDs, calcium channel blocker if EF < 40%, Actos/Avandia, gabapentin).
- If no obvious inciting event and no echocardiogram within six months, consider transthoracic echocardiogram.

#### Treatment:

- Sublingual, oral, or topical nitrates.
- Place on fluid and sodium restricted diet (2 L/day and 2 g sodium per day).
- IV loop diuretic dosed BID for fluid over-loaded patients, continue IV loop diuretic with dose up to 2.5 times greater than home oral dose BID. Transition to lower IV dosing or oral dosing as volume status normalizes.
- Optimize home medications with a goal BP < 130/80 mmHg in those with hypertension.
- Document patient's optimized weight.

#### Disposition planning:

- Risk factor modification (smoking cessation, dietary recommendations, medication compliance).
- Heart failure education.
- Case management evaluation for home care and arrangement for a home scale if needed.
- Arrange heart failure focused outpatient follow up with PCP or cardiologist, ideally within one week to further optimize outpatient treatment regimen.

### DISPOSITION<sup>[7, 5, 11, 9, 10, 16]</sup>

#### Home:

- Improvement in symptoms with ability to lay flat and ambulate without recurrent symptoms or hypoxia (if ambulatory).
- No significant alterations in serum chemistries (particularly Na and Cr).
- Transition from IV to oral medications and appropriate med reconciliation has been completed.
- ACEI or ARB for patients with systolic dysfunction without AKI.
- Once the patient is not acutely decompensated ensure beta blocker use for systolic dysfunction (EF < 40%, only Coreg (carvedilol), Zebeta© (bisoprolol) or Toprol XL/CR© (metoprolol) proven to reduce mortality).
- A therapeutic regimen of an ACE inhibitor or ARB or ARNI (Angiotensin Receptor-Nepriylsin Inhibitors) along with a beta blocker and an aldosterone antagonist is the recommended therapy for patients with chronic symptomatic heart failure with a reduced ejection fraction.
- Outpatient follow up arranged with PCP or cardiology within 7 days.
- Reason for exacerbation has been addressed.
- Consider need for sleep apnea referral and testing as outpatient.

#### Admission:

- Criteria for discharge have not been met.
- Worsening clinical picture despite appropriate therapy.
- No or minimal response to OU therapy.
- Requiring vasoactive infusion (e.g. milrinone).

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**Table 1 ADHF Triggers**

Medications	Uncontrolled BP	Thyroid dysfunction
Dietary factors	Uncontrolled DM	Sleep apnea
ACS	Alcohol and substance abuse	Tobacco use

The MCEP Observation Committee meets quarterly to discuss current issues and common goals of Observation Medicine in our state. Our members consist of Observation medical directors and physicians. We welcome anyone with an interest in Observation Medicine to join our committee! Please contact Margarita Pena at: [margarita.pena@ascension.org](mailto:margarita.pena@ascension.org).

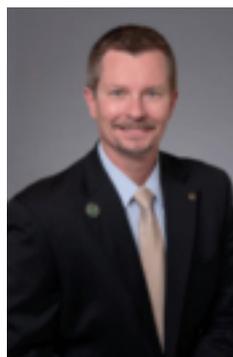
MCEP Observation Committee members:

Margarita E. Pena, Committee Chair (St. John Hospital and Medical Center, Detroit); Rhett Brandenburg (St. John Macomb-Oakland Hospital, Warren); Jason Ham (University of Michigan, Ann Arbor); Dan Heinen (Providence Hospital, Novi); Phil Lewalski (Detroit Receiving Hospital, Detroit); Kevin Omilusik (Munson Medical Center, Traverse City); Kate Redinger (Borgess Medical Center, Kalamazoo)

**Save the Date! The 2017 Observation Medicine – Science and Solutions Conference sponsored by MCEP will be held on Sept 14 and 15 in Music City Nashville, TN!** During this two-day conference you will learn directly from and have opportunity to network with leaders and authors of Observation Medicine from across the country. Topics include how to start and successfully manage an observation unit, convincing your administration to start an observation unit, understanding and maximizing reimbursement for observation services, and CMS updates related to observation services, just to name a few. This year we will also have two tracks on Day 2 for those starting an OU and those looking to expand their OU. See the MCEP website for more details about the conference. §



## A KUDOS TO



**Terry Kowalenko, MD, FACEP** was elected President of the American Board of Emergency Medicine (ABEM).

Dr. Kowalenko is Professor of Emergency Medicine at the Oakland University William Beaumont School of Medicine and Chairman of Emergency Medicine at Beaumont Hospitals in Royal Oak, Troy and Grosse Pointe. He is also a past president of MCEP.



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**MICHIGAN COLLEGE OF  
EMERGENCY PHYSICIANS**

**Executive Committee**

Jacob Manteuffel, MD, FACEP — *President*  
president@mcep.org

Rami Khoury, MD, FACEP — *President-Elect*

Warren Lanphear, MD, FACEP — *Treasurer*

Nicholas Dyc, MD, FACEP — *Secretary*

Larisa Traill, MD, FACEP — *Immediate Past President*

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