

President-Elect Candidates





2023 President-Elect Candidates



Jeffrey M. Goodloe, MD, FACEP

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Alison J. Haddock, MD, FACEP

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Ryan A. Stanton, MD, FACEP

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2023 PRESIDENT-ELECT CANDIDATE WRITTEN QUESTIONS

Jeffrey M. Goodloe, MD, FACEP

Question #1: How would you address concerns that ACEP may be unduly influenced by corporate practice interests?

I'll address such concerns directly, relating my cumulative experience during nearly four years of service to date on the ACEP Board of Directors. I genuinely believe that for ACEP to ethically represent *all* of its members, ACEP must be vigilant to avoid being "unduly influenced" by *any* interests other than those that seek to serve *all* of its members with integrity, accountability, and transparency.

Given today's challenging health care environments, I believe what current and potential ACEP members understandably fear is loss of abilities to optimally care for patients, to create growth-minded workplaces, to have entrepreneurial freedoms in forming democratic group practices, to have opportunities to promote in any practice structure, and to provide for their loved ones. Now, what does that pragmatically mean? Such fear may foster cynicism that elected ACEP leaders will sell the aspirations and very souls of emergency physicians for personal windfall through ACEP advocacy and policy that serves self above others, or alternatively, silence when advocacy and policy should speak loudly. Let's speak candidly about this. How often do I encounter "serving self before others" actions by ACEP Board of Directors members? Truly, I haven't seen one appreciable instance yet. If such motive more secretly exists, it certainly hasn't won a contested vote or set a course of ACEP advocacy. Instead, what I've found is a diverse group of leader members, changing yearly in composition, and continuously unified in protecting and advancing the future for emergency physicians, patients, and our beloved specialty.

I welcome both ACEP's most ardent supporters and harshest critics to attend ACEP Board of Directors meetings. Concerns, fears, suspicions, and outright distrust is fostered, unintentionally or otherwise when unknowns are created. Seeing and hearing firsthand your Board of Directors debate and decide advocacy and policy is a powerful way to dissolve prior unknowns and to prevent future ones forming.

ACEP communications now highlight the College's annual budget reflects less than one percent of revenue comes from contract management groups, and by extension, related corporate practice interests. Better quantified, the meaningful measure of ACEP avoiding undue influence by corporate practice interests is found in the College's day to day advocacy priorities and policy making deliberations. I fully support ACEP's statement on private equity and corporate investment in emergency medicine (https://www.acep.org/administration/physician-autonomy/acep-statement-on-private-equity-and-corporate-investment-in-emergency-medicine), voting for the statement's passage in April 2022. I am equally committed to continuing representing *all* ACEP members in my elected duties on your Board of Directors and as an enthusiastic candidate to be your next President-Elect.

Question #2: What are your ideas for creating and/or providing tangible and indispensable benefits to ACEP members?

For years now, I have found in successfully recruiting members, and in retaining happy members, in ACEP equates to emergency physicians finding tangible value in ACEP. What does that tangibility look like? There are at least some commonalities we share as emergency physicians choosing ACEP membership. Unimpeded patient access to our care for time-sensitive emergencies, fair reimbursement for our skilled services, liability protections for our care within reasonable clinical standards, and safe workplaces without discrimination for who we are as individuals are just a few of those values in which we can all find combined advocacy through ACEP to be stronger than ours as lone individuals.

We must better promote what ACEP advocacy at both federal and state levels achieves. Some recent examples of success are found in the passage of the Dr. Lorna Breen Health Care Provider Protection Act (federal), requiring trained security officers in every emergency department (Virginia), requiring physician leadership of emergency departments and a physician being physically present in the emergency department at any hospital (Indiana), and protecting our physician scope of practice that protects our physician practice opportunities from independently practicing nurse practitioners or physician assistants (Louisiana). Each and all of these examples are achievements empowered by ACEP and ACEP state chapters. It is unlikely, if not impossible, that any of us could have achieved these important wins for emergency physicians and our patients by individual action alone.

Beyond these examples of widely shared goals, each of us as emergency physicians find parts of our specialty's practice that we focus on for differing reasons, perhaps because we identify with an underrepresented population in our society, we have a family member with a particular illness or injury, or we discover an emergency medicine subspecialty in which we can satisfy our

intellectual curiosities. Apart from our roles and abilities as emergency physicians, we may develop a passion for non-medical aspects of life (travel, history, writing, etc.). Any of these more individualized choices can be enriched through the ACEP community, be it through clinical education resources, speaking opportunities at conferences or via webinars, or one of the latest College services, member interest groups that connect us with like-minded colleagues.

The key in any and all of this is to first listen to the answer to this question, "What excites you about emergency medicine?" The answer, or more likely answers, can then lead to discovering how much ACEP actually is doing today and might include in future products and services. While the College cannot realistically be all things to every member, the reality is we each can benefit by the College growing in membership. A growing College is a stronger College, with capabilities for additional member resources. As your immediate past Secretary/Treasurer, I am significantly educated on our annual budget. Membership dues are currently the second largest revenue source, trailing only educational meetings. The Board of Directors is wisely focused on growing non-dues revenue sources. While accreditation programs for geriatric emergency medicine, pain and addiction care in the emergency department, and emergency departments in general are primarily designed to improve resources and capabilities to benefit both patients and emergency physicians, these each represent non-dues revenue streams to enable ACEP to create more tangible resources for members, from smartphone apps to significant wins in reimbursement, liability protection, and work opportunities.

Question #3: What new thoughts do you have in balancing board certified emergency physician workforce distribution gaps and safe scope of practice for non-physicians?

Advances often come through focusing on executing fundamental actions particularly well. Coach John Wooden was famous for focusing on the fundamentals, sometimes called "little things." When those same fundamentals done right achieve great success, they aren't little at all. How does that apply to the role of the board certified emergency physician? Fundamentally, I believe every patient coming to an emergency department is best served by care delivered by board certified emergency physicians. Period.

So, to that end, I don't believe there is a "balance" when it comes to board certified emergency physician anything and scope of practice for non-physicians anything. If that sounds distinctly definitive, then point purposefully made.

Does this lack of balance I promote equate to no role(s) for non-physicians in an emergency department? Considering I've worked with numerous physician assistants and nurse practitioners in emergency departments over my 25 years post-residency, you may correctly surmise I have found successful inclusion, which by my definition "successful" includes safety for all involved, of physician assistants and/or nurse practitioners on a **physician-led** team in an emergency department. Did I bold type "physician-led" in that last sentence? Good. Another point purposefully made.

As your national ACEP liaison to the American Academy of Emergency Nurse Practitioners (AAENP), I have the incredible honor, privilege, and responsibility to be your "voice" during AAENP Board of Director meetings. I assure you that I speak for you clearly, respectfully, responsibly, and always in a manner that promotes, first and foremost, the principle that board certified emergency physicians must be the leaders of care in any emergency department.

Today's reality is many rural emergency departments are staffed solely by physician assistants and/or nurse practitioners. On functionally useless in real time to patient care on-call rosters, these same physician assistants and/or nurse practitioners may be "backed up" by physicians. Often these "back ups" are located 20-30 minutes from being physically present when called to assist patient care at the bedside. Factoring such, an order to transfer the patient immediately by ground or air EMS is the only actual support per se these non-physicians receive. I believe that's an untenable risk to everyone involved, particularly the patient expecting safe, clinically accurate emergency care.

Our Indiana ACEP colleagues have helped us all as emergency physicians in championing the passage of state legislation mandating a physician leading a hospital's emergency department to be physically present in that hospital. While that law today does not specify that physician must be a board certified emergency physician, we can readily understand that to be the next step of progress in a future legislative bill that builds upon today's advance in care. This is an important opportunity for board certified emergency physicians to secure those positions today, impressing upon hospital administrations the essential benefits to the patients, the medical staff, and the hospital itself uniquely enabled by board certified emergency physicians.

In select situations, technology may provide opportunities in the interim until similar laws can be promulgated nationwide. Colleagues at the University of Mississippi Medical Center have developed a robust telehealth network with over 25 critical access hospitals in that state. Physician assistants and/or nurse practitioners receive real-time telehealth consults from residency faculty, board certified emergency physicians in Jackson. The volume over time has allowed for full-time faculty shifts focused on telehealth consults. Today, not in spirit, but in true impact, care is increasingly emergency physician led in these networked emergency departments. We must always work against a balance. The weighting must strongly be on patient safety and on expanding the opportunities for board certified emergency physicians. ACEP advocacy, both nationally and increasingly through state chapter support, is more important than ever in achieving these goals.



CANDIDATE DATA SHEET

Jeffrey M. Goodloe, MD, FACEP

Contact Information

3720 E 99th PL, Tulsa, OK 74137 (Home)

Phone: 918-704-3164 (Cell)

E-Mail: jeffrey-goodloe@ouhsc.edu (Work); jeffreygoodloe911@gmail.com (Personal/ACEP)

Current and Past Professional Position(s)

Attending Emergency Physician - Hillcrest Medical Center Emergency Center - Tulsa, OK

Professor of Emergency Medicine; EMS Section Chief; Director, OK Center for Prehospital & Disaster Medicine University of Oklahoma School of Community Medicine – Tulsa, OK

Chief Medical Officer, Medical Control Board, EMS System for Metropolitan Oklahoma City & Tulsa, OK

Medical Director, Oklahoma Highway Patrol

Medical Director, Tulsa Community College EMS Education Programs

Past Positions

Item Writer, EMS Examination & myEMSCert modules; Item Writer & Co-Editor, EMS LLSA, ABEM

Attending Emergency Physician – St. John Medical Center – Tulsa, OK

Attending Emergency Physician - Saint Francis Hospital Trauma Emergency Center - Tulsa, OK

Attending Emergency Physician – Medical Center of Plano – Plano, TX

Medical Director, Plano Fire Department – Plano, TX

Medical Director, Allen Fire Department – Allen, TX

Education (include internships and residency information)

EMS Fellowship – University of Texas Southwestern Medical Center at Dallas (1998-99)

Emergency Medicine Residency – Methodist Hospital of Indiana/Indiana Univ School of Medicine (1995-98)

The Medical School at University of Texas Health Science Center at San Antonio (1991-95)

Baylor University – Waco, TX (1987-91)

MD - 1995

Specialty Board Certifications (e.g., ABEM, AOBEM, AAP, etc.)

ABEM Emergency Medicine Initial Certification 1999, Recertification 2009 & 2019

All MOC components current for present cycle recertification in 2029

ABEM EMS Medicine Initial Certification 2013, All MOC components current & certification extended to 2027 factoring service on EMS Subboard for ABEM

Professional Societies

ACEP member since 1991 (medical student, resident, fellow, active, FACEP)

OCEP (Oklahoma College of Emergency Physicians – State ACEP Chapter)

AMA

NAEMSP (FAEMS)

SAEM

ACHE

Prior memberships in Texas College of Emergency Physicians, Indiana ACEP Chapter, Oklahoma State Medical Association, Tulsa County Medical Society

National ACEP Activities – List your most significant accomplishments

Secretary-Treasurer, ACEP Board of Directors (2021-2022)

Member, ACEP Board of Directors (2019-present; elected 2019; re-elected 2022)

Member, Council Steering Committee, ACEP Council

Chair, Reference Committee, ACEP Council

Member, Reference Committee, ACEP Council

Councillor, Oklahoma College of Emergency Physicians

Councillor, EMRA

Chair, EMS Committee

Member, EMS Committee

Member, Bylaws Committee

Member, Internal & External Membership Committee Taskforces

ACEP Chapter Activities – List your most significant accomplishments

President, Oklahoma College of Emergency Physicians Vice-President, Oklahoma College of Emergency Physicians Councillor & Board Member, Oklahoma College of Emergency Physicians

Practice Profile

Describe current emergency medicine practice. (e.g. type of employment, type of facility, single or multi-hospital group, etc.)

I am employed full time by the University of Oklahoma School of Community Medicine. My roles include serving as medical school faculty as a professor of emergency medicine and clinically as an attending faculty physician in the Hillcrest Medical Center Emergency Center (Comprehensive Stroke Center, full-service cardiovascular institute site - including ECMO and VAD surgeries, Level III Trauma Center, regional burn center for geographical areas of four states, Level III NICU) supervising residents in Emergency Medicine, Internal Medicine, Family Medicine, OB/GYN, fellows in Pediatric Emergency Medicine, and medical students. The University of Oklahoma Department of Emergency Medicine faculty partially staffs four emergency departments in Tulsa and Oklahoma City, employing a university academic group/regional democratic private group collaborative structure. I am staff credentialed at Hillcrest Medical Center in Tulsa, the base hospital for the EM residency, though I have been staff credentialed in prior years at two other teaching community hospitals in Tulsa. I also serve as the Chief Medical Officer for the EMS System for Metropolitan Oklahoma City and Tulsa, clinically leading over 2,800 credentialed EMS professionals working in an ambulance service, fire departments, law enforcement agencies, industrial emergency response teams or emergency communications centers. I further serve as a tactical emergency physician and Medical Director for the Oklahoma Highway Patrol, responding on emergency tactical missions across the entire state. Additional practice roles include special events medical support planning for metropolitan Oklahoma City and Tulsa and as an educational program medical director for EMT and Paramedic education at Tulsa Community College. I also frequently lecture at national educational meetings, such as the EMerald Coast Conference (multiple ACEP state chapter annual conference in Florida) and EMS State of the Science – A Gathering of Eagles.

Expert Witness Experience (I am interpreting such as courtroom testimony – JG)

If you have served as a paid expert witness in a medical liability or malpractice case in the last ten years, provide the approximate number of plaintiff and defense cases in which you have provided expert witness testimony.

Defense Expert 1 Cases Plaintiff Expert 0 Cases

No expert witness work since election to the ACEP Board of Directors in 2019.



CANDIDATE CONFLICT OF INTEREST DISCLOSURE STATEMENT

Jeffrey M. Goodloe, MD, FACEP

1. Employment – *List current employers with addresses, position held, and type of organization.*

Employer: University of Oklahoma School of Community Medicine

Address: Department of Emergency Medicine, 1145 S. Utica Ave, 6th Floor

Tulsa, OK 74104

Position Held: Professor; EMS Section Chief; Director – OK Ctr for Prehospital/Disaster Med

Type of Organization: Medical School

2. Leadership Positions in Other Organizations, Chapters, Commissions, Groups, Coalitions, Agencies, and/or Entities (e.g., Board of Directors positions, committees, and/or spokesperson roles) – *List all organizations and addresses for which you have served (past and current) – including ACEP chapter Board of Directors.*

Organization: American College of Emergency Physicians

Address: 4950 W. Royal Ln

Irving, TX 75063

Type of Organization: Medical Specialty Society

Leadership Position: Secretary-Treasurer & Member, Board of Directors

Term of Service: 2019-present (Member); 2021-2022 (Secretary-Treasurer)

Organization: Emergency Medicine Foundation

Address: 4950 W. Royal Ln

Irving, TX 75063

Type of Organization: 501(c)3 Nonprofit Organization for Funding Emergency Medicine Research

Leadership Position: Chair & Member, Board of Trustees

2018-present (Member);2021 (Treasurer);2022 (Chair);2023 (Immed Past

Term of Service: Chair)

Organization: Emergency Medical Services Authority

Address: 6205 S. Sooner Road

Oklahoma City, OK 73135

Type of Organization: Public Utility Model Ambulance Service

Leadership Position: Ex-officio as Chief Medical Officer/Medical Director

Term of Service: 2009-present

3.

4.

Organization:	Organization: American Board of Emergency Medicine		
Address:	3000 Coolidge Road		
	East Lansing, MI 48823		
Type of Organization:	Medical Specialty Board Certification Organization		
Leadership Position:	Member, Item Writer & LLSA Co-Editor, EMS Subboard		
Term of Service:	2019-2022 (Member & Item Writer); 2022 (LLSA Co-Editor)		
Organization:	Oklahoma College of Emergency Physicians		
Address:	No physical office address for OCEP		
	Executive Director is Gabe Graham at gabegraham11@gmail.com		
Type of Organization:	State Chapter of ACEP		
Leadership Position:	Immediate Past President & Member, Board of Directors 2007-present (Member); 2012-2016 (Vice President); 2016-2019 (President);		
Term of Service:	2019-present (Immediate Past President)		
Organization:	Emergency Medicine Residents' Association		
Address:	4950 W. Royal Ln		
	Irving, TX 75063		
Type of Organization:	Professional Medical Association		
Leadership Position:	Past President & Past Member, Board of Directors 1995-1998 (Member); 1995-1996 (President-Elect); 1996-1997 (President);		
Term of Service:	1993-1998 (Member); 1993-1996 (President-Elect); 1996-1997 (President); 1997-1998 (Immediate Past President)		
 Bescribe any outside relationships with any person(s) or entity from which ACEP obtains goods and services, or which provides services that compete with ACEP where such relationship involves: a) holding a position of responsibility; b) an equity interest (other than a less than 1% interest in a publicly traded company); or c) any gifts, favors, gratuities, lodging, dining, or entertainment valued at more than \$100. NONE If YES, Please Describe: 			
II TES, Trease Desertoe.			
Describe any financial interests or positions of responsibility in entities providing goods or services in support of the practice of emergency medicine (e.g., physician practice management company, billing company, physician placement company, book publisher, medical supply company, and/or a malpractice insurance company), other than owning less than a 1% interest in a publicly traded company.			
	blisher, medical supply company, and/or a malpractice insurance company), other		

	ndidate Conflict of Interest Disclosure Statement ge 3
5.	Do you have any family members who are non-physicians providing care to patients, including, but not limited to, nurse practitioners, physician assistants, or certified nurse specialists? Family members include a spouse, domestic partner, parent, child, sibling, grandparent, grandchild, parents, and siblings-in-law, stepparents, stepchildren, guardians, wards, or members of your household.
\triangleright	NONE
	If YES, Please Describe:
6.	If you answered yes to Question 5, is your family member currently or was formerly employed in an emergency

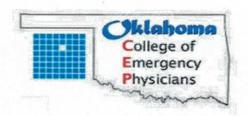
stepchildren, guardians, wards, or members of your household.
NONE NONE
If YES, Please Describe:
6. If you answered yes to Question 5, is your family member currently or was formerly employed in an emergency department or in urgent care?
⊠ N/A
☐ NO ☐ If YES, Please Describe:
7. Describe any other interest that may create a conflict with the fiduciary duty to the membership of ACEP or that may create the appearance of a conflict of interest.
⊠ NONE
☐ If YES, Please Describe:
8. Do you believe that any of your positions, ownership interests, or activities, whether listed above or otherwise would constitute a conflict of interest with ACEP?
⊠ NO
If YES, Please Describe:
9. I have read and agree to abide by the ACEP <u>Conflict of Interest</u> policy statement.
⊠ YES
10. I have read and agree to abide by the ACEP <u>Leadership and Volunteers Conduct</u> policy to ensure that ACEF volunteers, consultants, and staff can perform their valuable services to ACEP free of harassment and discrimination.
□NO
⊠ YES
I certify that the above is true and accurate to the best of my knowledge and belief: Should a possible conflict of

I certify that the above is true and accurate to the best of my knowledge and belief: Should a possible conflict of interest arise, I recognize that I have the obligation to notify the appropriate individual(s) and to abstain from participation in any business of ACEP that may be affected from such perceived or actual conflict of interest until it is determined whether or not a conflict exists and if so how that conflict may be resolved. If any relevant changes occur in my circumstances that would be reasonably viewed as requiring disclosure, I recognize that I have an obligation to file an amended conflict of interest disclosure statement.

Jeffrey M. Goodloe, MD, FACEP

Date

June 9, 2023



August 1, 2023

Re: Endorsement of Jeffrey M. Goodloe, MD, FACEP for election to ACEP President-Elect

Dear Councillors,

On behalf of the Oklahoma College of Emergency Physicians (OCEP), I write to enthusiastically endorse the election of Dr. Jeffrey M. Goodloe as ACEP's next President-Elect.

Dr. Goodloe is well known nationally within ACEP due to his dynamic, servant leadership. Dr. Goodloe's fellow board members signal agreement by electing him ACEP Secretary-Treasurer last year. Results-focused, team-building, clear-speaking leadership is a decades-long "Jeff Goodloe hallmark" starting prior to his EMRA presidency in the late 1990s. He has been a 15-year plus active councillor, serving on Council Steering Committee and reference committees, including chairing a reference committee.

Dr. Goodloe is relentlessly active in advocacy at both state and federal levels, respected among Oklahoma's State and US Representatives and Senators. Tellingly, both Representative Kevin Hern (OK-O1) and Senator Markwayne Mullin (OK) have designated him as the "emergency medicine expert" on their respective healthcare panels. Dr. Goodloe has personally hosted both of these legislative leaders at his local emergency department, including arranging their time with emergency medicine residents at the University of Oklahoma School of Community Medicine. Sen. Mullin counts on Dr. Goodloe's insights to help frame his own advocacy for constituents struggling with opioid use disorder. With Dr. Goodloe at his immediate side in multiple town halls in Oklahoma, then Rep. Mullin pointed out, "Clearly, emergency medicine is not the problem; they (emergency medicine physicians) are part of our answer!"

Dr. Goodloe is an active promoter of Emergency Medicine's future, speaking candidly and passionately about the importance of emergency physicians to the health of our communities and nation. He is dependably a "first call" by ACEP's public relations team when complicated, politically charged issues need a scientifically sound and layperson relatable voice amidst the chaos. Repeatedly, Jeff has proven that resource that we need to reassure our patients and the public that emergency physicians are their allies in health. When much of our society is understandably cynical, it is a trusted leader like Dr. Goodloe that we need speaking as our national President.

Jeff Goodloe's critical thinking and ability to manage dynamic situations has been trusted by generations of ACEP leaders, including multiple ACEP presidents, evidenced in part by a committee chair appointment and multiple appointments to other committees and task forces, either as a member or as board liaison.

Board of Directors President

James R. Kennedye, MD, MPH, FACEP

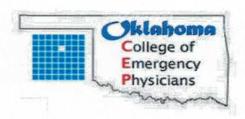
Vice-President Cecelia Guthrie, MD, FACEP Treasurer Timothy Hill, MD, PhD, FACEP Immediate Past President Chad Phillips, MD, FACEP

Members

Jeffrey Johnson, MD, FACEP Derek Martinez, MD (resident) Kurtis Mayz, MD, JD, MBA, FACEP

Craig Sanford, MD, FACEP

Jeffrey M. Goodloe, MD, FACEP



Within The Sooner State, Dr. Goodloe has effectively led OCEP as a Board Member since 2007 and as our President in 2016-2019, helping create a resurgence in engaged chapter membership. We continue to see a multi-generational surge of energy in notable part due to Jeff's tireless encouragement of chapter members' engagement in both OCEP and ACEP. Further, Jeff led OCEP in electing our first resident member to full Councillor status with concurrent election to our board of directors. We are excited to increasingly promote the next generation of emergency medicine leaders in Oklahoma.

Dr. Goodloe is a consummate collaborator and leader, encouraging involvement of any OCEP member willing to serve, especially those focusing on the mentorship of younger members.

We are certain that Dr. Goodloe would verify the above, though reluctantly, given his modest, shining light on others leadership style. I submit to you that it is hard to find a more giving, humble leader with unquestionable integrity and ethics.

In closing, OCEP respectfully and strongly encourages the ACEP Council to elect Jeffrey M. Goodloe, MD, FACEP as ACEP President-Elect and becoming the first Oklahoma-based President-Elect in ACEP history.

Kindest professional regards,

James R. Kennedye, MD, MPH, FACEP

President, Oklahoma College of Emergency Physicians

Jeffrey M. Goodloe, MD, FACEP

Councillors,

I am humbled and motivated by your support while serving you on the ACEP Board of Directors. I so enjoy the privilege of supporting and leading within ACEP – THE home of emergency medicine's future built upon an unparalleled present and past.

In recent years, we experienced unexpected appreciation. Who can forget seeing, if not directly hearing, the public's nightly clanging of pots and pans out windows, off porches, and on balconies to "voice" thankfulness that we put our own health on the line in valiantly treating a novel and serious virus? I didn't expect noisy cooking utensils or any other instrument of praise, though I believe we earned it – not because we are better humans, rather because of what we did and continue to do: carry hope's torch for anyone, anytime, nearly anyplace that needs emergency physician care.

Perhaps you still hear metallic sounds nightly. I do, but it's not pots and pans. I hear motor vehicle collisions, firearm discharges in the chaos of uncontrolled emotions, and industrial accidents. And still we stand at the ready, willing to treat any and all. Widespread praise though has given way to assumptions of our presence.

As I've worked on incredible ACEP teams – committees, task forces, sections, and with fellow Board of Directors members – there is a common thread to our challenges. We are fighting the simple yet powerful fact that we and our specialty have now existed in abundance – at least in urban and suburban areas – and for enough decades that the once unthinkable are now automatic benefits of American life.

Some vocalize we are witnessing the death of our specialty, we are left to gasp cyanotically while choked by private equity, and our once limitless career prospects have departed as surely as Elvis has left the building. I support freedom of speech, but...I ardently assert those prognostications are wrong.

Emergency physicians embrace many roles in a typical career, but we do not embrace the role of victim. That is not our blood type. That is not within our driving values. And that is not what we and our patients need us to do. We must rise at this point in time – this point in OUR time – for ourselves, for our families, for those who will follow us in service, and for our patients.

As I travel across our country, listening at state chapter gatherings and meeting with myriads of emergency physicians, I see understandable angst though I am certain I am seeing something far stronger – determination that we will prevail – in valuing ourselves, in effectively enlisting a public now passively taking us for granted, and certainly in facing those actively committed to devaluing us through automatic denials of fair reimbursement, through replacing us with paper-milled, independently adrift nurse practitioners, and through legislating and regulating all manner of handcuffs upon us against our abilities to do what we nobly do best for anyone needing our compassion and skills.

It is fitting that we meet in Philadelphia, a city equated with visionaries valuing freedom – to pursue, to serve, to achieve. We must recognize that within us – our dedication to one another, this specialty, and our patients – is far stronger than opposition to our shared values. We must find better ways forward to clearly, effectively, relentlessly build the best days of emergency medicine. Our best days are not described in our history; they are ahead.

Jeffrey M. Goodloe, MD, FACEP

JEFFREY M. GOODLOE, MD, FACEP

For Election as ACEP President-Elect

Accountable

service

Consensus

builder

Enthusiastic

commitment

Proven

leadership



ACEP Secretary-Treasurer 2021-2022 Board Service: Elected 2019 & 2022

Task Forces: Hyperactive Delirium & Rural Committees: Membership, Bylaws, EMS,

Pediatric EM

Sections: EMS, Pediatric EM, Geriatric,
Tactical/Law Enforcement, Sports Med
Amer Coll Surgeons Comm on Trauma
Geriatric ED Accred Board of Governors
Past Council Steering Committee Member
Past Council Reference Committee Chair
Past EMS Committee Chair
Past State Chapter President & Councillor

Past EMRA President & Councillor

Proudly endorsed by:



1145 S. Utica Ave, Suite 600 | Tulsa, OK 74104 | 918-704-3164 (Cell) jeffrey-goodloe@ouhsc.edu | jeffreygoodloe911@gmail.com

Jeffrey Michael Goodloe, MD, NRP, FACEP, FAEMS, LSSBB

Address: Department of Emergency Medicine

The University of Oklahoma School of Community Medicine

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Tulsa, Oklahoma 74104

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(918) 704-3164 (Cell)

Fax: (918) 579-2369 (Department Fax)

E-mail: jeffrey-goodloe@ouhsc.edu (EMS/EM/University)

jeffreygoodloe911@gmail.com (ACEP/Special Projects)

II. EDUCATION

1/0 11

School/College	Field of Study	Degree Earned	Year
The University of Texas Medical School at San Antonio	Medicine	MD	1991-95
Baylor University Waco, Texas	Biology	BS, cum laude	1987-91
Scott & White Memorial Hospital Texas A&M University Health Science Center Temple, Texas	EMS	EMT-Paramedic	1990
Oklahoma City Community College Oklahoma City, Oklahoma	EMS	EMT-Intermediate	1989
McLennan Community College Waco, Texas	EMS	EMT-Basic	1988
POST-DOCTORAL TRAINING:			
The University of Texas Medical School at Southwestern Medical Center at Dallas	EMS	Fellowship	1998-99
Indiana University School of Medicine Methodist Hospital of Indiana Indianapolis, Indiana	Emergency Medicine Residency		1995-98

III. PROFESSIONAL EXPERIENCE

1. Academic:

2012-Present Professor and EMS Section Chief

Director - Center for Prehospital and Disaster Medicine

Department of Emergency Medicine

The University of Oklahoma School of Community Medicine

2007-2012 Associate Professor and EMS Division Director

Department of Emergency Medicine

The University of Oklahoma School of Community Medicine

2004-2014 Clinical Assistant Professor

Division of Emergency Medicine, Department of Surgery

The University of Texas Medical School Southwestern Medical Center at Dallas

1998-1999 Assistant Instructor

Division of Emergency Medicine, Department of Surgery

The University of Texas Medical School Southwestern Medical Center at Dallas

Faculty Clinical Duties at Parkland Memorial Hospital

1994-1995 Clinical Instructor

Department of Emergency Medical Technology

School of Allied Health

The University of Texas Health Science Center at San Antonio

1994-1995 Instructor

Emergency Medicine Collaborative Teaching Program

Department of Emergency Medicine The University of Texas Medical School

The University of Texas Health Science Center at Houston

2. Administrative:

2018-Present Medical Director

2010-2016 Oklahoma Highway Patrol Special Response Teams

Tactical, Emergency Medical Services Unit

Riot Control, Bomb, Dive

2014-Present Medical Director

Tulsa Community College

Emergency Medical Services Education Program

2011-Present Emergency Medicine Advisor

Oklahoma City Thunder Professional Basketball Club

National Basketball Association

2010-Present Medical Director

Special Operations Medical Oversight and Support (SOMOS)

Department of Emergency Medicine, EMS Section

University of Oklahoma School of Community Medicine

2009-Present Chief Medical Officer & Medical Director

Medical Control Board, Emergency Medical Services System for

Metropolitan Oklahoma City & Tulsa, Oklahoma

Metropolitan Medical Response System

2008-2009 Associate Medical Director

Medical Control Board, Emergency Medical Services System for

Metropolitan Oklahoma City & Tulsa, Oklahoma

Metropolitan Medical Response System

2003-2007 EMS Medical Director

Allen Fire Department

Allen, Texas

2001-2007 Medical Director, Emergency Response Team

Plano Police Department

Plano, Texas

2000-2007 Medical Director, Automated External Defibrillation Program

City of Plano, Texas

2000-2007 Medical Director, Emergency Medical Technician Education

Plano Independent School District

Plano, Texas

1999-2007 EMS Medical Director

Plano Fire Department

Plano, Texas

1996-1998 Associate EMS Medical Director

Hendricks County EMS Consortium (Avon Fire Department, Brownsburg Fire Department, Danville Fire Department,

Plainfield Fire Department) Hendricks County, Indiana

3. Hospital/Agency

2011-Present Hillcrest Medical Center, Tulsa, Oklahoma

Emergency Medicine Residency Faculty & Emergency Physician

2009-2011	St. John Medical Center, Tulsa, Oklahoma Emergency Medicine Residency Faculty & Emergency Physician
2007-2009	St. Francis Hospital, Tulsa, Oklahoma Emergency Medicine Residency Faculty & Emergency Physician
2006-2011	International Hot Rod Association, Norwalk, Ohio Track Rescue Team Physician
2000-2019	Texas Motor Speedway/North Hills Track Hospital Fort Worth, Texas Track Physician for: NASCAR Monster Energy Cup Series NASCAR Xfinity Series NASCAR Camping World Truck Series IndyCar Series
1999-2007	Medical Center of Plano, Plano, Texas Emergency Physician
1997-1998	Indianapolis Motor Speedway/Hanna Emergency Medical Center Track Physician for: Indy Racing League & NASCAR Winston Cup Series
1996-1998	Hendricks Community Hospital, Danville, Indiana Emergency Resident Physician
1996-1998	Indianapolis Raceway Park, Clermont, Indiana Track Physician for: National Hot Rod Association US Nationals
1996-1998	Methodist Hospital of Indiana, Methodist Health Group Indianapolis, Indiana LifeLine Helicopter EMS, Flight Physician
1992-1995	American Medical Transport, Rural/Metro Corporation Pasadena, Texas EMT-Paramedic
1989-1991	American Medical Transport, Rural/Metro Corporation Waco, Texas EMT-Intermediate & Paramedic

IV. MILITARY EXPERIENCE

None

V. BOARD CERTIFICATION

Emergency Medicine, American Board of Emergency Medicine
Initial Certification 1999; Recertification 2009, 2019 (expires 12/31/2029)
Emergency Medical Services Medicine, American Board of Emergency Medicine
Initial Certification 2013 (expires 12/31/2027)

VI. LICENSES/CERTIFICATIONS

Physician Licenses:

July 1996 - PresentIndianaAugust 1998 - PresentTexasJuly 2007 - PresentOklahoma

EMS Licenses/Certifications:

National Registry of Emergency Medical Technicians Paramedic (active status) EMT-Tactical (active status)

Lean/Six Sigma Certifications (accredited by IASSC):

Black Belt

Creative Insights, Inc.

Green Belt

University of Oklahoma Gallogly College of Engineering White/Yellow Belt – Fundamentals of Lean/Six Sigma University of Oklahoma Gallogly College of Engineering

VII. RESEARCH AND SCHOLARSHIP

1. Grants/Funded Projects

- a. 2015 EMS Medical Director Course and CQI Practicum. Principal Instructor and Course Coordinator for University of Oklahoma School of Community Medicine, Department of Emergency Medicine, EMS Section. Under contract with Rogers EMS Consulting. Project was completed in June 2015 and entailed delivery of the State of Oklahoma EMS Medical Director Course and CQI Practicum in Antlers, Altus, and Fairview. Direct funding at \$6,000 by Rogers EMS Consulting.
- b. 2014 EMS Medical Director Course and Practicum. Principal Instructor and Course Coordinator for University of Oklahoma School of Community Medicine, Department of Emergency Medicine, EMS Section. Under contract with Rogers EMS Consulting. Project was completed in June 2014 and entailed delivery of the State of Oklahoma EMS Medical Director Course and Practicum in Ardmore and Lawton. Direct funding at \$12,500 by Rogers EMS Consulting.
- c. 2013-14 Update State of Oklahoma EMS Treatment Protocols and EMS Medical Director Course and Practicum. Principal Developer for University of Oklahoma School of Community Medicine, Department

- of Emergency Medicine, EMS Section. Under contract with the Oklahoma State Department of Health Protective Health Services EMS/Trauma Division. Project was completed in April 2014 and entailed development of EMS treatment protocols that are endorsed as the official 2014 State of Oklahoma EMS treatment protocols for use by all ground-based EMS agencies. Additional deliverable components included development of update methodologies and curriculum refinement and delivery of the State of Oklahoma EMS Medical Director Course and Practicum in Muskogee and Stillwater. Direct funding at \$40,000 by Oklahoma State Department of Health.
- d. 2011-12 Development of State of Oklahoma EMS Treatment Protocols and EMS Medical Director Course and Practicum. Principal Developer for University of Oklahoma School of Community Medicine, Department of Emergency Medicine, EMS Division. Under contract with the Oklahoma State Department of Health Protective Health Services EMS/Trauma Division. Project was completed in September 2012 and entailed development of EMS treatment protocols that are endorsed as the official State of Oklahoma EMS treatment protocols for use by all ground-based EMS agencies. Additional deliverable components included development of update methodologies and curriculum refinement and delivery of the State of Oklahoma EMS Medical Director Course and Practicum. Direct funding at \$169,000 by Oklahoma State Department of Health.
- e. 2010-11 Development of a white paper on EMS System Design. Principal Editor for University of Oklahoma School of Community Medicine, Department of Emergency Medicine, EMS Division. Project was completed in July 2011 with deliverable exceeding expectation of commissioning entity. Authors were personally recruited from Los Angeles, Salt Lake City, Indianapolis, Birmingham, and Charlotte. Co-Editor is Dr. Stephen H. Thomas. Direct funding at \$27,000 by Emergency Medical Services Authority in Tulsa, Oklahoma.

2. Research Projects

- a. IRB Waived/662445. Paramedic Compliance with a Novel Defibrillation Strategy in a Large, Urban EMS System in the United States. Principal Investigator. Accepted for poster presentation at Canadian Association of Emergency Physicians 2017 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Project involves one EM resident.
- b. IRB Waived/662516. Morbid Obesity Association with Return of Spontaneous Circulation from Sudden Cardiac Arrest Treated in a Large, Urban EMS System in the United States. Principal Investigator. Accepted for poster presentation at Canadian Association of Emergency Physicians 2017 Annual Meeting. Abstract

- published in Canadian Journal of Emergency Medicine. Project involves one EM resident.
- c. IRB Waived/603842. Prevalence and Survival Impact of Bystander Cardiopulmonary Resuscitation in Sudden Cardiac Arrest Victims Treated by a Large, Urban EMS System in North America. Principal Investigator. Accepted for oral presentation at Canadian Association of Emergency Physicians 2015 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine.
- d. IRB Waived/603842. Demographics of Twenty-One Years of Sudden Cardiac Arrest Victims Treated by a Large, Urban EMS System in North America. Principal Investigator. Accepted for poster presentation at Canadian Association of Emergency Physicians 2015 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine.
- e. IRB Waived/603842. The Prevalence and Impact of Ventricular Fibrillation as the Initial Cardiac Arrest Dysrhythmia over Twenty Years in a Large, Urban EMS System. Principal Investigator. Accepted for poster presentation at National Association of EMS Physicians 2015 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for poster presentation at Canadian Association of Emergency Physicians 2015 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine.
- f. Other IRB Waived. The Effect of CPR Quality: A Potential Confounder of CPR Clinical Trials and Important National Healthcare Issue. Co-Investigator. Accepted for poster presentation at National Association of EMS Physicians 2015 Annual Meeting. Abstract published in Prehospital Emergency Care.
- g. IRB Waived/3472. Epinephrine Usage for Allergic Reactions and Anaphylaxis in a Large, Urban EMS System. Principal Investigator. Accepted for poster presentation at Canadian Association of Emergency Physicians 2014 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Accepted for poster presentation at International Conference on Emergency Medicine 2014. Project involves one medical student and one EM resident.
- h. IRB Waived/3319. Tourniquet Utilization in a Large, Urban EMS System. Principal Investigator. Accepted for poster presentation at National Association of EMS Physicians 2014 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for poster presentation at Canadian Association of Emergency Physicians 2014 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Accepted at International Conference on Emergency Medicine 2014. Project involves one EM resident.
- i. IRB Waived/3330. Airway Management in Adult, Non-Traumatic Cardiopulmonary Arrest in a Large, Urban EMS System. Principal

- Investigator. Accepted for poster presentation at National Association of EMS Physicians 2014 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for 2 poster presentations at Canadian Association of Emergency Physicians 2014 Annual Meeting. Both abstracts published in Canadian Journal of Emergency Medicine. Accepted for 2 poster presentations at International Conference on Emergency Medicine 2014. Project involves one undergraduate student, one medical student, and one EM resident.
- j. IRB Waived/3320. Adenosine Usage for PSVT Cardioversion in a Large, Urban EMS System. Principal Investigator. Accepted for poster presentation at National Association of EMS Physicians 2014 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for poster presentation at Canadian Association of Emergency Physicians 2014 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Accepted for poster presentation at International Conference on Emergency Medicine 2014. Project involves two undergraduate students.
- k. IRB Approved. EMS Stretcher "Misadventures" in a Large, Urban EMS System: A Longitudinal Analysis of Contributing Factors and Resultant Injuries. Senior Investigator. Poster presentation at National Association of EMS Physicians 2013 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster presentation at Canadian Association of Emergency Physicians 2013 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Project involves one medical student.
- IRB Approved 16247/1256. Emergency Medical Technician Acquisition and Transmission of 12-Lead ECG Using a Novel Device (ReadyLink). Principal Investigator. Project involves one EM resident and one medical student. Poster presentation at American College of Cardiology 2013 Annual Meeting. Abstract published in Journal of the American College of Cardiology. Poster presentation at Society for Academic Emergency Medicine 2013 Annual Meeting. Poster presentation at Canadian Association of Emergency Physicians 2013 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Manuscript in progress. Project involves one undergraduate student and one EM resident.
- m. IRB Waived. US Metropolitan Municipalities EMS Medical Directors Consortium (Eagles) Traumatic Shock and Hemorrhage Control Standards of Care Survey. Principal Investigator.
- n. IRB Waived. US Metropolitan Municipalities EMS Medical Directors Consortium (Eagles) Neurologic Emergencies Standards of Care Survey. Principal Investigator.
- **o.** IRB Approved 16038. Prehospital Barriers to the Use of Therapeutic Hypothermia for Cardiac Arrest. Senior Investigator. Poster

- presentation at National Association of EMS Physicians 2012 Annual Meeting. Abstract published in Prehospital Emergency Care. Oral presentation at Canadian Association of Emergency Physicians 2013 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Project involved one EM resident and one medical student.
- p. IRB Waived. Parenteral Dextrose Utilization in a Large, Urban Emergency Medical Services System. Senior Investigator. Poster presentation at National Association of EMS Physicians 2012 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster presentation at Canadian Association of Emergency Physicians 2013 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Project involved one EM resident that presented the poster and one medical student.
- q. IRB Waived. US Metropolitan Municipalities EMS Medical Directors Consortium (Eagles) State of Cardiopulmonary Resuscitation Practices Survey. Principal Investigator. Poster presentation at Society for Academic Emergency Medicine 2012 Annual Meeting and American College of Cardiology 2012 Annual Meeting. Oral presentation at Canadian Association of Emergency Physicians 2013 Annual Meeting. Abstract published in Canadian Journal of Emergency Medicine. Project involved one EMS fellow.
- r. IRB Approved. A Statewide Survey of Emergency Department Standards of Care for Acute Coronary Syndromes Variability and Opportunity for Advancement. Senior Investigator. Poster presentation at American College of Cardiology 2012 Annual Meeting. Project involved two EM residents and two medical students.
- s. IRB Approved 15336. EMS Stretcher "Misadventures" in a Large, Urban EMS System: A Descriptive Analysis of Contributing Factors and Resultant Injuries. Principal Investigator. Poster presentation at National Association of EMS Physicians 2011 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster Presentation at OU-Tulsa 2011 Research Day. Poster presentation at the Texas Department of State Health Services 2011 EMS Conference Research Forum. Manuscript completed and published in EM International Special Edition Focus on Prehospital Care. Project involved a medical student that presented the poster and wrote the first draft of the manuscript as well.
- t. IRB Approved 15335. Use of an Ambulance Siren Low Frequency Enhancer, HowlerTM in a Large, Urban Emergency Medical Services (EMS) System Do Collision Rates Decrease? Principal Investigator. Poster presentation at National Association of EMS Physicians 2011 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster Presentation at OU-Tulsa 2011 Research Day. Poster

- presentation at the Texas Department of State Health Services 2011 EMS Conference Research Forum. Project involved an EM resident that presented the poster as well.
- u. IRB Approved. A Statewide Survey of Emergency Medical Services Standards of Care for Acute Coronary Syndromes Variability and Opportunity in a State without Mandatory Statewide Treatment Protocols. Principal Investigator. Poster presentation at National Association of EMS Physicians 2011 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster Presentation at OUTulsa 2011 Research Day. Poster presentation at the Texas Department of State Health Services 2011 EMS Conference Research Forum. Project involved an EM resident.
- v. IRB Approved 14838. EMS Override of Emergency Department EMS Diversion Requests for Clinically Stable Patients with Pre-Existing Health Care Network Relationships Effects of an Administrative Change. Principal Investigator. Poster Presentation at OU-Tulsa 2010 Research Day. Project involved an EM resident.
- w. IRB Approved 14839. Timeliness of post-intubation capnography application effects of educational intervention on paramedic performance. Principal Investigator. Poster Presentation at National Association of EMS Physicians 2010 Annual Meeting. Abstract published in Prehospital Emergency Care. Poster Presentation at OUTulsa 2010 Research Day. Project involved an EM resident. Project involved an EM resident that presented the poster and wrote a first draft manuscript.

3. Teaching Materials Developed

- a. State of Oklahoma EMS Medical Director Course and Practicum for Oklahoma State Department of Health. Full course developed and delivered in Muskogee, Stillwater, Ardmore, and Lawton in March – June 2014, McAlester, Tulsa, Lawton, and Enid in July/August 2012. Beta course developed and delivered in Oklahoma City in June 2010.
- **b.** Oklahoma Trauma Education Program (OTEP) 2008. Materials on multi-systems trauma management and transfer, and hand injury management and transfer. Peer reviewed within the Department of Emergency Medicine.

4. Invited Participation in Academic Conferences

a. National EMS Board Certification Review Course – Dallas, Texas (August 2017 & September 2015), Tucson, Arizona (January 2014), Seattle, Washington (October 2013), and Las Vegas, Nevada (September 2013). Sponsored by ACEP and NAEMSP. Served as course curriculum developer and faculty lecturer.

- **b.** National EMS Medical Director's Course Bonita Springs, Florida (January 2013). Sponsored by NAEMSP. Served as faculty lecturer, panelist, and case study discussion leader.
- c. National EMS Information System (NEMSIS) 3.0 Development Review in Conjunction with EMS Benchmarking in ST Elevation Myocardial Infarction, Out of Hospital Cardiac Arrest, and Stroke – Atlanta, Georgia - (March 2010). Sponsored by the CDC and EMS Performance Improvement Center at University of North Carolina Chapel Hill. Served as an expert opinion contributor, representing The US Metropolitan Municipalities EMS Medical Directors Consortium.
- d. Patient Safety in EMS Roundtable Niagara Falls, Ontario, Canada (June 2009). Sponsored by The Canadian Patient Safety Institute (CPSI), the Emergency Medical Services Chiefs of Canada (EMSCC), the Calgary EMS Foundation, and members from a pan-Canadian Patient Safety in EMS Advisory Group. Served as an expert opinion contributor and led discussion group.

5. Other Academic Activity

- **a.** Staphylococcal Toxic Shock Syndrome: Forgotten Foreign Body. Poster presentation. Scarborough J (resident) and **Goodloe JM**. OU Clinical Vignettes Symposium. May 2020 Tulsa, Oklahoma.
- b. Gradenigo's: A Forgotten Syndrome. Oral presentation. Milman B (resident) and Goodloe JM. OU Clinical Vignettes Symposium. May 2019 Tulsa, Oklahoma. Awarded most outstanding oral presentation.
- **c.** 2nd Annual Oklahoma Resuscitation Academy April 2015, Oklahoma City. Course Coordinator for 2-day national resuscitation conference.
- d. Mass Gathering Medical Care in a Motorsports Event-Based Collaborative Training Program. Accepted for poster presentation at Innovations in EMS Fellow Education Symposium at National Association of EMS Physicians 2014 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for oral presentation at Canadian Association of Emergency Physicians 2014 Annual Meeting. Abstract published in Canadian Journal of Emergency Physicians.
- e. Tactical Emergency Medicine Care in a Military Medicine, Law Enforcement, and Emergency Medicine Collaborative Training Program. Accepted for poster presentation at Innovations in EMS Fellow Education Symposium at National Association of EMS

Physicians 2014 Annual Meeting. Abstract published in Prehospital Emergency Care. Accepted for oral presentation at Canadian Association of Emergency Physicians 2014 Annual Meeting. Abstract published in Canadian Journal of Emergency Physicians.

f. Oklahoma Resuscitation Academy – April 2014, Oklahoma City. Course Coordinator for 2-day national resuscitation conference.

VIII. PUBLICATIONS

1. Peer-Reviewed

Callahan JM, Baldwin S, Bodnar C, Fuchs S, Krug S, Lightfoot C, Raskas M, Weinberg S; AMERICAN ACADEMY OF PEDIATRICS; Committee on Pediatric Emergency Medicine; Council on Clinical Information Technology; Council on Children and Disasters; AMERICAN COLLEGE OF EMERGENCY PHYSICIANS; Pediatric Emergency Medicine Committee (Goodloe JM – Board Liaison); Policy Statement; Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of All Children. Access to Critical Health Information for Children During Emergencies: Emergency Information Forms and Beyond. Ann Emerg Med. 2023 Mar;81(3):e27-e36. doi: 10.1016/j.annemergmed.2022.12.005. PMID: 36813444. See also:

Pediatrics. 2023 Mar 1;151(3):e2022060970. doi: 10.1542/peds.2022-060970.PMID: 36807981

2022 Dodson CA, **Goodloe JM**. Headache and weakness in a young adult female. J Am Coll Emerg Physicians Open. 2022 Jun 30;3(4):e12772. doi: 10.1002/emp2.12772. PMID: 35782347; PMCID: PMC9244344.

Aldeeb B, **Goodloe JM**. Abdominal pain in an adolescent female. J Am Coll Emerg Physicians Open. 2022 Jun 2;3(3):e12759. doi: 10.1002/emp2.12759. PMID: 35662898; PMCID: PMC9161699.

Kupas DF, Zavadsky M, Burton B, Baird S, Clawson JJ, Decker C, Dworsky PI, Evans B, Finger D, **Goodloe JM**, LaCroix B, Ludwig GG, McEvoy M, Tan DK, Thornton KL, Smith K, Wilson BR. Joint Statement on Lights & Siren Vehicle Operations on Emergency Medical Services Responses. Prehosp Emerg Care. 2022 May-Jun;26(3):459-461. doi: 10.1080/10903127.2022.2044417. PMID: 35475941.

Newgard CD, Fischer PE, Gestring M, Michaels HN, Jurkovich GJ, Lerner EB, Fallat ME, Delbridge TR, Brown JB, Bulger EM; Writing Group for the 2021 National Expert Panel on Field Triage (**Goodloe JM**). National guideline for the field triage of injured patients: Recommendations of the National Expert Panel on Field Triage, 2021. J

Trauma Acute Care Surg. 2022 Aug 1;93(2):e49-e60. doi: 10.1097/TA.0000000000003627. Epub 2022 Apr 27. PMID: 35475939; PMCID: PMC9323557.

Medrano NW, Villarreal CL, Mann NC, Price MA, Nolte KB, MacKenzie EJ, Bixby P, Eastridge BJ; MIMIC Study Group (**Goodloe JM**). Activation and On-Scene Intervals for Severe Trauma EMS Interventions: An Analysis of the NEMSIS Database. Prehosp Emerg Care. 2023;27(1):46-53. doi: 10.1080/10903127.2022.2053615. Epub 2022 Apr 15. PMID: 35363117.

2021 Goodloe JM, Topjian A, Hsu A, Dunne R, Panchal AR, Levy M, McEvoy M, Vaillancourt C, Cabanas JG, Eisenberg MS, Rea TD, Kudenchuk PJ, Gienapp A, Flores GE, Fuchs S, Adelgais KM, Owusu-Ansah S, Terry M, Sawyer KN, Fromm P, Panczyk M, Kurz M, Lindbeck G, Tan DK, Edelson DP, Sayre MR. Interim Guidance for Emergency Medical Services Management of Out-of-Hospital Cardiac Arrest During the COVID-19 Pandemic. Circ Cardiovasc Qual Outcomes. 2021 Jul;14(7):e007666. doi: 10.1161/CIRCOUTCOMES.120.007666. Epub 2021 Jun 23. PMID: 34157848; PMCID: PMC8288195.

Brown KM, Ackerman AD, Ruttan TK, Snow SK; AMERICAN ACADEMY OF PEDIATRICS, Committee on Pediatric Emergency Medicine; AMERICAN COLLEGE OF EMERGENCY PHYSICIANS, Pediatric Emergency Medicine Committee (Goodloe JM – Board Liaison); EMERGENCY NURSES ASSOCIATION, Pediatric Committee; 2019 Pediatric Committee Members; Policy Statement; Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of All Children. Access to Optimal Emergency Care for Children. Ann Emerg Med. 2021 May;77(5):523-531. doi: 10.1016/j.annemergmed.2021.03.034. PMID: 33902828. Also published in Pediatrics. 2021 May;147(5):e2021050787. doi: 10.1542/peds.2021-050787. PMID: 33883245.

Woolridge D, Homme J, Amato CS, Pauze D, Rose E, Valente J, Ishimine P, Friesen P, Baldwin S, Joseph M, Saidinejad M, Perina D, Goodloe JM. Optimizing the workforce: a proposal to improve regionalization of care and emergency preparedness by broader integration of pediatric emergency physicians certified by the American Board of Pediatrics. J Am Coll Emerg Physicians Open. 2020 Jul 8;1(6):1520-1526. doi: 10.1002/emp2.12114

Moore B, Shah M, Owusu-Ansah S, Gross T, Brown K, Gausche-Hill M, Remick K, Adelgais K, Lyng J, Rappaport L, Snow S, Wright-Johnson C, Leonard J, American Academy of Pediatrics Committee on Pediatric Emergency Medicine, Section on Emergency Medicine EMS Committee and Section on Surgery; American College of Emergency Physicians

Emergency Medical Services Committee (**Goodloe JM – Chair**); Emergency Nurses Association Pediatric Committee; National Association of Emergency Medical Services Physicians Standards and Clinical Practice Committee; National Association of Emergency Medical Technicians Emergency Pediatric Care Committee. Pediatric Readiness in Emergency Medical Services Systems. Prehosp Emerg Care. 2020 Mar-Apr;24(2):175-179. Also published in Ann Emerg Med. 2020 Jan;75(1):e1-e6. doi: 10.1016/j.annemergmed.2019.09.012. Also published in Pediatrics. 2020 Jan;145(1):e20193307. doi: 10.1542/peds.2019-3307.

Delbridge TR, Dyer S, **Goodloe JM**, Mosesso VN, Perina DG, Sahni R, Pons PT, Rinnert KJ, Isakov AP, Kupas DF, Gausche-Hill M, Joldersma KB, Keehbauch JN. The 2019 Core Content of Emergency Medical Services Medicine. Prehosp Emerg Care. 2020 Jan-Feb;24(1):32-45.

Moore B, Shah MI, Owusu-Ansah S, Gross T, Brown K, Gausche-Hill M, Remick K, Adelgais K, Lyng J, Rappaport L, Snow S, Wright-Johnson C, Leonard JC; AMERICAN ACADEMY OF PEDIATRICS, Committee on Pediatric Emergency Medicine and Section on Emergency Medicine EMS Subcommittee; AMERICAN COLLEGE OF EMERGENCY PHYSICIANS, Emergency Medical Services Committee (Goodloe JM -Board Liaison); EMERGENCY NURSES ASSOCIATION, Pediatric Committee; NATIONAL ASSOCIATION OF EMERGENCY MEDICAL SERVICES PHYSICIANS, Standards and Clinical Practice Committee (Goodloe JM – Member); NATIONAL ASSOCIATION OF EMERGENCY MEDICAL TECHNICIANS, Emergency Pediatric Care Committee; Pediatric Readiness in Emergency Medical Services Systems; POLICY STATEMENT; Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of All Children. Pediatric Readiness in Emergency Medical Services Systems. Ann Emerg Med. 2020 Jan;75(1):e1-e6. doi: 10.1016/j.annemergmed.2019.09.012. PMID: 31866028. (

2019 Lyng JW, White CC 4th, Peterson TQ, Lako-Adamson H, Goodloe JM, Dailey MW, Clemency BM, Brown LH. Non-Auto-Injector Epinephrine Administration by Basic Life Support Providers: A Literature Review and Consensus Process. Prehosp Emerg Care. 2019 Nov-Dec;23(6):855-861.

Evidence-Based Guidelines for EMS Administration of Naloxone. Williams K, Lang ES, Panchal AR, Gasper JJ, Taillac P, Gouda J, Lyng JW, **Goodloe JM**, Hedges M. Prehosp Emerg Care. 2019 Nov-Dec;23(6):749-763.

Duval S, Pepe PE, Aufderheide TP, **Goodloe JM**, Debaty G, Labarère J, Sugiyama A, Yannopoulos D. Optimal Combination of Compression Rate and Depth During Cardiopulmonary Resuscitation for Functionally Favorable Survival. JAMA Cardiol. 2019; 4(9):900-908.

- 2018 Goolsby C, Jacobs L, Hunt RC, Goralnick E, Singletary EM, Levy MJ, Goodloe JM, Epstein JL, Strauss-Riggs K, Seitz SR, Krohmer JR, Nemeth I, Rowe DW, Bradley RN, Gestring ML, Kirsch TD. Stop the Bleed Education Consortium: Education program content and delivery recommendations. J Trauma Acute Care Surg. 2018 Jan;84(1):205-210.
- 2017 **Goodloe JM**, Idris AH. Metrics Save Lives: Value and Hurdles Faced. Curr Opin Crit Care. 2017 Jun;23(3):204-208.
 - **Goodloe JM**, Knoles CL, McAnallen D, Cox ML, Howerton DS. When Is the Need for Speed? A Data Driven Approach to Response Time Reform. Journal of Emergency Medical Services. 2017 Feb; 42(2):30-38.
 - Lurie K, Frascone RJ, **Goodloe JM**. Resuscitation GEMS. Resuscitation Outcomes Consortium (ROC) Studies Dig Deep into the Science of CPR. Journal of Emergency Medical Services. 2017 Jan; 42(1): 28-32.
- 2016 Fischer PE, Bulger EM, Perina DG, Delbridge TR, Gestring ML, Fallat ME, Shatz DV, Doucet J, Levy M, Stuke L, Zietlow SP, **Goodloe JM**, VanderKolk WE, Fox AD, Sanddal ND. Guidance Document for the Prehospital Use of Tranexamic Acid in Injured Patients. Prehosp Emerg Care. 2016 Sep-Oct;20(5):557-9.
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 - **Goodloe JM** and Gerecht R. TXA in the USA. Tranexamic Acid's Potentially Bright Future Relies on Collaborative Data. Journal of Emergency Medical Services, 2015 Apr; 40(4):30-5.
- 2014 **Goodloe JM.** Stay on Time. A Conversation about the Importance of Count and Cadence of Chest Compressions. Journal of Emergency Medical Services, 39(11) Nov Suppl:36-40.
 - **Goodloe JM**, Wayne M, Proehl J, Levy MK, Yannopoulos D, Thigpen K, O'Connor RE. Optimizing Neurologically Intact Survival from Sudden Cardiac Arrest: A Call to Action. West J Emerg Med. 2014 Nov:15(7)803-7.
 - **Goodloe JM**, Dailey MW, Heightman AJ. Armed with Naloxone. Journal of Emergency Medical Services, 39(8) Aug 28-33.

- **Goodloe JM**. Not So Fast on Naloxone? There's Growing Support for Non-Paramedic Use but Keep These Cautions in Mind. (Cover Article). EMS World, 43(5):51-52.
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 - **Goodloe JM**, Purser J. ABCs of Epinephrine Autoinjectors. Journal of Emergency Medical Services, 38(10) Oct 54.
 - Goodloe JM, Howerton DS, McAnallen D, Reed H. How Can Tranexamic Acid Help in EMS? TXA Offers New Hope for an Old Challenge in Traumatic Hemorrhagic Shock EMS World, 42(5): 15-6.
 - **Goodloe JM**, Howerton DS, McAnallen D, Reed H. TXA: A Difference-Maker for Trauma Patients? Role of Tranexamic Acid in EMS & Preoperative Trauma Management. Journal of Emergency Medical Services, 38(4) Apr 60-65.
 - **Goodloe JM**, Howerton DS, Appleby T. Putting Standards on the Map: Oklahoma Leaders Create Comprehensive Set of Evidence-Based Protocols. Journal of Emergency Medical Services, 38(2) Feb 36-38.
- 2012 Goodloe JM. Review of Bobrow et al. Research Manuscript on Layperson Compression-Only CPR. 2013 Lifelong Learning and Self-Assessment Study Guide. EB Medicine.
 - Whelan LJ, Justice WA, **Goodloe JM**, Dixon JD, Thomas SH. Trauma Ultrasound in Civilian Tactical Medicine. Emergency Medicine International, 2012; 2012:781570. Epub Nov 15.
 - **Goodloe JM**, Reginald TJ, Howerton DS, Winham JO, Appleby T. Attacking Cardiac Arrest, Part II: Feedback-Driven Team Performance Impacts Survival. Journal of Emergency Medical Services, 37(9) Sept, 34-39.
 - **Goodloe JM**, Reginald TJ, Howerton DS, Winham JO, Appleby T. Attacking Cardiac Arrest: Good Science & Enthusiasm Drive Survival Rates in Oklahoma. Journal of Emergency Medical Services, 37(8) Aug, 52-57.
 - Arthur AO, **Goodloe JM**, Thomas SH. Subcutaneous Fluid Administration: A Potentially Useful Tool in Prehospital Care. Emergency Medicine International, 2012; 2012:904521. Epub May 9.

- Deal KE, Synovitz CK, **Goodloe JM**, King B, Stewart CE. Tulsa Oklahoma Oktoberfest Tent Collapse Report. Emergency Medicine International, 2012; 2012:729795. Epub May 9.
- Howerton DS, Winham JO, Reginald TJ, **Goodloe JM**. Beyond Basic Training: How EMT-Basics Can Assist in 12-Lead EKG Acquisition and Transmission. EMS World, 41(5) May 2012 EMS Innovations Supplement, I4-I5.
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- **Goodloe JM.** Basic Capnography: Advancing BLS Patient Assessment & Management. Journal of Emergency Medical Services, 37(3) March, Rapid Results Capnography: A Key Patient Assessment Tool Supplement, S4-S7.
- 2011 **Goodloe JM**. Drug Shortages. Tips to Turn Dilemmas into Discoveries. Journal of Emergency Medical Services, 36(12) December, 36-37.
 - **Goodloe JM.** Inventory Management Tips Might Improve Effects of Drug Shortage. jems.com. December 1.
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 <u>Emergency Medical Services: Clinical Practice and Systems Oversight: 3rd

 <u>Edition.</u> Cone DC, Brice JH, Delbridge TR, Myers JB (Eds) WileyBlackwell. Hoboken, USA.</u>
- 2017 **Goodloe JM**. "Bronchitis, Pneumonia, and SARS" Tintinalli's Emergency Medicine Manual: 8th Edition. Cline DC, Ma OJ, Cydulka RK, Meckler GD, Handler DA, Thomas ST (Eds) McGraw Hill. New York, USA.

Thomas SH and **Goodloe JM**. "Foreign Bodies" Rosen's <u>Emergency Medicine</u> - Concepts and Clinical Practice: 9th Edition.

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Medrano NW, Villareal CL, Price MA, Eastridge BJ, MIMIC Study Group (**Goodloe JM**). Statewide System-Based Geographic Approach to Trauma Care Access. Abstract Online Poster Presentation at Esri User Conference (Virtual Annual Conference). July.

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Eastridge BJ, Nolte KB, MacKenzie EJ, Stewart FM, Villareal CL, Medrano NW, Price MA, Davis GG, Maxson RT, Mazuchowski EL, MIMIC Study Group (**Goodloe JM**). Preliminary Analysis of the Multi-Institutional Multidisciplinary Injury Mortality Investigation in the Civilian Pre-Hospital Environment (MIMIC). Abstract Podium Presentation at Western Trauma Association Meeting.

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 Arthur AO, Parker S (undergraduate student), Thomas SH.
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 Large, Urban EMS System. Poster Presentation. National
 Association of EMS Physicians Annual Meeting, Tucson, Arizona.
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 Annual Meeting, Ottawa, Ontario. Abstract in Canadian Journal of
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2013 Beck EH (presenter), White L, **Goodloe J**, Myers B, Moy H, Tan D, Bourne S, Beeson J, Craig A, Racht E, Mellor J. Mobile Integrated Healthcare Practice: Improving Population Health Through Innovative Alignment of Existing Mobile Health Infrastructure. Poster Presentation. American Public Health Association Annual Meeting, Boston, Massachusetts.

Goodloe JM (presenter), Arthur AO, Rhoades T (medical student), Holder P (EM resident), Winham JW, Thomas SH. EMT-Basic Acquisition and Transmission of 12-lead ECG Using a Novel Device (ReadyLinkTM). Poster Presentation, Canadian Association

of Emergency Physicians Annual Meeting, Vancouver, British Columbia. Abstract in Canadian Journal of Emergency Medicine 2013; 15 Suppl 1, S44.

Kallsen T (medical student), Arthur AO, Thomas SH, Goodloe JM (presenter). EMS Stretcher "Misadventures" in a Large, Urban EMS System: A Longitudinal Analysis of Contributing Factors and Resultant Injuries. Poster Presentation, Canadian Association of Emergency Physicians Annual Meeting, Vancouver, British Columbia. Abstract in Canadian Journal of Emergency Medicine 2013; 15 Suppl 1, S59-60.

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Goodloe JM (presenter), Lehrfeld D (EMS fellow), Schrank K. A Nationwide Survey of Emergency Medical Services Standards of Care for Cardiac Arrest – Variability Amongst America's Largest Urban Systems. Oral Presentation, Canadian Association of Emergency Physicians Annual Meeting, Vancouver, British Columbia. Abstract in Canadian Journal of Emergency Medicine 2013; 15 Suppl 1, S19.

Williams E (EM resident), Reginald TJ, Likens J, Arthur AO, Notley D (medical student), Thomas ST, **Goodloe JM** (presenter). Parenteral Dextrose Utilization in a Large, Urban EMS System. Poster Presentation, Canadian Association of Emergency Physicians Annual Meeting, Vancouver, British Columbia. Abstract in Canadian Journal of Emergency Medicine 2013; 15 Suppl 1, S59.

Goodloe JM, Arthur AO (presenter), Rhoades T (medical student), Holder P (EM resident), Winham JW, Thomas SH. EMT-Basic Acquisition and Transmission of 12-lead ECG Using a Novel Device (ReadyLinkTM). Poster Presentation, Society for Academic Emergency Medicine Annual Meeting, Atlanta, Georgia. Abstract in Academic Emergency Medicine, 20(5), Suppl 1, S272.

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Device (ReadyLinkTM). Poster Presentation, American College of Cardiology Annual Meeting, San Francisco, California. Abstract in Journal of American College of Cardiology (JACC), March 12, 61(10_S), Supplement A.

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Dixon JD, Arthur AO, Williams E (EM resident), **Goodloe JM** (presenter), Thomas SH. Ambulance Patients are More (or Less) Likely to be Insured. Poster Presentation, National Association of EMS Physicians Annual Meeting, Bonita Springs, Florida. Abstract in Prehospital Emergency Care 17(1), 132.

2012 Crane RD (EM resident), Arthur AO, Dunn K (medical student), Thomas ST, Goodloe JM (presenter). Emergency Medical Services Initiation of Therapeutic Hypothermia in Post-Return of Spontaneous Circulation from Cardiac Arrest: Chillingly Low Rates and Contributing Factors. Poster Presentation, Texas Department of State Health Services 2012 EMS Conference, Austin, Texas.

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Goodloe JM (presenter), Hartline J (medical student), Crane RD (EM resident), Johnson KV (medical student), Reddick EA (EM resident), Synovitz CK. A Statewide Survey of Emergency Department Standards of Care for Acute Coronary Syndromes - Variability and Opportunity for Advancement. Poster Presentation, American College of Cardiology Annual Meeting, Chicago, Illinois. Abstract in Journal of the American College of Cardiology (JACC), March 27, 59(13), Supplement A, A113

Hatfield J (EM resident), Arthur AO, Reddick E (EM resident/presenter), Shear M (medical student), Stilwell A (student), Goodloe JM, Thomas ST. Availability of On-Site Helipads Among Acute Care Facilities in Oklahoma. Poster Presentation, National Association of EMS Physicians Annual Meeting, Tucson, Arizona. Abstract in Prehospital Emergency Care 16(1), 160.

Arthur AO, Thomas ST, **Goodloe JM**, Reginald TJ, Thiems G (medical student), Redmon T (medical student), Holder P (medical student/presenter). Patients Refusing Prehospital Transport are Increasingly Likely to be Geriatric. Poster Presentation, National Association of EMS Physicians Annual Meeting, Tucson, Arizona. Abstract in Prehospital Emergency Care 16(1), 164.

Reginald TJ, Crane RD (EM resident), Arthur AO, Dunn K (medical student), Thomas ST, **Goodloe JM** (presenter). Emergency Medical Services Initiation of Therapeutic Hypothermia in Post-Return of Spontaneous Circulation from Cardiac Arrest: Chillingly Low Rates and Contributing Factors. Poster Presentation, National Association of EMS Physicians Annual Meeting, Tucson, Arizona. Abstract in Prehospital Emergency Care 16(1), 182.

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2011 Goodloe JM (presenter), Winham JO, Reginald TJ, Howerton DS, Appleby T, Arthur AO, Roper ED (EM resident), Thomas SH. A Statewide Survey of Emergency Medical Services Standards of Care for Acute Coronary Syndromes - Variability and Opportunity in a State Without Mandatory Statewide Treatment Protocols. Poster Presentation, Texas Department of State Health Services EMS Conference Research Forum. Austin, Texas.

Goodloe JM (presenter), Crowder CJ (medical student), Arthur AO, Thomas SH. EMS Stretcher "Misadventures" in a Large, Urban EMS System: A Descriptive Analysis of Contributing Factors and Resultant Injuries. Poster Presentation, Texas Department of State Health Services EMS Conference Research Forum. Austin, Texas. Second Place Poster Award.

Goodloe JM (presenter), Swope MS (EM resident), Arthur AO, Thomas SH. Use of an Ambulance Siren Low Frequency Enhancer, HowlerTM in a Large, Urban Emergency Medical Services (EMS) System - Do Collision Rates Decrease? Poster Presentation, Texas Department of State Health Services EMS Conference Research Forum. Austin, Texas.

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Specialist Course. Poster Presentation, University of Oklahoma - Tulsa Annual Research Forum.

Brown B (presenter/EM resident), Reginald TJ, Williams E (medical student), **Goodloe JM**. Missed STEMI by ECG Software Analysis. Case Report Poster Presentation. University of Oklahoma - Tulsa Annual Research Forum.

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- 2009 Stewart CE (presenter), Synovitz C, Goodloe JM, King B, Deal KE, Munn J. Octoberfest Tent Collapse. Poster Presentation, World Congress on Disaster and Emergency Medicine, Victoria, British Columbia.
- 2008 Stewart CE (presenter), Synovitz CK, **Goodloe JM**, King B, Deal KE, Munn J. Octoberfest Tent Collapse, Poster Presentation, University of Oklahoma, College of Medicine, Tulsa, OK.
- 1999 **Goodloe JM** (presenter/EMS fellow), Rinnert KJ, Zachariah BS. Attitudes of Urban and Suburban Paramedics Toward EMS Physician Field Response. Poster Presentation, National Association of EMS Physicians Annual Meeting, Marco Island, Florida. Abstract in Prehospital Emergency Care 3(1), 90.
- 1998 Goodloe JM (presenter/EM resident), Zachariah BS, Davis S (medical student). Emergency Medical Services at a Major International Airport: A Descriptive Analysis and Pilot Study to Assess Injury Prevention and Control Capabilities. Poster Presentation, National Association of EMS Physicians Mid-Year Meeting, Lake Tahoe, Nevada. Abstract in Prehospital Emergency Care 2(3), 237. Oral presentation, Emergency Medicine Research Day, Indiana Univ School of Medicine/Methodist Hospital of Indiana.

b. Editorials, position papers, background papers

2021 Hatten BW, Bonney C, Dunne RB, Hail SL, Ingalsbe GS, Levy MK, Millin M, Myers JB, Shih, RD, **Goodloe JM**. ACEP Task Force Report on Hyperactive Delirium with Severe Agitation in Emergency Settings. Accessed at https://www.acep.org/by-medical-focus/hyperactive-delirium/

- 2020 Wadman MC, Camargo CA, Cullen J, Findley S, Fletcher, D, Fleegler M, Gibbons Hallman M, Jameson S, Morrisette L, Rimple D, Sampson C, Sanson T, Wilkinson B, **Goodloe JM**. ACEP Rural Emergency Care Task Force Report. Accessed at: https://www.acep.org/rural/rural-newsroom/rural-news-articles/january-2021/rural-task-force-summary/
- 2012 Thomas SH, Colwell C, Dyer S, Goodloe JM, Deslandes JC. Prehospital Care. Emergency Medicine International, 2012; 2012:965480. Epub Jul 11.

Goodloe JM and Thomas SH. Focusing Energies on Chest Compression Fraction: It's the Forest, Not the Trees. Resuscitation, 83, 535-536.

- c. Original invited lectures and presentations published for distribution
- Goodloe JM. The ACEP Task Force Report on Hyperactive Delirium. Goodloe JM and Kumar L. Field Triage and Bleeding Control with a New Twist: New Stop the Bleed and Field Triage Guidelines (from ACS COT, ACEP, NAEMSP and others).
 Goodloe JM, Bronsky ES, Kumar L, Miller B, Persse DE. Don't Fear the Tier: Why Many EMS Systems are now Following Classic BLS/ALS Deployment Strategies. EMS State of the Science XXIII: A Gathering of Eagles Hollywood, Florida (June). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM. Best Practices in Online EMS Consults for Emergency Physicians. EMerald Coast Conference. Miramar Beach (Sandestin) Florida (June).

Goodloe JM. EMS Patient Refusals – Isn't It Just Have the Medics Get a Signature? Visiting Professorship/Grand Rounds. Western Michigan University Homer Stryker MD School of Medicine, Department of Emergency Medicine. (June)

1) **Goodloe JM** and Wampler D. Optimal Hemorrhage Control in EMS and Utilization of Whole Blood in EMS. 2) Myers JB, Dunn W, Antevy P, **Goodloe JM**, Bourn S. Hyperactive Delirium in EMS Panel Discussion. ESO Wave Conference. Austin, Texas (April)

Goodloe JM. Hot or Not? Rethinking the RLS Response. National EMS Quality Improvement Partnership. Reducing Lights-and-Siren Use in EMS. Webinar (February)

- 2021 Goodloe JM. Grand Rounds/Visiting Professorship.
 FDNY/Northwell Health EMS Fellowship. Life Advice for an EMS Physician. Webinar (August)
 - **Goodloe JM**. Until Help Arrives. American College of Emergency Physicians Seminar Program. Irving, Texas. (August)

Augustine JJ, Goodloe JM, Roach JP. Cutting Edge Remarks: What Are The Best Practices for Field Amputation – and Could EMS Do Them? Goodloe JM. Prevent Deaths from "Natural" Causes: Why is Preparation for Natural Disasters More Than Just a Priority? EMS State of the Science XXII: A Gathering of Eagles – Hollywood, Florida (June). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM, Gallagher JM, Duerring S, Ferguson W. EMS Panel Discussion. EMerald Coast Conference. Miramar Beach (Sandestin) Florida (June).

- 2019 **Goodloe JM**. 1) Sweetening Up the CPR Sweet Spot: Identifying Optimal Combinations of Compression Rate & Depth. 2) Concise Device Advice: Examining CPR Quality-Device Interactions. 2nd Annual International State of the Future of Resuscitation Conference. Paris, France (October)
 - **Goodloe JM**. Tornadoes in Oklahoma: Implications for "Vulnerable" Populations. SAEM Regional Conference UT Southwestern Medical Center Dallas, Texas (September)

Goodloe JM, Gallagher JM, Duerring S, Ferguson W. EMS Panel Discussion. EMerald Coast Conference. Miramar Beach (Sandestin) Florida (June).

Weber JM, Mason CF, Bronsky ES, **Goodloe JM**. Different Strokes for Different Folks: 2019 On-Going Issues in Stroke Care. Balancing the Scales, 1-Stroke Handicaps & Mobile Cerebral Telepathy. **Goodloe JM** and Pepe PE. Alternative Motives: Destinations Other Than Traditional Hospital-Based EDs. EMS State of the Science XXI: A Gathering of Eagles - Dallas, Texas (March). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM, Knoles C, Howerton DS. Reimagining and Engineering Airway Management in EMS Systems. Pepe PE, Racht E, **Goodloe JM**, Levy MK, McCoy AM, Augustine J, Scheppke K, Banerjee P. The Eagles Panel. EMS Today –

Washington, DC (February). The Journal of Emergency Medical Services Annual Conference.

Goodloe JM. Does Anybody Really Know What Time It Is (That Makes a Clinical Difference AND a People Difference in 2019!). Advanced Topics in Medical Direction Pre-Conference. National Association of EMS Physicians Annual Meeting – Austin, Texas (January)

2018 Goodloe JM. 1) Bi-Cycling Pumps: Using Active Compression Decompression (ACD) in CPR. 2) MONA Goes LISA: Changing the Fine Art of STEMI Management. 3) Alternative Motives: Destinations other than Traditional Hospital-Based Emergency Departments. 4) One Stroke Handicap: Escaping the Web of Best Practices in Stroke Care. 1st Annual EMS State of the Science 2018: A Gathering of Seagles Conference. Memorial Healthcare System. Hollywood, Florida (November)

Goodloe JM. Advanced Concepts of "Basic" Airway Management in EMS Medicine. Emergency Medical Services Authority Conference – Advancing the Art & Science of EMS Medicine. Edmond, Oklahoma (October)

Goodloe JM. Termination of Cardiac Arrest Resuscitation – Do We Known When to Say When? Hillcrest Medical Center Fall CME Symposium. Kansas City, Missouri (September)

Goodloe JM, Jobrack J. "EMS Update on Anaphylaxis" 2018 Indiana Emergency Response Conference. Indianapolis, Indiana (September)

Goodloe JM, Gearhart D, Cody P. EMS Medicine Update for the Emergency Physician and Primary Care Physician. Panel Discussion. 21st Annual Emergency Medicine Review Conference. Oklahoma State University Center for Health Sciences, College of Osteopathic Medicine. Tulsa, Oklahoma (June)

Goodloe JM, Gallagher JM, Nafziger S. Things That Drive Me Crazy About EMS and What Can I Do About Them? Panel Discussion. SEC/BIG 12 ACEP Chapters Educational Conference: Emergency Medicine Then & Now. Miramar Beach (Sandestin) Florida (June).

Goodloe JM. 1) The Ranges of Ch-Ch-Changes! How Often Do Eagle Medical Directors Modify Protocols? 2) MONA Goes LISA: Changing the Fine Art of STEMI Management. 3) Nixing

the Nickel and Dime ("5 to 10") Paradigm: A Reality Check on Scene and Transport Time Intervals. EMS State of the Science XX: A Gathering of Eagles - Dallas, Texas (March). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM (panel moderator), Myers JB, Youngquist S, Jacobs M. The Pressure is on Resuscitation (Intrathoracic Pressure Regulation); Dickinson E, Kivlehan S, Shepherd M, Youngquist S, Goodloe JM. Cardiac Arrest: Resuscitation Latest Advances; Pepe PE, Persse D, Goodloe JM, Levy M. Youngquist S, Scheppke K, Richmond N. "Does Anybody Really Know What Time It Is...That Makes a Clinical Difference AND a People Difference in 2018" as part of The Eagles Unplugged - Lightning Round. EMS Today – Charlotte, North Carolina (February). The Journal of Emergency Medical Services Annual Conference.

Fowler R, **Goodloe** JM. Stop the Bleed Education Debate. Advanced Topics in Medical Direction Pre-Conference; Gallagher JM, **Goodloe JM**, Howerton DS. Credentialing Pearls: Tales of Bumps, Bruises, & Success. National Association of EMS Physicians Annual Meeting – San Diego, California (January)

2017 Goodloe JM. 1) Catalyst for Analysis: Cardiac Arrest Resuscitation Analytic Discoveries. 2) Active Compression Decompression CPR: Bi cycling the Pump in Intrathoracic Pressure Regulation. 3) Tipping the Scales in Defibrillation: Leveraging Weight-Based Energies & Vectors. Eagles Pre-Conference and Eagles Track in Main Conference with Pepe PE, Scheppke K, Antevy P, Colwell C, Elder J, Persse D. Emergency Cardiovascular Care Update (ECCU) 2017 – New Orleans, Louisiana (December).

Goodloe JM. Advances in Sudden Cardiac Arrest Care – Outside & Inside the Hospital. Hillcrest Medical Center Fall CME Symposium. Dallas, Texas (October)

Goodloe JM. Progressive Resuscitation: Advances in Cardiac Arrest & Stroke Care. Saint Francis Hospital Trauma & Stroke Symposium. Tulsa, Oklahoma (September)

Goodloe JM. EMS Response: Hot or Not? Does Anybody Really Know What Time It Is That Makes a Clinical Difference in 2016 AND That Makes a Personnel Difference in 2017? St. Vincent Hospital Emergency Medicine Symposium. Indianapolis, Indiana (May)

Goodloe JM. 1) Demystifying Dialysis Disasters: Best Practices in EMS Care for the Renal Failure Patient. 2) Hematology and Oncology Emergencies in EMS: You Mean There Are Cancer Emergencies? 3) Active Compression/Decompression CPR: Can Doubling Up the Historical One-Stroke Compression Cycle Save More Lives? Wesley K, Goodloe JM, Richmond N, Escott MEA. Is It the Holy Grail or Not? The Case Against Ketamine; Pepe PE, Slovis CM, Taillac PP, Holley JE, Goodloe JM, Ellis C, Manifold C. Eagles Lightning Round. EMS Today – Salt Lake City, Utah (February). The Journal of Emergency Medical Services Annual Conference.

Goodloe JM. 1) Tallying Total Task Time to Tacitly Tender the Team – Building a Better Scene Coordination Protocol to Improve Morale. 2) An Inversion to the Incursion of Diversion: An Alternative Approach to Re-routing Requests. EMS State of the Science XIX: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM. 1) Code 3 Response: Hot or Not? Does Anybody Really Know What Time It Is That Makes a Clinical Difference in 2016 AND That Makes a Personnel Difference in 2017? Advanced Topics in Medical Direction Pre-Conference. Sahni R, Gallagher JM, Goodloe JM, Rostykus P, Schoenwetter D. Ask the Experts Panel. National Association of EMS Physicians Annual Meeting – New Orleans, Louisiana (January)

2016 **Goodloe JM**. 1) New Insights into the Future of EMS and ACEP EMS Updates. Advanced EMS Practitioners Forum and Workshop. American College of Emergency Physicians 16 – Las Vegas, Nevada (October)

Goodloe JM. Optimal Cardiopulmonary Resuscitation Practices and Active Compression-Decompression CPR. Hillcrest Medical Center Grand Rounds – Tulsa, Oklahoma (July).

Goodloe JM. Optimal Cardiopulmonary Resuscitation Practices and Active Compression-Decompression CPR. Oklahoma EMT Association Annual Conference – Tulsa, Oklahoma (July).

Lurie KG and **Goodloe JM**. Active Compression Decompression CPR. Pepe PE, Slovis CM, Ornato J, Persse DE, **Goodloe JM**, Levy MK, Taillac PP, Colwell CB, Holley JE, Miramontes DA. Lightning Rounds. Ask the Eagles. Update from the Eagles Conference. National Urban EMS Medical Directors. **Goodloe JM** 1) Flash Pulmonary Edema: Drowning in Dogma or Death

- Defying in Discovery? 2) EMS TXA in the 2016 USA. EMS Today Baltimore, Maryland (February). The Journal of Emergency Medical Services Annual Conference.
- Goodloe JM. 1) Please Take Time Out: Challenging the Perennial Obsession with Response Intervals. 2) (w. Holley JE copresenting) Taking the Guessing Out of Decompressing the Pressing: Post-FDA Experience with ACD-ITD CP. EMS State of the Science XVIII: A Gathering of Eagles Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.
- 2015 **Goodloe JM**. Put a Cork in It. Tranexamic Acid and Hemostatic Agents. Code 3 Conference. Washington University School of Medicine St. Louis, Department of Emergency Medicine St. Charles, Missouri (October).
 - Goodloe JM, Howerton DS, and McAnallen D. Optimal Cardiopulmonary Resuscitation Practices and Active Compression-Decompression CPR. Oklahoma EMT Association Annual Conference Tulsa, Oklahoma (July).
 - Goodloe JM. 1) 10 "Take-Homes" from 10 Tense Days of Tornadoes. 2) Tranexamic Acid in EMS Medicine. South Texas Regional Advisory Council (STRAC) Regional Emergency Healthcare Systems Conference – San Antonio, Texas (May).
 - Goodloe JM. 10 "Take-Homes" from 10 Tense Days of Tornadoes. Keynote Session. Goodloe JM, McAnallen D. Optimal Team Dynamics of Pre-Hospital Cardiac Arrest Resuscitation. Tulsa Community College Public Safety and EMS Symposium. Tulsa, Oklahoma (March).
 - **Goodloe JM**. Not Much Pause Should Be Your Cause: 2015 Ways to Analyze Cardiac Arrest Performance. EMS State of the Science XVII: A Gathering of Eagles Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.
 - **Goodloe JM.** Hot Topics: Naloxone Administration by EMTs & Law Enforcement Officers Panacea or Pandora? National Association of EMS Physicians Annual Meeting New Orleans, Louisiana (January).
- 2014 Beck E, Racht E, Beeson J, **Goodloe JM**. Pinnacle Power Seminars. Making Integration Happen: A Playbook for Getting

Your MIHP Up & Running. Pinnacle EMS Leadership Conference – Scottsdale, Arizona (July)

Ossmann E, **Goodloe JM**, Braithwaite SA. Pinnacle Power Seminars. How Evidence-Based Medicine will Reshape the Practice of EMS: A Clinical Update. Pinnacle EMS Leadership Conference – Scottsdale, Arizona (July)

Goodloe JM, Beck EH, and Racht E. 1) Cardiac Arrest Analytics: Constructing and Reading the Dashboard. 2) Optimal Team Dynamics of Pre-Hospital Cardiac Arrest Resuscitation. Emergency Cardiovascular Care Update (ECCU) 2014 – Las Vegas, Nevada (June).

Goodloe JM. 1) 10 "Tentative Take-Homes" from 10 Tense Days of Tenacious Tornadoes...That Took Tens of Homes – All in a Ten-Minute Talk. 2) Drugs Falling into the Wrong Hands – or Not? Naloxone Use by Non-EMS Personnel. EMS State of the Science XVI: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Beck EH and **Goodloe JM**. Cardiac Arrest Team Dynamics: Yes, We Can Save More Lives. **Goodloe JM**. The DNA & ETA of EMS Tranexamic Acid – Where Are We? Beck EH, Myers JB, Beeson J, **Goodloe JM**, Bourne S, White L. New Perspectives and Next Steps: Translating Mobile Integrated Healthcare into Policy. EMS Today – Washington, DC (February). The Journal of Emergency Medical Services Annual Conference & Exposition.

Goodloe JM. 1) Hot Topics: Tranexamic Acid in EMS. 2) Blown Away: 10 Days of Tornados. 3) Tranexamic Acid in EMS – Advanced Topics in Medical Direction Pre-Conference. National Association of EMS Physicians Annual Meeting – Tucson, Arizona (January)

2013 Goodloe JM. 1) The EMS Praxis for Anaphylaxis. 2) High-Risk Patients: Case Studies to Keep You on the Leading Edge. 3) Team Dynamics in Cardiac Arrest Resuscitation: Can We Save More Lives? Yes, We Can! North Lake Tahoe Fire Protection District 18th Annual Paramedic Refresher and CE Program – Incline Village, Nevada (December)

Goodloe JM. Pearls in Out of Hospital Mechanical Ventilation. Pre-Conference/Satellite Symposium, Air Medical Transport Conference – Virginia Beach, Virginia (October)

Goodloe JM. 1) A New Praxis for Anaphylaxis: Re-Thinking Its Presentation & Treatment Concepts. 2) A New Twist on the Bleeding Control Issue: Recent Civilian Experiences with Tourniquets. 3) Whatever You Do, Please Don't Be Late! EMS Use of Tranexamic Acid. Advanced EMS Practitioners Forum and Workshop. American College of Emergency Physicians 13 – Seattle, Washington (October)

Goodloe JM. 1) The EMS Praxis for Anaphylaxis. 2) Team Dynamics in Cardiac Arrest: Can We Save More Lives? Yes, We Can! 3) TRANscending a new EXAMination & Understanding of an old ACID: The Role of Tranexamic Acid in EMS – The Ravens Medical Directors/Advisors Pre-Conference. 7th Annual Anchorage RACI Conference: The State of the Art in Cardiac Resuscitation and Critical Care Intervention. Loren Marshall Foundation – Anchorage, Alaska (May)

Goodloe JM. 1) The EMS Praxis for Anaphylaxis. 2) We Don't Know How It Works, But It Works! TRANscending a new EXAMination & Understanding of an old ACID: The Role of Tranexamic Acid in EMS. EMS State of the Science XV: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM. The EMS Praxis for Anaphylaxis. American Medical Response eGrand Rounds National Webinar – January.

Goodloe JM. 1) EMS System Design. 2) Political Pitfalls in EMS Medical Direction Panel Forum. 3) EMS Case Study Curriculum Discussion Leader. National EMS Medical Director's Course (NAEMSP) – Bonita Springs, Florida (January)

2012 Goodloe JM. 1) Basic Training: BLS Use of the 12-Lead Electrocardiograph. 2) Gadgets, Gizmos of Life-Saving Device: Should We Budget for All Those CPR Adjuncts? 3) Sticking Your Neck Out in Trauma Care: Is Spinal Immobilization Elemental or Detrimental? 4) Basic EMS Capnography: Building Blocks for Airway Management and Patient Assessment. 5) Expanding the BLS Scope of Practice. 6) Advanced EMS Capnography: Where are we? Where can we go? 7) Team Dynamics in Cardiac Arrest Resuscitation: Can We Save More Lives? You Bet Your Keister We Can! Texas EMS Conference – Austin, Texas (November). Texas Department of State Health Services.

Goodloe JM. 1) It Ain't Over till It's Over: 2012 Ways for Terminating Resuscitative Efforts. 2) We're Just Getting Started: Post-Resuscitation Management – Constructing and Navigating the

Dashboard for Survival. Emergency Cardiovascular Care Update (ECCU) 2012 – Orlando, Florida (September). Citizen CPR Foundation.

Goodloe JM. TRANscending a New Understanding through EXAMination of an Old ACID: The Role of Tranexamic Acid (TXA) in Preoperative Trauma Management. Fifth Annual EMS Conference - Tulsa, Oklahoma (August). EMS Section, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine.

Goodloe JM. 1) EMS Termination of Resuscitation: Best Practices for a Difficult Task. 2) Patient Refusals: Isn't It Just Sign on the Line? 3) Evidenced Based State EMS Protocols – State of Kansas EMS Medical Director's Course. Featured National Speaker. Last Blast of Summer Conference – Wichita, Kansas (August). Kansas EMS Association.

Goodloe JM. 1) High-Risk Patients: Case Studies to Keep You on the Leading Edge. 2) Patient Refusals: Isn't It Just Sign on the Line? 3) Trauma Triage: New CDC/NHTSA Helicopter Guidelines – Conference Keynote Presentation, co-presented with Thomas SH. Missouri State EMS Conference – Branson, Missouri (August). Missouri EMS Association.

Goodloe JM. 1) Basic Training: BLS Use of the 12-Lead Electrocardiograph. 2) It Ain't Over till It's Over: 2012 Ways to End Resuscitative Efforts. 3) We're Just Getting Started: Using a Post-Resuscitation Efforts Dashboard. EMS State of the Science XIV: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM. EMS Standards of Care Alterations in Response to Snowstorm. Mid-America Regional Council Emergency Rescue Committee Meeting – Kansas City, Missouri (February).

Goodloe JM. Regional Centers. Advanced Topics in Medical Direction Conference. National Association of EMS Physicians Annual Meeting & Scientific Assembly – Tucson, Arizona (January).

2011 **Goodloe JM**. 1) EMS Capnography 2011 - Where are we? Where should we be? Texas EMS Conference - Austin, Texas (November). Texas Department of State Health Services.

Goodloe JM, Reginald TJ, Winham JO, Howerton DS. Protocol Development for Advancing Oklahoma's EMS Standards: The

2013 State of Oklahoma EMS Treatment Protocols Journey. Fourth Annual EMS Conference - Tulsa, Oklahoma (August). EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine.

Goodloe JM. EMS Standards of Care Alterations in Response to Snowstorm. National Urban Area Security Initiative (UASI) & Homeland Security Conference - San Francisco, California (June). UASI and Department of Homeland Security.

Goodloe JM. 1) To Tube or Not to Tube: The Role of Intubation in Resuscitation. 2) When to Stop: Termination of Resuscitation Decisions. EMS Regional Conference - Resuscitation Excellence: Building Upon Past Success via the Implementation of the 2010 American Heart Association Guidelines - New York, New York (May). Fire Department New York (FDNY)/FDNY Foundation.

Goodloe JM. The Importance of Regional Collaboration. Heart Alert: Southwest Texas Regional Advisory Council for Trauma Regional Cardiac Summit - San Antonio, Texas (February).

Goodloe JM. 1) It's Important to Make Waves: EtCO₂ Analysis as the Airway Gold Standard. 2) Rockin' the Stockin': OK(lahoma) Approaches to Tracking Drug Utilization. EMS State of the Science XIII: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

Goodloe JM and Thomas SH. Hypothermie thérapeutique en préhospitalier, experience américaine. Thomas SH and Goodloe JM. Prehospital analgesia. Secours Santé – Nice, France (February). Journeés scientifiques européennes du service médical des sapeurs-pompiers.

2010 Goodloe JM. 1) EMS Termination of Resuscitation: Best
 Practices for a Difficult Task. 2) EMS Capnography 2010 - Where
 are we? Texas EMS Conference - Austin, Texas (November).
 Texas Department of State Health Services

Goodloe JM. 1) The State of the State of EMS Emergency Cardiovascular Care in Oklahoma. 2) Panel Discussion: You're Doing What? Best Practices in EMS. 3) EMS: Trapeze Artists, Lion Tamers, & Ringmasters: Sharing Our Circus Without Suiting Up as Human Cannonballs. EMS Medical Directors Seminar -Austin, Texas (October). Texas College of Emergency Physicians. Goodloe JM, Winham JO, Reginald TJ, Howerton DS. The State of the State of EMS Emergency Cardiovascular Care in Oklahoma.

Third Annual EMS Conference - Tulsa, Oklahoma (August). EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine.

Goodloe JM. Patient Refusals: Isn't It Just Sign on the Line? Goodloe JM and Howerton DS. High Risk Patients: Case Studies to Keep You on the Leading Edge. Medic Update - Enid, Oklahoma (July). Oklahoma EMT Association Annual Conference.

Goodloe JM. The Science & Art of Prehospital Trauma Care - What Does "Clinically Important" Time Management Really Mean? Trauma Symposium: A New Decade of Trauma Care Oklahoma City, Oklahoma (May). OU Medical Center

Goodloe JM and Winham JO. Needlestick at 0300. What Will You Do to Keep Your Personnel (and Yourself!) Safe? Goodloe JM and Howerton DS. High Risk Patients: Case Studies to Keep You on the Leading Edge. Pepe PE, Fowler R, Goodloe JM, Beeson J. Update from the Eagles Conference - What's Hot? What's Not? Pepe PE, Slovis CM, Fowler R, Goodloe JM, Beeson J. Lightning Rounds - Ask the Eagles. National Urban EMS Medical Directors. EMS Today - Baltimore, Maryland (March). The Journal of Emergency Medical Services Annual Conference

Goodloe JM. Getting a Head in Cycle Somatic Injuries: OK(lahoma) Ways to Remove a Helmet. EMS State of the Science XII: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium

2009 Goodloe JM. 1) Patient Refusals: Isn't It Just Sign on the Line?
2) Ventilations and Compressions: The Science Behind Blowing Slow and Pumping Fast. Texas EMS Conference - Fort Worth, Texas (November). Texas Department of State Health Services

Thomas SH and **Goodloe JM**. Update in EMS Literature: What's Hot and What's Not? Burstein J and **Goodloe JM**. ALS Versus BLS: What Does the Evidence Say? Scientific Assembly - Boston, Massachusetts (October). American College of Emergency Physicians.

Goodloe JM. EMS Termination of Resuscitation: When We Know That We Know When It's When to Say When (or Do We?). EMS Medical Directors Seminar - Galveston, Texas (September). Texas College of Emergency Physicians.

Goodloe JM. H1N1 Flu: Implications for EMS. Flu Facts for the Frontline Symposium - Tulsa, Oklahoma (September). Oklahoma Institute for Disaster and Emergency Medicine, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine.

Goodloe JM, Reginald TJ, Howerton DS. The State of the State of Therapeutic Hypothermia in Oklahoma. Second Annual EMS Conference - Tulsa, Oklahoma (August). EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine.

Slovis CM, Persse D, Schrank K, Locasto D, **Goodloe JM**. Report from the Eagles Panel - What's Hot? What's Not? Slovis CM, Schrank K, Persse D, **Goodloe JM**. Lightning Rounds - Ask the Eagles. EMS Today - Baltimore, Maryland (March). The Journal of Emergency Medical Services Annual Conference.

Goodloe JM. The Importance of Tidal Waves: Continuous Capnography and Patient Safety. EMS State of the Science XI: A Gathering of Eagles - Dallas, Texas (February). The US Metropolitan Municipalities EMS Medical Directors Consortium.

2008 **Goodloe JM**. Patient Refusals: Best Practices When Patients Don't Want You. EMS Medical Directors Seminar - San Antonio, Texas (September). Texas College of Emergency Physicians

Goodloe JM, Reginald TJ, Howerton DS. Capnography. First Annual EMS Conference - Oklahoma City, Oklahoma (August). Oklahoma Institute for Disaster and Emergency Medicine, Department of Emergency Medicine, The University of Oklahoma College of Medicine-Tulsa.

- 2007 **Goodloe JM**. Advancing the System: Credentialing and Evaluating Personnel. EMS Medical Directors Seminar Dallas, Texas (September). Texas College of Emergency Physicians
- 2006 Goodloe JM and Griffin R. Needlestick at 0300. What Will You Do to Keep Your Personnel (and Yourself!) Safe? EMS Medical Directors Seminar Galveston, Texas (September). Texas College of Emergency Physicians.
- 2005 **Goodloe JM**. Cardiac Arrest 2005: The Advancing Science and Art of Resuscitation. Controversies in EMS Conference Temple, Texas (November). Department of Emergency Medicine, Texas A&M Health Science Center/Scott & White Hospital.

Goodloe JM. Cardiac Arrest 2005: The Advancing Science and Art of Resuscitation. EMS Medical Directors Seminar - San Antonio, Texas (September). Texas College of Emergency Physicians.

Goodloe JM. Pediatric Airway Management & Rapid Sequence Intubation. Medical City Hospital of Dallas Annual EMS Conference. Dallas, Texas (March). Medical City of Hospital of Dallas.

IX. TEACHING ACTIVITIES

- 1. Scheduled Teaching Assignments, 2007-Present
 - a. Medical Student & Resident Teaching
 - i. Bedlam Clinic Attending Shifts
 - ii. OU Medical Student Interest Group Invited speaker on EMS
 - iii. OU Medical Student Emergency Medicine Rotation attending supervision and teaching in emergency department
 - iv. Basic Disaster Life Support Course
 - v. Advanced Disaster Life Support Course
 - vi. Emergency Resident Core Orientation course on ECGs 4 hours
 - vii. Emergency Resident Core Orientation course on EMS 4 hours
 - viii. Emergency Medicine attending supervision and teaching, 10+ ED shifts/month, 10 hours/shift, 4-6 residents/shift, 1-4 medical students/shift.

2. Teaching Initiatives

a. Faculty Teaching

2023 FOUNDATIONS

TRANSITIONS TO POST RESIDENCY CAREER OUDEM Residency – March

OPTIMAL CARDIAC ARREST RESUSCITATION II OUDEM Residency – February

2022 OPTIMAL CARDIAC ARREST RESUSCITATION I OUDEM Residency – December

FOUNDATIONS
PERSONAL FINANCE II
OUDEM Residency – December

EMS INTERN ORIENTATION OUDEM Residency – July

FOUNDATIONS
PERSONAL FINANCE II
OUDEM Residency – May

EMS MEDICAL OVERSIGHT CLINICAL CASE STUDIES OUDEM Residency – March

FOUNDATIONS
PERSONAL FINANCE
OUDEM Residency – March

2021 EMS MEDICAL OVERSIGHT CLINICAL CASE STUDIES OUDEM Residency – December

FOUNDATIONS
PERSONAL DEVELOPMENT: JOBS/CONTRACTS
OUDEM Residency – December

EMS ORIENTATION IHI Residency – November

EMS ORIENTATION IHI Residency – October

FOUNDATIONS
PERSONAL DEVELOPMENT: CONTRACTS
OUDEM Residency – September

EMS MEDICAL STUDENT LECTURE OUDEM Residency – August

EMS INTERN ORIENTATION OUDEM Residency – July

EMS MEDICAL OVERSIGHT CLINICAL CASE STUDIES OUDEM Residency – March

FOUNDATIONS CRITICAL CARE ADVANCED RESUSCITATIONS OUDEM Residency – March

2020 REIMBURSEMENT UPDATES IN EM OUDEM Residency – December

FOUNDATIONS
PERSONAL DEVELOPMENT: JOB HUNT II
OUDEM Residency – December

EMS MEDICINE UPDATES STROKE; COVID; AIRWAY OUDEM Residency – October

FOUNDATIONS

PERSONAL DEVELOPMENT: PERSONAL FINANCE I OUDEM Residency – October

EMS INTERN ORIENTATION OUDEM Residency – July

IMPLICATIONS OF SARS-CoV-2 & COVID-19 OUDEM Residency – March

2019 RUMINATIONS OF ACADEMIC REALITIES
TERMINATION OF RESUSCITATION
OPIOID USE DISORDER
THE EVIDENCE OF EBM
OUDEM Residency - September

EMS INTERN ORIENTATION OUDEM Residency – July

TRAUMA EMERGENCIES (ABEM In Service Exam Review) OUDEM Residency – February

2018 EMS INTERN ORIENTATION OUDEM Residency – July

> MASS CASUALTY INCIDENT/DISASTER PLANNING TORNADO RELATED EMERGENCIES OUDEM Residency – March

TRAUMA EMERGENCIES (ABEM In Service Exam Review) OUDEM Residency – February

2017 THE PRACTICE OF EMS MEDICINE OUDEM Residency – Medical Student Lecture – August

> DEFIBRILLATION STRATEGIES RENAL EMERGENCIES OUDEM Residency – August

EMS INTERN ORIENTATION OUDEM Residency – July

2017 EFFICIENCY IN EMERGENCY DEPT DISCHARGE OUDEM Residency – May TRAUMA EMERGENCIES (ABEM In Service Exam Review) OUDEM Residency – February 2016 EMS CASE STUDIES & PROTOCOL REVIEW OUDEM Residency – November TRAUMA EMERGENCIES (ABEM In Service Exam Review) OUDEM Residency – February 2015 CARDIAC ARREST RESUSCITATION PRACTICUM OUDEM Residency – November CARDIAC ARREST JOURNAL CLUB OUDEM Residency – November EMS INTERN ORIENTATION OUDEM Residency – July TRANEXAMIC ACID IN EMERGENCY MEDICINE OUDEM Residency – April CARDIAC ARREST ILCOR STANDARDS OF CARE OUDEM Residency – April THE PRACTICE OF EMS MEDICINE OUDEM Residency – Medical Student Lecture – March 2014 EBOLA & EMS/ED CONSIDERATIONS OUDEM Residency - October THE PRACTICE OF EMS MEDICINE OUDEM Residency – Medical Student Lecture – September THE PRACTICE OF EMS MEDICINE OUDEM Residency - Medical Student Lecture - August EMS INTERN ORIENTATION OUDEM Residency – July 2013 12-LEAD ECG ROUNDS OUDEM Residency – August 12-LEAD ECG ANALYSIS INTERN ORIENTATION OUDEM Residency – July

EMS INTERN ORIENTATION OUDEM Residency – July

EMS RESEARCH UPDATES OUDEM Residency – June

THE PRAXIS FOR ANAPHYLAXIS OUDEM Residency – March

12-LEAD ECG ROUNDS OUDEM Residency – February

2012 EMS & CARDIOVASCULAR EMERGENCIES OUDEM Residency – December Review for ABEM In-service Examination

12-LEAD ECG ANALYSIS INTERN ORIENTATION OUDEM Residency – July

EMS INTERN ORIENTATION OUDEM Residency – July

JOURNAL CLUB

Clinical Application of Laboratory Diagnostics in ACS (highly sensitive Troponin assay) & Pediatric Fever Without Source OUDEM Residency – February

ECG CONFERENCE OUDEM Residency – February

EMS & CARDIOVASCULAR EMERGENCIES OUDEM Residency - January Review for ABEM In-service Examination

2011 ECG CONFERENCE OUDEM Residency – December

BIOTERRORISM

Oklahoma Disaster Institute - November Basic Disaster Life Support for Oklahoma Highway Patrol EMTs

PSYCHOLOGICAL ASPECTS OF DISASTERS Oklahoma Disaster Institute - November Basic Disaster Life Support for Oklahoma Highway Patrol EMTs

EMS TERMINATION OF RESUSCITATION OSU EM Residency - Oklahoma City - August

2011 EMS INTERN ORIENTATION OUDEM Residency - July

THE ART AND SCIENCE OF CARDIOPULMONARY RESUSCITATION - ELEMENTAL OR DETRIMENTAL? OUDEM Residency - July

ARRHYTHMIAS - ECG ANALYSIS
OU School of Medicine - Second Year Medical Students - April
Advanced Cardiac Life Support

TACTICAL COMBAT CASUALTY CARE OUDEM SOMOS Program - April Cadaver Lab for Oklahoma Highway Patrol EMTs

CARDIOVASCULAR EMERGENCIES OUDEM Residency - January Review for ABEM In-service Examination

2010 EMS BASE STATION OUDEM Residency - December OK State EMS Medical Director's Course & Practicum

ECG CONFERENCE OUDEM Residency - September

ECG CONFERENCE OUDEM Residency - August

EMS INTERN ORIENTATION OUDEM Residency - July

ECG CONFERENCE OUDEM Residency - July

EMS BASE STATION OUDEM Residency - June OK State EMS Medical Director's Course & Practicum

ECG CONFERENCE OUDEM Residency - June

ECG CONFERENCE OUDEM Residency – March

EMS & CARDIOVASCULAR EMERGENCIES OUDEM Residency – February

2009 TRAUMA AIRWAY MANAGEMENT SKILLS PRACTICUM

 $OUDEM\ Residency-December$

ECG CONFERENCE

OUDEM Residency – December

ECG CONFERENCE

OUDEM Residency – August

ECG CONFERENCE

OUDEM Residency - July

EMS INTERN ORIENTATION

OUDEM Residency – July

BIOTERRORISM

Oklahoma Disaster Institute - July

Basic Disaster Life Support

EMS REFUSALS OF CARE CONSIDERATIONS

OUDEM Residency - June

EMS CASE STUDIES

OUDEM Residency - February

2008 CHILDREN WITH SPECIAL HEALTHCARE NEEDS

OUDEM Residency - November

CPAP/NON-INVASIVE VENTILATION

OUDEM Residency - October

12-LEAD ECG ANALYSIS PART III

OUDEM Residency - September

12-LEAD ECG ANALYSIS PART II

OUDEM Residency – August

EMS R2/EM INTERN ORIENTATION

OUDEM Residency - July

12-LEAD ECG ANALYSIS PART 1

OUDEM Residency - July

1999 UROGENITAL TRAUMA

UT Southwestern Emergency Medicine Residency

1998	ACUTE ABDOMINAL AORTIC ANEURYSM
	UT Southwestern Emergency Medicine Residency
	Morbidity & Mortality Conference

- **b.** Emergency Medical Services Continuing Education Teaching
- 2021 COVID-19 Updates from Office of the Medical Director Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa
- 2020 COVID-19 Updates from Office of the Medical Director Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa
- 2018 PROTOCOL UPDATES 2018
 Office of the Medical Director/Medical Control Board
 EMS System for Metropolitan Oklahoma City and Tulsa
 Featuring the OMD Team
 Limiting epinephrine in ventricular fibrillation cardiac arrest
 Limiting oxygen in acute coronary syndromes
 Early utilization of double sequential external defibrillation
 Early deployment of ResQCPR and efficiencies in resuscitation
 Water submersion injuries
- 2017 CPR TEAM DYNAMICS

Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa Featuring Dr. Keith Lurie Resuscitation team roles and dynamics Continuity of chest compressions Active Compression Decompression CPR Passive oxygenation in limited rescuer situations Supportive care strategies Practical lab and video production

2016 DOUBLE SEQUENTIAL EXTERNAL DEFIBRILLATION
Office of the Medical Director/Medical Control Board
EMS System for Metropolitan Oklahoma City and Tulsa

ACTIVE COMPRESSION DECOMPRESSION CPR Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa

2015 SPINAL MOTION RESTRICTION
Office of the Medical Director/Medical Control Board
EMS System for Metropolitan Oklahoma City and Tulsa

2013 TRANEXAMIC ACID

Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa CE Hemostasis options in traumatic hemorrhage What is tranexamic acid (TXA)? Historical uses of TXA Review of CRASH-2 and MATTERs research studies of TXA Protocol changes and review & Operational handling of TXA Interview with Dr. William Havron, OU Trauma Services

PRAXIS FOR ANAPHYLAXIS

EMS System for Metropolitan Oklahoma City and Tulsa CE Defining anaphylaxis Cardiovascular collapse form of anaphylaxis World Allergy Organization treatment guidelines Epinephrine treatment of anaphylaxis Review of recent publications/abstracts regarding anaphylaxis Protocol changes and review

Office of the Medical Director/Medical Control Board

EMS CAPNOGRAPHY

Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa CE Basic of the capnography waveform Uses of capnography in EMS Advanced concepts of capnography and research review Protocol review

2012 CPR TEAM DYNAMICS

Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa CE Resuscitation team roles and dynamics Continuity of chest compressions Timing of defibrillation Passive oxygenation in limited rescuer situations Supportive care strategies Practical lab and video production

2011 CPR CHEST COMPRESSION TECHNIQUES

Office of the Medical Director/Medical Control Board EMS System for Metropolitan Oklahoma City and Tulsa CE Compression rate with metronome use Compression techniques Practical lab

2007 SIMPLE, COOL CHANGES IN PARAMEDIC AIRWAY CARE

Plano Fire Department Paramedic CE Intubation techniques

Cricoid pressure vs. bimanual laryngoscopy

Airway bougie

Evaluation of a new alternative airway

When to abandon intubation attempts

Combitube vs. King LTS-D

Airway Management in Narcotic Overdoses

Titrating naloxone

EMS OCCUPATIONAL EXPOSURE:

IF IT HAPPENS TO YOU, WHAT WILL YOU DO?

Plano Fire Department EMT & Paramedic CE

Best practices & local experiences

Post-exposure management:

EMS needlestick injuries

EMS respiratory exposures

Infectious agents of concern

Hepatitis B & C; HIV; TB, Meningitis

2006 MASS CASUALTY FUNCTIONAL EXERCISES

Plano & Allen Fire Departments EMT & Paramedic CE

33 Full Scale Fire Rescue/EMS Exercises

CRITICAL THINKING IN PARAMEDIC PATIENT CARE

Plano & Allen Fire Departments Paramedic CE

Critical thinking concepts required to correctly deliver paramedic level care per EMS treatment protocols

PEDIATRIC CARDIAC CARE

Plano & Allen Fire Departments EMT & Paramedic CE

Pediatric CPR & PALS

Pediatric Vascular Access

Neonatal CPR & NALS

Pediatric Cardiac Arrest Scenario Exercises

TACHY/BRADYDYSRHYTHMIAS

Allen Fire Department Paramedic CE

AHA guidelines for bradydysrhythmias & tachydysrhythmias

ARTIFICIAL CIRCULATION: THE ROLE OF THE

AUTOPULSE

Allen Fire Department EMT & Paramedic CE

Artificial circulations physiology

Suboptimal CPR effect

AutoPulse outcomes trials review & functional exercises

TACHY/BRADYDYSRHYTHMIAS

Plano Fire Department Paramedic CE

AHA guidelines for bradydysrhythmias & tachydysrhythmias Diltiazem
Case studies

ARTIFICIAL CIRCULATION: THE ROLE OF THE AUTOPULSE

Plano Fire Department EMT & Paramedic CE Artificial circulation physiology Suboptimal CPR effect AutoPulse outcomes trials review Functional AutoPulse exercises

IMMEDIATE TRIAL: MODULE 2
Allen Fire Department Paramedic CE
Acute Coronary Syndromes
Glucose-Insulin-Potassium Infusion Physiology
Patient Care Enrollment & Logistics

IMMEDIATE TRIAL: MODULE 1
Plano Fire Department Paramedic CE
Acute Coronary Syndromes
12-Lead ECG Interpretation
Glucose-Insulin-Potassium Infusion Physiology

ADVANCED AIRWAY PLACEMENT CONFIRMATION Allen Fire Department Paramedic CE Confirmation Devices, Rationale, & Protocol

CHEMICAL RESTRAINT

Allen Fire Department EMT & Paramedic CE Alternatives to physical and chemical restraint Indications for physical and chemical restraint Pharmacology of diazepam & haloperidol

ADULT RESUSCITATION 2006: INCORPORATING NEW AHA GUIDELINES Allen Fire Department EMT & Paramedic CE 2005 AHA Guideline Process Adult CPR Ventricular Fibrillation/Pulseless Ventricular Tachycardia Pulseless Electrical Activity & Asystole

ADVANCED AIRWAY PLACEMENT CONFIRMATION Plano Fire Department Paramedic CE Confirmation Devices, Rationale, & Protocol

CHEMICAL RESTRAINT

Plano Fire Department Paramedic CE Alternatives to physical and chemical restraint Indications for physical and chemical restraint Pharmacology of diazepam & haloperidol

ADULT RESUSCITATION 2006:

INCORPORATING NEW AHA GUIDELINES

Plano Fire Department EMT & Paramedic CE

2005 AHA Guideline Process

Adult CPR

Ventricular Fibrillation/Pulseless Ventricular Tachycardia Pulseless Electrical Activity & Asystole

2005 AIRWAY & RESPIRATORY DISTRESS MANAGEMENT

Plano & Allen Fire Departments EMT & Paramedic CE Airway management devices & techniques

Respiratory distress/arrest scenario exercises

COLD WEATHER EMS MEDICAL MANAGEMENT

Plano & Allen Fire Departments EMT & Paramedic CE

Heat loss mechanisms & body core temperature

EMS treatment of hypothermia

EMS treatment of cold-related tissue injuries

EMS treatment of cold-water immersion

HOLIDAY SEASON TOXICOLOGY

Plano & Allen Fire Departments Paramedic CE

NSAID, ASA, TCA, SSRI, GHB, PCP, LSD

VENOUS ACCESS IN EMS

Plano & Allen Fire Departments Paramedic CE

Goals & anatomy of venous access

Venous access techniques & complications

Difficult venous access tips & "When access fails" management

TOXICOLOGY I

Allen Fire Department Paramedic CE

Acetaminophen, Opiates/Narcotics, Benzodiazepines

Barbiturates, Toxicology Documentation

LAW ENFORCEMENT "LESS LETHAL" TACTICS:

MEDICAL CONCEPTS & CARE

Allen Fire Department EMT & Paramedic CE

Benefits & risks of pepper spray

Basic function of the Taser & removal of Taser probes

Medical consequences with "less lethal" tactics

Medical evaluation & transport priorities of "less lethal" patients

ADULT INTRAOSSEOUS ACCESS

Plano Fire Department Paramedic CE Anatomy & physiology of intraosseous access EZ-IO intraosseous access procedure & credentialing

TASERS: MEDICAL CONCEPTS & CARE
Plano Fire Department EMT & Paramedic CE
Basic function of the Taser
Medical events post-Taser use
Risks for post-Taser cardiac arrest & removal of Taser probes
Post-Taser medical evaluation and transport priorities

BURNS & LIGHTNING INJURIES

Allen Fire Department EMT & Paramedic CE Pathophysiology & classification of burns Systemic assessment of the burn patient EMS burn management Lightning injuries & EMS lightning injury care

EXPLOSIVE EVENT INJURIES

Allen Fire Department EMT & Paramedic CE Risks identification & complicating factors Injury prediction based upon type of explosive and patients Crush syndrome and its field treatment Primary, secondary, and tertiary explosion injury paradigm

ASSISTED CHEST COMPRESSION: AUTOPULSE INTRODUCTION

Allen Fire Department EMT & Paramedic CE AutoPulse Resuscitation System overview

BURNS & LIGHTNING INJURIES

Plano Fire Department EMT & Paramedic CE Pathophysiology & classification of burns Systemic assessment of the burn patient EMS burn management Lightning injuries & EMS lightning injury care

EXPLOSIVE EVENT INJURIES

Plano Fire Department EMT & Paramedic CE Risks identification & complicating factors Injury prediction based upon type of explosive and patients Crush syndrome and its field treatment Primary, secondary, and tertiary explosion injury paradigm

ASSISTED CHEST COMPRESSION: AUTOPULSE DEPLOYMENT

Plano Fire Department EMT & Paramedic CE

AutoPulse Resuscitation System implementation system-wide

THE ABCDs of CPR: ELEMENTAL OR DETRIMENTAL?

City of Plano Public Safety Communications Annual EMD Training

Critical appraisal of EMS cardiac arrest care

Review of numerous research studies indicating need for changes:

Pre-arrival instructions – emphasis during this presentation

Ventilation

Chest compression (including assistive devices)

Defibrillation

MEDICATION FACILITATED INTUBATION:

PERSPECTIVES, CHALLENGES, & DIRECTIONS

Allen Fire Department Paramedic CE

Span of intubation options

Evaluate intubation options using:

Anecdotal experience of AFD

Reviews of relevant research

Future directions of MFI within AFD & protocol changes

2004 VASOPRESSIN UPDATE: NEW HOPE FOR ASYSTOLE PATIENTS?

Allen Fire Department Paramedic CE

Pathophysiology of asystole

Pharmacology of vasopressin

Research review and protocol changes

OPTIMAL EMS OPERATIONS & PATIENT CARE

Allen Fire Department EMT & Paramedic CE

Review of best practices in EMS operations & patient care

MEDICATION FACILITATED INTUBATION:

PERSPECTIVES, CHALLENGES, & DIRECTIONS

Plano Fire Department Paramedic CE

Span of intubation options

Evaluate intubation options using:

Anecdotal experience of PFD

Reviews of relevant research

Future directions of MFI within PFD & protocol changes

OPTIMAL EMS OPERATIONS & PATIENT CARE

Plano Fire Department EMT & Paramedic CE

Review of best practices in EMS operations & patient care

START TRIAGE

Allen Fire Department EMT & Paramedic CE Principles of triage in mass casualty incidents START (simple triage and rapid treatment) triage procedure Application of START triage to patient scenarios

MEDICAL NECESSITY DOCUMENTATION IN EMS

Allen Fire Department EMT & Paramedic CE Concept of "medical necessity" documentation in EMS Detail several specifics of required documentation by insurances Patient care documentation as a component of customer service Avoidance of fraudulent billing practices

SAM SLING: NEW STABILIZATION FOR PELVIC FRACTURES

Allen Fire Department EMT & Paramedic CE SAM Sling indications and usage

MEDICAL NECESSITY DOCUMENTATION IN EMS

Plano Fire Department EMT & Paramedic CE Concept of "medical necessity" documentation in EMS Detail several specifics of required documentation by insurances Patient care documentation as a component of customer service Avoidance of fraudulent billing practices

SAM SLING: NEW STABILIZATION FOR PELVIC FRACTURES

Plano Fire Department EMT & Paramedic CE SAM Sling indications and usage

NO TRANSPORT CASE REVIEWS

Plano Fire Department EMT & Paramedic CE Review of no transport cases for protocol/operations compliance

CHILDREN WITH SPECIAL HEALTH CARE NEEDS

Allen Fire Department EMT & Paramedic CE

Illnesses of CSHCN

EMS assessments and interventions in CSHCN

Improve comfort level with CSHCN, related devices/meds, and parents of CSHCN

THE ABCDs of CPR: ELEMENTAL OR DETRIMENTAL?

Allen Fire Department EMT & Paramedic CE

Critical appraisal of EMS cardiac arrest care

Review of numerous research studies indicating need for changes:

Pre-arrival instructions & Ventilations Chest Compressions & Defibrillation

12-LEAD ECG ANALYSIS

Plano Fire Department Paramedic CE Functional exercises in 12-lead analysis

THE ABCDs of CPR: ELEMENTAL OR DETRIMENTAL?

Plano Fire Department EMT & Paramedic CE Critical appraisal of EMS cardiac arrest care

Review of numerous research studies indicating need for changes:

Pre-arrival instructions; Ventilations

Chest compression (including assist devices); Defibrillation

DEFIBRILLATION: SOONER IS NOT ALWAYS BETTER?

Allen Fire Department EMT & Paramedic CE Review CPR First Defibrillation research Pathophysiology benefits of CPR prior to defibrillation Scenario-based review for protocol changes

SPINAL IMMOBILIZATION: NEW DIRECTIONS IN EMS

Allen Fire Department EMT & Paramedic CE
Perspectives on EMS spinal immobilization
Research on "selective" EMS spinal immobilization
Scenario-based review for protocol changes

CRICOTHYROTOMY

Plano Fire Department Paramedic CE Anatomy & procedural review Skill credentialing

TERRORISM RESPONSE & EMERGENCY CARE

Plano Fire Department EMT & Paramedic CE Suicide bomber identification and incident reviews Suicide bomber implications for EMS operations Mass casualty operations in terrorism response

CPAP IN EMS

Allen Fire Department EMT & Paramedic CE Physiology of CPAP & indications for use CPAP regulator and mask functional exercises

12-LEAD ECG ANALYSIS

Allen Fire Department Paramedic CE Functional exercises in 12-lead analysis

DEFIBRILLATION: SOONER IS NOT ALWAYS BETTER?

Plano Fire Department EMT & Paramedic CE
Review CPR First Defibrillation research
Pathophysiology benefits of CPR prior to defibrillation

SPINAL IMMOBILIZATION: NEW DIRECTIONS IN EMS

Plano Fire Department EMT & Paramedic CE Perspectives on EMS spinal immobilization Research on "selective" EMS spinal immobilization

Scenario-based review

2003 AIRWAY MANAGEMENT

Allen Fire Department EMT & Paramedic CE
Basic & advanced techniques in airway management
Endotracheal intubation & confirmation
Cricothyrotomy
Capnography in airway management
Airway management scenario exercises

VENOUS ACCESS IN EMS

Plano Fire Department Paramedic CE Goals & anatomy of venous access Venous access techniques & complications Difficult venous access tips "When access fails" management

NERVE AGENTS & ANTIDOTE TREATMENT

Plano Fire Department EMT & Paramedic CE Nerve agent types & pathophysiology Mark I autoinjector pharmacology & use

EMS OCCUPATIONAL EXPOSURE

Plano Fire Department EMT & Paramedic CE

Post-exposure management:

EMS needlestick injuries & EMS respiratory exposures

NEW EMS TREATMENT PROTOCOLS REVIEW

Allen Fire Department EMT & Paramedic CE

New Medical Director Introduction

New EMS protocols orientation & review

12-LEAD ECG ANALYSIS

Plano Fire Department Paramedic CE Functional exercises in 12-lead analysis

CHILDREN WITH SPECIAL HEALTH CARE NEEDS

Plano Fire Department Paramedic CE

Illnesses of CSHCN

EMS assessments and interventions in CSHCN

Improve comfort level with CSHCN, related devices/meds, and parents of CSHCN

BURNS & LIGHTNING INJURIES

Plano Fire Department Paramedic CE Pathophysiology & classification of burns Systemic assessment of the burn patient EMS burn management Lightning injuries & EMS lightning injury care

EXPLOSIVE EVENT INJURIES

Plano Fire Department Paramedic CE Risks identification & complicating factors Injury prediction based upon type of explosive and patients Crush syndrome and its field treatment Primary, secondary, and tertiary explosion injury paradigm

NERVE AGENTS, ORGANOPHOSPATES, & CYANIDE

Plano Fire Department Paramedic CE Pathophysiology and field treatments

CAPNOGRAPHY UPDATES IN EMS

Plano Fire Department Paramedic CE Review of use in intubation confirmation Use in non-intubated patients COPD, Asthma, Undifferentiated dyspnea Review of new capnograph within LP12 monitor

MEGACODE MANAGEMENT

Plano Fire Department Paramedic CE Tachy/Bradydysrhythmia management using case studies Megacode functional exercises with SimMan

2002 ORAL INTUBATION

Plano Fire Department Paramedic CE Review of Intubation CQI Tracking Oral intubation techniques

EMS MANAGEMENT OF MEDICAL EMERGENCIES

Plano Fire Department Paramedic CE Case study reviews of PFD EMS incidents

12-LEAD ECG ANALYSIS

Plano Fire Department Paramedic CE Functional exercises in 12-lead analysis

TOXICOLOGY III

Plano Fire Department Paramedic CE Beta-blockers, Calcium channel blockers, Antihistamines Cocaine, Marijuana, Ecstasy

ARRHYTHMIA RECOGNITION

Plano Fire Department Paramedic CE Functional exercises in basic ECG arrhythmia recognition

TOXICOLOGY II

Plano Fire Department Paramedic CE NSAID, ASA, TCA, SSRI, GHB, PCP, LSD

TREATMENT SECTOR OPERATIONS IN MCIs

Plano Fire Department Paramedic CE

Tabletop exercises in designing, deploying, and operating an EMS treatment sector during multiple patient events

TOXICOLOGY I

Plano Fire Department Paramedic CE Acetaminophen, Opiates/Narcotics, Benzodiazepines Barbiturates, Toxicology Documentation

2001 WEAPONS OF MASS DESTRUCTION – BIO & CHEM

Plano Fire Department Paramedic CE Biological classes of WMD and agents Chemical classes of WMD and agents

SPORTS INJURIES

Plano Fire Department Paramedic CE Identification & EMS treatment of multiple orthopedic injuries

12-LEAD ECG ANALYSIS

Plano Fire Department Paramedic CE Functional exercises in 12-lead analysis

RESUSCITATE: DO OR DO NOT?

Plano Fire Department Paramedic CE

Texas Law relating to: Advance Directives & OOH DNR
Medical Power of Attorney
Applying DNR Texas Law to EMS situations

EMS MANAGEMENT OF THERMAL BURNS

Plano Fire Department Paramedic CE Pathophysiology & classification of burns Systemic assessment of the burn patient EMS burn management

AIRWAY MANAGEMENT

Plano Fire Department Paramedic CE Basic & advanced techniques in airway management Airway management scenario exercises

12-LEAD ELECTROCARDIOGRAMS

Plano Fire Department Paramedic CE

ECG lead electrophysiology

Correlating ECG leads with anatomy

Systemic analyzing of the 12-lead ECG

Correlating abnormal ECGs with cardiac pathophysiology

PEDIATRIC CRITICAL CARE

Plano Fire Department Paramedic CE

PALS updates

2000 CARDIAC ARREST MANAGEMENT

Plano Fire Department Paramedic CE

ACLS updates

CPAP IN COPD & CHF MANAGEMENT

Plano Fire Department Paramedic CE

Physiology of CPAP & indications for use

CPAP regulator and mask functional exercises

CHEST PAIN MANAGEMENT

Plano Fire Department Paramedic CE

Differential causes of chest pain

EMS management of the acute chest pain patient

TRAUMA MANAGEMENT II

Plano Fire Department Paramedic CE

BTLS-derived curriculum

Abdominal & extremity trauma

Burns

Pediatric, Elderly, & Pregnancy patients

Effects of alcohol/drugs

Trauma CPR

Trauma scenarios

1999 TRAUMA MANAGEMENT I

Plano Fire Department Paramedic CE

BTLS-derived curriculum

Mechanisms of Injury

Scene Assessment & Initial Trauma Care

Airway Management in Trauma

Thoracic Trauma

Shock Evaluation & Management

Spinal & Head Trauma

Trauma Care in the Cold

12-LEAD ELECTROCARDIOGRAMS

Plano Fire Department Paramedic CE

ECG lead electrophysiology

Correlating ECG leads with anatomy

Systemic analyzing of the 12-lead ECG

Correlating abnormal ECGs with cardiac pathophysiology

AIRWAY MANAGEMENT

Plano Fire Department Paramedic CE Basic & advanced techniques in airway management Airway management scenario exercises (co-taught with Brian Zachariah, MD, FACEP)

CRITICAL CARE PARAMEDIC PHARMACOLOGY I & II

AMR-Dallas Critical Care Paramedic School

Developed & taught 8-hour pharmacology curriculum

(co-taught with Robert Suter, DO, FACEP; Brian S. Zachariah,

MD, FACEP; and John Myers, MD, FACEP)

c. Other Teaching

2020 THE ROLE OF EMS SYSTEMS & HOW EMS SYSTEMS CAN "FLATTEN THE CURVE"

COVID-19 Oklahoma Update ECHO (Friday, April 10)

2011 THE STATE OF TULSA TRAUMA CARE

Tulsa Metro Chamber Health Panel

(co-panelists Thomas SH, Yeary E, Sacra J, Williamson S, Dart B)

2000-2007 EMERGENCY MEDICAL SERVICES:

A NATIONAL & LOCAL HISTORY

Plano Fire Department Citizens Fire Academy

EMS Historical Developments

City of Plano EMS History

Modern EMS Capabilities

EMS Assessment & Treatment Equipment Display

The Modern MICU Tour

Citizen Question & Answer Sessions

(co-taught with Ken Klein, RN, EMTP)

1999 TRAUMA REGIONAL ADVISORY COUNCILS:

IMPACT UPON TRAUMA CARE IN TEXAS

University of Texas School of Public Health – Health Policy

Presentation

1998 ALTERED MENTAL STATUS

Methodist Hospital of Indiana Emergency Medicine Residency

Case Conference Presentation

Case review of treated otitis media progressing to meningitis with near-fatal outcome. Patient initially seen by me at time of diagnosis with meningitis.

EMS OCCUPATIONAL HAZARDS

Methodist Hospital of Indiana Emergency Medicine Residency Grand Rounds

Infectious disease risks assumed by EMS personnel

Post-exposure management of needlestick injuries, respiratory exposure, and contact exposure involving EMS personnel

Contributing factors and characteristics of EMS vehicle accidents

Risks of violence in the EMS environment

Occupational injuries sustained in EMS

EMS-related stressors

Importance of well-being practices in EMS

1997 MASS CASUALTY INCIDENTS

Methodist Hospital of Indiana Emergency Medicine Residency Grand Rounds

Classification of Mass Casualty Incidents & Notable MCIs Emergency Physician role in MCIs

Treatment priorities & resource utilization in MCIs

1996 ACUTE ABDOMINAL AORTIC ANEURYSM

Methodist Hospital of Indiana Emergency Medicine Residency Morbidity & Mortality Conference Presentation Case review of AAA initially presenting as renal colic.

CHOOSING AN EMERGENCY MEDICINE RESIDENCY

Tulane University School of Medicine

Residency application, evaluation, and interviewing strategies

X. PROFESSIONAL SERVICE

1. Hospital clinical service

- a. Hillcrest Medical Center Emergency Department Tulsa (July 2011 - Present) Academic/clinical emergency medicine in regional referral hospital. Residency faculty and active medical staff responsibilities.
- b. St. John Medical Center Emergency Department Tulsa (August 2009 – September 2011). Clinical emergency medicine in Level II Trauma Center. Residency faculty and active medical staff responsibilities.
- **c.** St. Francis Hospital Trauma Emergency Center Tulsa (August 2007 July 2009). Clinical emergency medicine in Level II

Trauma Center. Residency faculty and active medical staff responsibilities.

d. For additional clinical activities, please see section on hospitals.

2. Leadership service to professional societies and organizations

- **a.** Secretary/Treasurer, American College of Emergency Physicians (2021-2022)
- **b.** Member, Board of Directors, American College of Emergency Physicians (2019-Present)

Liaison to: Bylaws Committee (2022-Present)

Geriatric EM Section (2022-Present)

Geriatric Accreditation BOG (2022-Present)

Membership Committee (2022-Present)

Sports Medicine Section (2022-Present)

Awards Committee (2022-Present)

Finance Committee (2021-2022)

Audit Committee (2021-2022)

American College of Surgeons

Committee on Trauma

(2020-Present)

Excited Delirium Task Force (2020-2021

FDA CDER Testimony Jan 2021

Nominating Committee (2020)

Cruise Ship Medicine Section

(2020-2021)

Trauma & Injury Prevention Section

(2020-2021)

EMS Committee (2019-2022)

Pediatric Emergency Medicine Committee

(2019-Present)

EMS Section (2019-2022)

Tactical Medicine Section (2019-Present)

Pediatric Emergency Medicine Section

(2019-Present)

Rural Emergency Medicine Task Force

(2019-2020)

American Academy of Emergency Nurse

Practitioners (2021-Present)

c. Board of Trustees, Emergency Medicine Foundation

Immediate Past Chair (2023)

Chair (2022)

Chair-Elect (2021)

Secretary-Treasurer (2021)

Member (2019-Present)

d. Candidate, Board of Directors, American College of Emergency Physicians (2019)

- e. EMS Subboard, American Board of Emergency Medicine LLSA Co-Editor (2021-2022) Member (2019-2022)
- **f.** Member, Bylaws Committee, American College of Emergency Physicians (2018-2019)
- **g.** Candidate, Board of Directors, American College of Emergency Physicians (2018)
- **h.** Member, Advocacy Committee, National Association of EMS Physicians (2016-Present)
- i. Member, Standards & Practice Committee, National Association of EMS Physicians (2016-2021)
- **j.** President, Oklahoma College of Emergency Physicians (2016-2019).
- **k.** Chair, EMS Committee, American College of Emergency Physicians (2016-2018)
- **I.** President-Elect, Oklahoma College of Emergency Physicians (2015-2016).
- m. Member, Advocacy, Clinical Standards and Practices, and Mobile Integrated Healthcare Committees, National Association of EMS Physicians (2015 – Present).
- **n.** Vice President (2012-2016) Oklahoma Chapter, American College of Emergency Physicians.
- o. Member, Council Steering Committee & Council Subcommittees for Annual Meeting and Non-Bylaws Resolutions. American College of Emergency Physicians (2011-2012). Active participant in developing 2012 Council Annual Meeting and promoting development and submission of non-bylaws resolutions. Selected as Reference Committee Chairman.
- p. Member, EMS Committee, American College of Emergency Physicians (2011-present). Leading nationwide effort to improve EMS Medical Director understanding of Drug Enforcement Administration regulations regarding controlled substances. Working in multi-association taskforce to bring EMS Medical Director concerns to the DEA lead office in Washington, DC.
- q. Member, Council Steering Committee & Council Standing Rules Subcommittee, American College of Emergency Physicians (2010-2011). Active participant in revising 2011-2012 Council Standing Rules. Presented the Council Standing Rule Subcommittee Report to the Council Steering Committee in May 2011. Served as Member of Reference Committee A for 2011 Annual Council Meeting, hearing testimony on bylaws-related resolutions and drafting summary recommendations to the Council.
- r. Member, EMS Committee, American College of Emergency Physicians (2010-2011). Led the extensive revision of ACEP Policy: "Leadership in EMS", approved by ACEP Board of Directors without editing. Also, reviewed for subsequent revision

- of ACEP Policy "Interfacility transportation of the critical care patient and its medical direction."
- s. Councillor, American College of Emergency Physicians OCEP (2018-2019)

OCEP Alternate Councillor (2017)

Oklahoma Chapter Board of Directors (2008-2016)

Emergency Medicine Residents' Association (1996-1999) Service as a councillor involves representing the physicians from the respective chapter/organization at the ACEP Council Annual Meeting. The ACEP Council considers and acts upon business matters and clinical positions of the College in a manner like a "House of Representatives" of a state/national government.

- t. Site Reviewer, Commission on Accreditation of Ambulance Services (2001-2012). Perform on-site review of EMS organizations seeking to meet CAAS accreditation. Each review involves 2-3 days of extensive administrative and clinical operations review, with numerous interviews of leadership and front-line clinical personnel to evaluate compliance with over 200 standards.
- u. Organization and Course Reviewer, Continuing Education Coordination Board for Emergency Medical Services (2000-2012). Review submissions for individual courses and organizations seeking CECBEMS accreditation and/or accreditation granting privileges. Multiple courses/organizations have been personally reviewed each year of service.
- v. Member, Research Committee, National Association of EMS Physicians (1998-2000)
- w. Member, Fellows Task Force, National Association of EMS Physicians (1998-1999)
- **x.** Member, Mentoring Task Force, American College of Emergency Physicians (1998-1999)
- y. Member, Membership Committee, American College of Emergency Physicians (1997-1998)
- Z. Board of Directors, Emergency Medicine Residents' Association Immediate Past President (1997-1998)
 President (1996-1997)
 President-Elect/Treasurer (1995-1996)
- **aa.** Vice President, Board of Directors, Indiana State Medical Association Resident Medical Society (1996-1998)
- **bb.** Vice Chair and Delegate, Indiana Delegation, American Medical Association Resident Physician Section House of Delegates (1996-1998)
- **cc.** Member, Commission on Legislation, Indiana State Medical Association (1996-1998)
- **dd.** Member, Internal Communications Task Force, American College of Emergency Physicians (1996-1998)

- **ee.** Member, Section Affairs Committee, American College of Emergency Physicians (1996-1997)
- **ff.** Member, LifeLine/EMS Committee, Methodist Hospital of Indiana (1995-1998)
- **gg.** Member, EMS Committee, Texas College of Emergency Physicians (1994-1995)
- **hh.** Emergency Medicine Student Association, The University of Texas Medical School at San Antonio

President (1994-1995)

Vice President (1992-1993)

Secretary and Founding Officer (1991-1992)

3. Editorial service

- a. Editorial Board, Prehospital Emergency Care (2015-Present)
- **b.** Reviewer, International Journal of Chronic Obstructive Pulmonary Disease (2014-Present)
- c. Reviewer, Risk Management and Healthcare Policy (2013-Present)
- **d.** Reviewer, Journal of Bioanalysis & Biomedicine (2013-Present)
- e. Reviewer, Canadian Journal of Emergency Medicine (2012-2018)
- **f.** Guest Associate Editor, EM International (2011)
- **g.** Editorial Board, Journal of Emergency Medical Services (2010-Present)
- **h.** Reviewer, Internal and Emergency Medicine (2010-Present)
- i. Reviewer, Access Emergency Medicine (2009-Present)
- i. Reviewer, Critical Care (2009-Present)
- **k.** Reviewer, Prehospital Emergency Care (2009-Present)

4. Educational symposia development service

- a. Chairman & Course Coordinator, 5th Annual EMS Symposium 2012 EMS Ways to Treat Trauma & Advance Trauma Care. EMS Section, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine, August 2012 in Tulsa, Oklahoma. Keynote Speaker Paul Pepe, Chair of Emergency Medicine, University of Texas Southwestern Medical Center & Medical Director, Dallas Metropolitan Area BioTel (EMS) System.
- b. Chairman & Course Coordinator, 4th Annual EMS Symposium -EMS Expanding Scopes of Practice & The Future of Oklahoma EMS, EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine, August 2011 in Tulsa, Oklahoma. Keynote Speaker - John Freese, Chief Medical Director, Fire Department New York.
- c. Chairman & Course Coordinator, 3rd Annual EMS Symposium -EMS Cardiovascular Emergencies, EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine, August 2010 in Tulsa, Oklahoma. Keynote Speaker, Corey Slovis, Chair of Emergency Medicine, Vanderbilt

- University School of Medicine & Medical Director, Nashville Fire Department.
- **d.** Course & Curriculum Developer State of Oklahoma EMS Medical Director's Course & Practicum Initial Course June 2010 in Oklahoma City, Oklahoma.
- e. Chairman & Course Coordinator, 2nd Annual EMS Symposium Therapeutic Hypothermia, EMS Division, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine, August 2009 in Tulsa, Oklahoma. Keynote Speaker, Brent Myers, Director & Medical Director, Wake County, North Carolina EMS System.
- f. Chairman & Course Coordinator, 1st Annual EMS Symposium Airway Management, Oklahoma Institute for Disaster and Emergency Medicine, Department of Emergency Medicine, The University of Oklahoma College of Medicine Tulsa, August 2008 in Oklahoma City, Oklahoma. Keynote Speakers, Allen Sims and Kelly Curry, Montgomery County, Texas Hospital District EMS System.

5. Professional service

- **a.** Exam Writer, National Registry of Emergency Medical Technicians (2011)
- **b.** Member, Oklahoma Emergency Medical Services for Children Advisory Committee (2011-Present).
- **c.** Member, Oklahoma Emergency Response Systems Development Advisory Council (2009-2013). Direct appointment by Speaker of the House, State Oklahoma House of Representatives.
- **d.** Member, Medical Audit Committee, Oklahoma State Department of Health, Trauma Division (2008-2013)
- e. Interim Medical Advisor, Oklahoma State Department of Health, EMS Division (2008-2009)
- f. Member, University of Oklahoma College of Medicine Tulsa, Department of Emergency Medicine Chair search committee (2008)
- **g.** Member, Medical Direction Subcommittee, Oklahoma Emergency Response Systems Development Advisory Council (2007-2013)

6. Volunteer clinical service

a. The University of Oklahoma School of Community Medicine Bedlam Clinic

Attending Physician (2011-2014)

b. Baylor University Volunteer EMS

Director of Communications (1990-1991)

Lieutenant/Paramedic (1990-1991)

EMT-Intermediate (1989-1990)

Emergency Medical Dispatcher (1988-1989)

7. Grant review service

- a. Emergency Medicine Foundation COVID-19 (2020)
- **b.** MedEvac International Foundation (2010)

8. Research abstract review service

- **a.** Society for Academic Emergency Medicine EMS (2010) 2011 Annual Meeting & Regional Meetings
- **b.** National Association of EMS Physicians (2009) 2010 Scientific Assembly

XI. ADMINISTRATION [College and University Service]

2007-Present Chief, EMS Section, Department of Emergency Medicine, The University of Oklahoma School of Community Medicine

XII. MEMBERSHIPS, HONORS, AWARDS and SPECIAL RECOGNITION

1. Memberships

- **a.** American College of Healthcare Executives (2019-Present)
- **b.** Texas Medical Association (2017-2019)
- c. Tarrant County Texas Medical Society (2017-2019)
- d. American College of Emergency Physicians (1991-Present)
 Oklahoma Chapter (2007-Present)
 Texas Chapter (1998-Present; 1991-1995)
 Indiana Chapter (1995-1998)
- e. American Medical Association (2007-2013; 1995-1998)
- **f.** Oklahoma State Medical Association (2007-2013)
- g. Oklahoma County Medical Society (2009-2013)
- h. Tulsa County Medical Society (2007-2013)
- i. Indiana State Medical Association (1995-1998)
- j. Emergency Medicine Residents' Association (1991-Present/Life Member)
- **k.** Society for Academic Emergency Medicine (1994-1999; 2010 2014;2019-Preent)

2. Honors

- **a.** Fellow of the Academy of EMS (2017-present)
- **b.** US Metropolitan Municipalities EMS Medical Directors Consortium Corey M. Slovis Award recognizing excellence in EMS education (2014)
- **c.** Fellow of the American College of Emergency Physicians (2002-present)
- **d.** American Medical Association/Glaxo Wellcome Achievement Award recognizing leadership in organized medicine (1997)

e. Texas College of Emergency Physicians Outstanding Senior Medical Student in Emergency Medicine (1995)

XIII. PROFESSIONAL GROWTH AND DEVELOPMENT

1. Continuing Education

- a. NIHSS Certification 2023
- **b.** ACEP E-QUAL Stroke CME 2021
- **c.** LVAD CME 2023
- d. Pain Mgmt Pearls: Opioids & Culture
- e. Human Trafficking & Exploitation
- f. NAEMSP PEC Manuscript Reviews (Editorial Board)
- g. NIHSS Certification 2022
- h. ACEP E-QUAL Stroke CME 2020
- i. ABEM EMS Subboard Exam Meeting 2022
- **i.** LVAD CME 2022
- k. EMS State of the Science XXIII Meeting 2022
- I. EMerald Coast Conference 2022
- m. NIHSS Certification 2021
- n. ABEM EMS Subboard Exam Meeting 2021
- o. EMS State of the Science XXII Meeting 2021
- p. Opioid Analgesics in the Management of Acute and Chronic Pain 2021
- q. Clinician's Guide Recognizing & Responding to Human Trafficking 2021
- r. Preventing Clinician Burnout 2021
- s. Suicide Assessment & Prevention 2021
- t. EMerald Coast Conference 2021
- u. EMS State of the Science Weekly Webinars 2020 Present
- v. National Association of EMS Physicians Annual Meeting 2021
- w. ABEM EMS Subboard Exam Meeting 2020
- x. National Whole Blood in EMS Academy
- y. National Association of EMS Physicians Annual Meeting 2020
- z. EMS State of the Science XXI Meeting 2019
- aa. National Association of EMS Physicians Annual Meeting 2019
- **bb.** EMS State of the Science XX Meeting 2018
- cc. National Association of EMS Physicians Annual Meeting 2018
- **dd.** EMS State of the Science XIX Meeting 2017
- ee. National Association of EMS Physicians Annual Meeting 2017
- ff. EMS State of the Science XVIII Meeting 2016
- gg. National Association of EMS Physician Annual Meeting 2016
- **hh.** National EMS Board Review Certification Course 2015
- ii. National EM Board Review Certification Course 2015
- jj. EMS State of the Science XVII Meeting 2015
- kk. National Association of EMS Physicians Annual Meeting 2015
- II. National Association of EMS Physicians Annual Meeting 2014
- **mm.** EMS State of the Science XVI Meeting 2014
- **nn.** National EMS Board Review Certification Course 2013

oo. RACI Conference on Resuscitation and Critical Care 2013

pp. EMS State of the Science XV Meeting 2013

qq. National Association of EMS Physicians Annual Meeting 2013

rr. Advanced Trauma Life Support Instructor Course 2012

ss. EMS State of the Science XIV Meeting 2012

tt. National Association of EMS Physicians Annual Meeting 2012

uu. Oklahoma ACEP Annual Meeting 2011

vv. ACEP Scientific Assembly 2011

ww. National Association of EMS Physicians Annual Meeting 2011

xx. Texas College of Emergency Physicians EMS Med Director Seminar 2010

yy. National Association of EMS Physicians Annual Meeting 2010

zz. Oklahoma ACEP Annual Meeting 2009

aaa. Texas College of Emergency Physicians EMS Med Director Seminar 2009

bbb. National Association of EMS Physicians Annual Meeting 2009

ccc. Oklahoma ACEP Annual Meeting 2008

ddd. Texas College of Emergency Physicians EMS Med Director Seminar 2008

eee. National Association of EMS Physicians Annual Meeting 2008.

fff. Oklahoma ACEP Annual Meeting 2007

ggg. Texas College of Emergency Physicians EMS Med Dir Seminar 2007.

hhh. National Association of EMS Physicians Annual Meeting 2007.

iii. ATLS Instructor

iii. ACLS renewal

kkk. BCLS renewal

III. FEMA NIMS ICS course 100

mmm. FEMA NIMS ICS course 200nnn. FEMA NIMS ICS course 300FEMA NIMS ICS course 400

ppp. FEMA NIMS ICS course 700

qqq. FEMA NIMS ICS course 800

rrr. BDLS

sss.ADLS

ttt. NDLS Instructor

uuu. ABEM Lifelong Learning Self-Assessment Test 2021vvv. ABEM Lifelong Learning Self-Assessment Test 2020

www. ABEM EMS Lifelong Learning Self-Assessment Test 2018

xxx. ABEM Lifelong Learning Self-Assessment Test 2018

yyy. ABEM Lifelong Learning Self-Assessment Test 2017

ABEM Lifelong Learning Self-Assessment Test 2016

aaaa. ABEM EMS Lifelong Learning Self-Assessment Test 2016

bbbb. ABEM Lifelong Learning Self-Assessment Test 2015

cccc. ABEM ConCert Board Recertification Test 2015

dddd. ABEM EMS Lifelong Learning Self-Assessment Test 2014

eeee. ABEM Lifelong Learning Self-Assessment Test 2014

ffff. ABEM Lifelong Learning Self-Assessment Test Patient Safety

gggg. ABEM Lifelong Learning Self-Assessment Test 2013

hhhh. ABEM Lifelong Learning Self-Assessment Test 2012

iiii. ABEM Lifelong Learning Self-Assessment Test 2011

iiii. ABEM Lifelong Learning Self-Assessment Test 2010

kkkk. ABEM ConCert Board Recertification Test 2009

IIII. ABEM Lifelong Learning Self-Assessment Test 2008

mmmm. ABEM Lifelong Learning Self-Assessment Test 2007

nnnn. ABEM Lifelong Learning Self-Assessment Test 2006

oooo. ABEM Lifelong Learning Self-Assessment Test 2005pppp. ABEM Lifelong Learning Self-Assessment Test 2004

2. Coursework

- a. Ultrasonography in the emergency department
- **b.** 19th Annual High-Risk Emergency Medicine
- c. 13th Annual National Emergency Medicine Board Review

XIV. COMMUNITY SERVICE

1. Civic Organizations

- **a.** Halfway Home Greyhound Adoption Service Tulsa, Oklahoma (2007-2012)
- **b.** Habitat for Humanity Waco, Texas (1990-91) Service Project of Alpha Epsilon Delta, Texas Beta Chapter

CV updated 03/15/23



2023 PRESIDENT-ELECT CANDIDATE WRITTEN QUESTIONS

Alison J. Haddock, MD, FACEP

Question #1: How would you address concerns that ACEP may be unduly influenced by corporate practice interests?

ACEP must do everything we can to have a singular focus on the individual emergency physician. While we strive to include all kinds of EM practices, emergency physicians are our reason for being. The individual EP who is weathering the recurrent boarding crises, the COVID cases with insufficient PE, the shift work sleep disorder is our center; that individual must feel empowered and supported by ACEP for our organization to remain vibrant. If any EM practice is failing to provide a high-quality working environment for emergency physicians, ACEP must be unafraid to shine a light on this situation. Our employer profile database is starting to highlight the size, staffing model and group governance of any group that chooses to advertise or sponsor with ACEP. We are also asking employers to attest that their group adheres to critical ACEP policies which ensure that EPs are compensated fairly and transparently. ACEP must continue to adopt policies that prioritize the needs of the practicing emergency physician over corporate interests – like our paid parental leave policy – and continue to develop ways to identify which groups and locations are following those policies. Over the past several years, I have served as Board Liaison for the ED Accreditation Task Force and helped spearhead our forthcoming ED Accreditation Program. Through accreditation, ACEP can set the standard for what a high-quality emergency department looks like and make sure that the physicians working in that department are prioritized, not forgotten.

Since the founding of the EM specialty, our entire field has been increasingly influenced by the corporatization and financialization of medicine. We have seen financial entities, including private equity, increasingly interested in emergency medicine as a potential source of profits, and have seen emergency medicine companies increasingly focused on maximizing their income and increasing profits for company owners. When the specialty was founded, those company owners were practicing emergency physicians, but increasingly, the owners are shareholders in large medical groups or even private equity companies. The forces driving these trends are much larger than ACEP, and much larger than emergency medicine – they span the entire American economy. While we have always seen ourselves as representing everyone in emergency medicine, ACEP needs to continue to do more to focus on our roots as the defenders of the emergency physicians themselves. We may not be able to stop consolidation, but we can be the leading voice for concerns about the negative impacts of EM consolidation and financialization of our patients and our practice. As Chair, I led the board in writing a statement voicing the threat that these changes pose to physician autonomy. Our work to empower the emergency physician in this landscape must continually increase to counterbalance growing corporate practice interests.

Question #2: What are your ideas for creating and/or providing tangible and indispensable benefits to ACEP members?

The two greatest benefits of ACEP membership will always be our **members** and our **advocacy**. The ability to collaborate and network with fellow members – developing relationships and growing opportunities within our field – is absolutely indispensable and our advocacy team is incredible at speaking out at all levels for the needs of the individual emergency physician. But what can be done to make these benefits more tangible?

- Enhance **networking** opportunities: at the annual meeting and through EngagED
- Update our **educational products** to reflect the needs of the 21st century learner: as Chair of ACEP's "Tiger Team," I am leading our efforts to revamp the annual meeting to ensure it is *the* time and place where the global emergency medicine community gathers to connect, evolve and reignite their passion for serving patients
- Expand **leadership development** programs: engaging members early and enhancing their own ability to improve the EM environment including:
 - o Training any interested EPs on how to own and run their own practice, expanding on the successful Independent EM Group MasterClass
 - Helping today's physician leaders in EM become tomorrow's hospital executives and insurance company CMOs
- **ED Accreditation**: ACEP's standards requiring workplaces to provide sufficient resources for EPs to provide excellent care can help EPs identify workplaces worthy of being their site of practice

- Identify expanded **practice opportunities** for EPs: our attrition rates are staggering, with 1 out of 10 female EPs and 1 out of 13 male EPs leaving the practice of EM within 5 years of graduating from residency. Our skill sets are tremendous and we don't want to lose that talent. Our current strategic plan and New Practice Models Task Force have started this work, and it must be heavily prioritized.
- Educate members about **unionization** and support efforts to unionize: as our employers consolidate, this option should be open to us to counterbalance their size and power
- Optimize **the EM Data Institute:** gather and disseminate data to allow smaller practices to compete with their consolidated brethren with the power of "big data" behind them
- Grow critical advocacy at the state and hospital level: some of the most important decisions impacting our practice aren't made in DC, but much closer to home

Realizing these opportunities allows ACEP to continue providing timely resources within our evolving specialty and will provide exceptional, tangible value to our members. While some of these efforts may sound like pipe dreams, I have both the experience and the resolve to actualize these dreams.

Question #3: What new thoughts do you have in balancing board certified emergency physician workforce distribution gaps and safe scope of practice for non-physicians?

No patient should be seen in an emergency department without the involvement of a residency-trained, board-certified (or boardeligible) emergency physician. ACEP defines this as the gold standard in emergency care. However, we cannot forget that rural areas face significant shortages of emergency physicians. Despite the growth we have seen in residency programs, we are not seeing more emergency physicians working in remote EDs. Recent data published in Annals showed that between 2013 and 2019, the percentage of clinicians working in rural areas who were emergency physicians actually dropped slightly. It is critical for our specialty to work on our rural pipeline. This means supporting efforts to recruit college students from rural areas in their premed years and support their transition into medical school, then continuing to expose medical students to the experience of rural medicine during their clerkship years. If we wait until residency for trainees from urban areas with only urban experiences to get first hand experience in a rural setting, it may be too late to persuade them of the value of a rural career. This limitation does not mean that rural rotations should not be supported. Rural rotations for emergency medicine residents need to be prioritized and made much more accessible. Trainees should be incentivized to participate in these rotations with optimized scheduling, supported housing, and an additional stipend to cover the expense of being away from home. We must work to reduce structural and accreditation barriers to the availability of these rotations through enhanced collaboration with the ACGME, CORD and program directors, rural EPs and rural hospitals. Practicing in a rural area can be deeply rewarding with opportunities to spend more time at the bedside and develop deeper relationships with a smaller cadre of ED staff. The more positive experiences we can create for trainees within rural practices, the more EPs we can attract to these areas.

As the problem of strengthening the rural pipeline cannot be solved overnight, in the interim, we will continue to see some nurse practitioners and physician assistants developing careers in rural emergency departments. Evidence shows that their presence has been increasing in rural EDs, and ACEP's own Rural Task Force identified in 2020 that some rural EDs may not have sufficient volume to support dedicated ED physician staffing. However, both the Rural Task Force (2020) and the Telehealth Task Force (2021) agreed that **telehealth supervision of NPs and PAs in rural practice environments** by board-certified emergency physicians is a viable model for improving patient safety and extending the reach of the BC EP through the use of a physician-led team. A "hub and spoke" model allows a centrally located board-certified EP to collaboratively supervise NPs and PAs in multiple hospitals simultaneously. Continuous improvements in technology and broadband capability mean that this kind of supervision will become easier every year and can allow true team-based care even without an emergency physician physically present at the bedside. To optimize this kind of care, we must ensure that our trainees are learning the skills they will need to be effective in this role, including strategies for effectively supervising NPs and PAs and how to effectively use telehealth technologies to evaluate patients, from building rapport to performing video physical exams.

Finally, in order to incentivize emergency physicians to practice in rural areas where patient volumes may be lower, we must seek out ways to compensate them for the hours they put in standing at the ready for critically ill patients to arrive. We do not fund rural fire departments solely based on the number of fires they respond to per year, and we should not pay rural emergency physicians based solely on the number of patients they see. A rural ED staffed by a well-trained EP is an essential resource in small communities that may be otherwise lacking in readily available healthcare resources. Both rural EDs and rural EPs should receive compensation reflecting the critical nature of that resource. All EPs are currently experiencing the pain of our current boarding crisis, and the <u>lack of sufficient funding of our safety net and surge capacity</u> is a contributor to that crisis. We cannot continue to make that mistake in rural America, where our neighbors deserve the same access to high-quality emergency physicians delivered in urban areas.



CANDIDATE DATA SHEET

Alison J. Haddock, MD, FACEP

Contact Information

1973 W McKinney St, Houston, TX, 77019

Phone: (425) 246-6310 **E-Mail:** ajh2003@gmail.com

Current and Past Professional Position(s)

Current:

Assistant Professor

Department of Emergency Medicine

Also appointed in Department of Education, Innovation and Technology and Center for Ethics and Health Policy Baylor College of Medicine in Houston, TX

Former: Attending Emergency Physician at Tacoma Emergency Care Physicians (small democratic group in Washington State) and Attending Emergency Physician with CEP America (now Vituity; primarily at Edmonds, WA site with shifts at several hospitals in Sacramento, CA)

Education (include internships and residency information)

Residency: University of Michigan Emergency Medicine Residency, 2007-2011

Medical School: Cornell Medical College, MD, 2007

Undergraduate: Duke University, BS, 2003

Specialty Board Certifications(e.g., ABEM, AOBEM, AAP, etc.) and dates certified and recertified)

American Board of Emergency Medicine, Board Certified, 2012 Recertified 2022

Professional Societies

ACEP, TCEP, TMA, CORD, EMRA Honorary/Life Member

National ACEP Activities – List your most significant accomplishments

Vice President, ACEP Board of Directors: 2020-2021

Chair, ACEP Board of Directors: 2021-2022

Elected member, Board of Directors: 2017-2020, 2020-2023

Chair, "Tiger Team" to revamp ACEP's in-person educational offerings, 2022-present

Board Liaison Positions:

Committees: Education, Emergency Medicine Practice, Well-Being, Bylaws, State Legislative and Regulatory

Sections: AAWEP, YPS, Telehealth, Palliative, Wellness, Critical Care, Undersea and Hyperbaric

Task Forces:

ED Accreditation Task Force, Board Liaison, 2022-2023 EM Telehealth Task Force, Board Liaison, 2021-2022

Awards

ACEP 9-1-1 Network Member of the Year, 2011 Council Horizon Award, 2016

EMRA "45 Under 45", 2019

National Board Service

NEMPAC Board of Trustees: 3 terms (2012-2015, 2015-2018, 2018-2020)

EMRA Board of Directors: Legislative Advisor (2010-2012)

Committee / Section / Task Force Involvement (prior to Board service):

ACEP State Legislative & Regulatory Committee: Member 2012-2017; Chair 2015-2017

ACEP Federal Governmental Affairs Committee 2010-2017

ACEP Education Committee, Educational Meetings Subcommittee: 2013-2017

Member of the AAWEP, Palliative Medicine, Social EM and Young Physicians Sections

Council Participation & Leadership (prior to Board service):

Past Alternate Councilor/Councilor for EMRA delegation, WA Chapter, TX Chapter Past Council Steering Committee member, Council Reference Committee member

Co-Editor of EMRA Advocacy Handbook, 6th edition released at LAC 2023

ACEP Chapter Activities – List your most significant accomplishments

Texas College of Emergency Physicians Board Member: 2016-2019

TCEP Board Liaison to TCEP Government Relations Committee: 2016-2019

TCEP Leadership and Advocacy Fellow: 2015-2016

TCEP Leadership and Advocacy Fellowship Co-Director: 2016-2017

Practice Profile

<i>Total hours devoted to emergency medicine practice per year:</i> ~2200 Total Hours/Y						Year
Individual % breakdown the fo Direct Patient Care <u>25</u> %	U	<i>J</i> I			Administration	20 %
Other:						%

Describe current emergency medicine practice. (e.g. type of employment, type of facility, single or multi-hospital group, etc.)

I am employed by Baylor College of Medicine and practice clinically at Ben Taub Hospital, a busy safety-net county hospital and Level One trauma center in Houston, TX. My primary responsibilities include direct patient care, bedside teaching, and several teaching and leadership roles within the medical school. I also work additional hours at Baylor St Luke's McNair emergency department, a lower-volume community hospital where I provide solo coverage.

Provide specific title(s) or position(s) within your group, hospital, department, system (e.g., Medical Director, Regional Director, Director of Quality, Vice President, Chief of Staff, etc.)

Assistant Director of Faculty Development, Dept of EM Faculty Senator

Co-Director, Master Teachers Fellowship Program

UME Thread Director for PREP (Preparing to Enter the Profession) and MIND (Metacognition, Inquiry and Discovery) threads

Expert Witness Experience

If you have served as a paid expert witness in a medical liability or malpractice case in the last ten years, provide the approximate number of plaintiff and defense cases in which you have provided expert witness testimony. Expert witness testimony is defined as oral or written evidence given by an expert witness under oath, at trial, or in an affidavit or deposition.

Defense Expert 0 Cases Plaintiff Expert 0 Cases



CANDIDATE CONFLICT OF INTEREST DISCLOSURE STATEMENT

Alison J. Haddock, MD, FACEP

1. Employment – *List current employers with addresses, position held, and type of organization.*

Employer: Baylor College of Medicine

Address: 1 Baylor Plaza

Houston, TX 77030

Position Held: Associate Professor, Emergency Medicine

Type of Organization: Medical School

2. Leadership Positions in Other Organizations, Chapters, Commissions, Groups, Coalitions, Agencies, and/or Entities (e.g., Board of Directors positions, committees, and/or spokesperson roles) – *List all organizations and addresses for which you have served (past and current) – including ACEP chapter Board of Directors.*

Organization: American College of Emergency Physicians

Address: 4950 W. Royal Lane

Irving, TX 75063

Type of Organization: National Medical Specialty Society

Chair of the Board of Directors, October 2021 – October 2022

Vice President, October 2020 – October 2021

Leadership Position: Many additional roles including spokesperson, numerous Committees

Term of Service: Board of Directors, 2017-present

Organization: Texas College of Emergency Physicians

Address: 401 W. 15th Street, Suite 695

Austin, TX 78701

Type of Organization: State Medical Specialty Society

Board of Directors (2016-2019), numerous Committees; Co-Chair, TCEP

Leadership Position: Leadership and Advocacy Fellowship Program: 2016-2018

Term of Service: 2014-present

Organization: National Emergency Medicine Political Action Committee

Address: 4950 W Royal Lane

Irving, TX 75063

Type of Organization: Political Action Committee

Leadership Position: Member of Board of Trustees

Term of Service: 2012-2020

Organization:	Emergency Medicine Residents Association				
Address:	4950 W Royal Lane				
_	Irving, TX 75063				
Гуре of Organization:	Medical Specialty Society				
Leadership Position:	Legislative Advisor – member of Board of Directors				
Term of Service:	2010-2012				
Organization	Friends of the Tayas Medical Center Library				
_	Friends of the Texas Medical Center Library 1133 John Freeman Blvd.				
Address.					
Type of Organization:	Houston, TX 77030				
••	member of Board of Directors				
Term of Service:					
Term of Service.	2010-2020				
Organization:	Texas Medical Association				
Address:	401 W 15 th St				
	Austin, TX 78701				
Type of Organization:	Membership organization				
	Delegate to TMA Council (2016-present); Member (2016-2022) and Chair (2021-22) of Council on Health Promotion; Member Select Committee on				
Leadership Position:	Medicaid, CHIP and the Uninsured (2017-present); Alternate Delegate to AMA House of Delegates (2017)				
Term of Service:	<u>-</u>				
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
Organization:	Washington Chapter, ACEP				
Address:	2001 6 th Ave, Suite 2700				
	Seattle, WA 98121				
Type of Organization:	Membership organization				
Leadership Position:	Member of Government Relations Committee				
Term of Service:	2011-2014				
be any outside relations	hips with any person(s) or entity from which ACEP obtains goods and services, or				

3. Describe any outside relationships with any person(s) or entity from which ACEP obtains goods and services, or which provides services that compete with ACEP where such relationship involves: a) holding a position of responsibility; b) an equity interest (other than a less than 1% interest in a publicly traded company); or c) any gifts, favors, gratuities, lodging, dining, or entertainment valued at more than \$100.

\boxtimes	NONE		
	If YES.	Please	Describe:

Candidate Conflict of Interest Disclosure Statement Page 3 4. Describe any financial interests or positions of responsibility in entities providing goods or services in support of the practice of emergency medicine (e.g., physician practice management company, billing company, physician placement company, book publisher, medical supply company, and/or a malpractice insurance company), other than owning less than a 1% interest in a publicly traded company. **⋈** NONE ☐ If YES, Please Describe: 5. Do you have any family members who are non-physicians providing care to patients, including, but not limited to, nurse practitioners, physician assistants, or certified nurse specialists? Family members include a spouse, domestic partner, parent, child, sibling, grandparent, grandchild, parents, and siblings-in-law, stepparents, stepchildren, guardians, wards, or members of your household. NONE If YES, Please Describe: 6. If you answered yes to Question 5, is your family member currently or was formerly employed in an emergency department or in urgent care? N/A □ NO If YES, Please Describe: 7. Describe any other interest that may create a conflict with the fiduciary duty to the membership of ACEP or that may create the appearance of a conflict of interest. **⋈** NONE If YES, Please Describe: 8. Do you believe that any of your positions, ownership interests, or activities, whether listed above or otherwise, would constitute a conflict of interest with ACEP? \bowtie NO If YES, Please Describe: 9. I have read and agree to abide by the ACEP Conflict of Interest policy statement. \square NO X YES

I certify that the above is true and accurate to the best of my knowledge and belief: Should a possible conflict of interest arise, I recognize that I have the obligation to notify the appropriate individual(s) and to abstain from participation in any business of ACEP that may be affected from such perceived or actual conflict of interest until it is determined whether or not a conflict exists and if so how that conflict may be resolved. If any relevant changes occur in my circumstances that would be reasonably viewed as requiring disclosure, I recognize that I have an obligation to file an amended conflict of interest disclosure statement.

10. I have read and agree to abide by the ACEP <u>Leadership and Volunteers Conduct</u> policy to ensure that ACEP volunteers, consultants, and staff can perform their valuable services to ACEP free of harassment and

discrimination.

☐ NO ☐ YES

2023-2024

Board of Directors

Sandra Williams, DO, MPH, FACEP President

Doug Jeffrey, MD, FACEP President Elect

A.J. Kirk, MD, FACEP Treesurer

Bryan Dunn, MD, FACEP Secretary

Sterling Overstreet, MD, FACEP Immediate Past President

Sara Andrabi, MD, FACEP

Jessica Best, MD, FACEP

Ciaura Brown, MD, MBA

Angela Cornelius, MD, FACEP

Abbey Pastorelle

Anant Patel, DO, FACEP

Julien Mahler, MD

Marcus Sims, DO, FACEP

Theresa Tran, MD, MBA, FACEP



August 9, 2023

Sonja Montgomery ACEP Council Dallas, TX

Dear Councillors,

On behalf of the Texas College of Emergency Physicians, we proudly and enthusiastically endorse Alison Haddock, MD, FACEP for President-Elect of the American College of Emergency Physicians. We are confident that Dr. Haddock's skilled leadership will ensure that the College continues to thrive over the next three years.

During her six years on the ACEP Board of Directors, Dr. Haddock has held many leadership roles and supported many key sections, committees, and task forces. Last year, she was a highly effective Board Chair, fostering successful collaboration and ensuring an emphasis on strategy. In the preceding year, she served as Vice President, acting as an effective liaison with developing leaders in the College through her work with the Young Physicians Section and EMRA. Her commitment to mentorship, especially evident in her guidance to young physicians within TCEP, is commendable and reflects her unwavering advocacy for the growth and development of our profession. Dr. Haddock's legacy as a former director of the TCEP Leadership and Advocacy Fellowship underscores her commitment to nurturing the next generation of leaders in Emergency Medicine.

Dr. Haddock has been an astute leader for many years both within TCEP and ACEP, and we enthusiastically endorse her for the position of President-Elect of ACEP.

Sincerely,

Saudo milians

Sandra Williams, DO, MPH, FACEP

Mission Statement:

The Texas College of Emergency Physicians exists to promote quality emergency care for all patients and to represent the professional interests of our members.

Alison J. Haddock, MD, FACEP

The President with a Plan

At this critical time for our organization, we need an experienced leader.

Emergency physicians know all too well the problems our specialty is facing. ACEP needs a president with a plan – and when ACEP stands up for EM physicians, they will stand up for ACEP.

The Plan:

- **Prioritize emergency physicians** over corporate interests by becoming the leading voice for concerns about the negative impacts of EM corporatization and financialization
- **Set the standard** for what a high-quality emergency department looks like, including important physician-first policies like paid parental leave, through our forthcoming ED Accreditation Program
- Lead the fight against ED boarding and crowding, which threatens both the well-being of patients and the wellness of emergency physicians
- Expand leadership development, engaging members early and helping today's EM leaders become tomorrow's practice owners and hospital C-suite executives
- Update our educational offerings to reflect the needs of the 21st century learner
- Enhance the presence of sections and chapters as critical locations for members to find their home within our large organization
- **Grow critical advocacy** at the state and hospital level to help keep decision making in the hands of physicians, not governments or corporations
- Address membership attrition rates by intensifying outreach to new residency grads and young physicians the next generation members we need most
- Support physician efforts to unionize and educate our members about unionization as an option to counterbalance our employers' size and power
- Protect emergency physicians from predatory employment practices by fighting for fair contracts and due process
- Address attrition from the specialty by identifying and highlighting expanded practice opportunities for FPs
- Educate policymakers and the public that residency-trained board-certified emergency physicians provide the highest quality unscheduled acute care
- **Strengthen our rural pipeline**, including efforts to recruit students from rural areas as early as undergrad and supporting rural rotations for EM residents
- Optimize the EM Data Institute to help smaller practices compete with their consolidated brethren with the power of "big data" behind them
- Unite emergency physicians from across the globe at an updated annual meeting that offers the ultimate gathering place for all

As I conclude my sixth year of service on the ACEP Board of Directors, I am proud to have represented you as a board member, Vice President, Chair of the Board, and liaison to committees, sections, and task forces. With the practical knowledge I have gained through these experiences, I am ready to lead. ACEP must rapidly evolve to meet the needs of our members amidst the ever-shifting health care landscape, and I am the right choice to meet this challenge.

ELECT

ALISON HADDOCK

for ACEP President



THE PRESIDENT WITH A PLAN.

AT THIS CRITICAL TIME, WE NEED AN EXPERIENCED LEADER.

Emergency physicians know all too well the problems our specialty is facing. ACEP needs a president with a plan – and when ACEP stands up for EM physicians, they will stand up for ACEP.

ELECT

ALISON HADDOCK

HERE'S THE PLAN:

PASSION FOR OUR SPECIALTY. PASSION FOR PROGRESS.

- **Prioritize emergency physicians** over corporate interests by becoming the leading voice for concerns about the negative impacts of EM corporatization and financialization
- Set the standard for what a high-quality emergency department looks like, including important physician-first policies like paid parental leave, through our forthcoming ED Accreditation Program
- Expand leadership development, engaging members early and helping today's EM leaders become tomorrow's practice owners and hospital C-suite executives
- Enhance the presence of sections and chapters as critical locations for members to find their home within our large organization
- **Grow critical advocacy** at the state and hospital level to help keep decision making in the hands of physicians, not governments or corporations
- Address membership attrition rates by intensifying outreach to new residency grads and young physicians the next generation members we need most
- Educate our members about unionization as an option to counterbalance our employers' size and power
- **Protect EPs from predatory employment practices** by fighting for fair contracts and due process
- Address attrition from the specialty by identifying and highlighting expanded practice opportunities for EPs
- Educate policymakers and the public that residency-trained board-certified emergency physicians provide the highest quality unscheduled acute care
- Unite emergency physicians across the globe at an updated annual meeting offering the ultimate gathering place for all

Alison J. Haddock, MD, FACEP

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I. GENERAL BIOGRAPHICAL INFORMATION

A. Personal

1. Full Name: Alison Jonelle Haddock

B. Education

1. Undergraduate Education

Bachelor of Science, Program II Major in Biolinguistics

Duke University, Durham, N.C.

Cum Laude Graduate

August 1999 - May 2003

2. Medical Education

Doctor of Medicine

Weill Cornell Medical College, New York City, N.Y.

August 2003 – May 2007

3. Postgraduate Training

Residency, Emergency Medicine

University of Michigan, Ann Arbor, M.I.

June 2007 – June 2011

C. Academic Appointments

- 1. Current Faculty Positions at BCM
 - a. Assistant Professor
 - 1) Co-Primary Appointments:
 - a) Department of Education, Innovation and Technology, 2021 present
 - b) Henry J.N. Taub Department of Emergency Medicine, 2014 present
 - 2) Secondary Appointment:
 - a) Center for Medical Ethics and Health Policy, 2021 present
 - b. Internal Titles, Department of Emergency Medicine:
 - 1) Assistant Director of Faculty Development; Dept of Emergency Medicine, 2019 present
 - 2) Director of Health Policy: Advocacy; Dept of Emergency Medicine, 2014 present
 - 3) Co-Director, Emergency Medicine Health Policy Fellowship, 2014 present
- 2. Previous Faculty Positions at BCM
 - a. Medical Ethics Scholar, Center for Medical Ethics and Health Policy, 2018 2021
- 3. Previous Faculty Positions at Other Institutions none
- 4. Faculty Appointments at Other Institutions While at BCM none

D. Other Advanced Training

1. Quality Matters Teaching Online Certificate

https://www.qualitymatters.org/professional-development/toc

Completed August 2022

Courses include:

- Gauging Your Technology Skills
- Evaluating Your Course Design
- Exploring Your Institution's Policies
- Orienting Your Online Learners
- Connecting Learning Theories to Your Teaching Strategies
- Creating Presence in Your Online Course
- Assessing Your Learners
- 2. Baylor College of Medicine Master Teacher Fellowship Program, October 2017 September 2019
- 3. Texas Medical Association (TMA) Leadership College, September 2015 September 2016
 - a. Selected to participate in this longitudinal multispecialty program which included lectures, workshops, group discussions and coaching; designed to build confident physician leaders by teaching skills in communication, advocacy, negotiation, conflict management and team building

E. Other Information

- 1. Honors or Awards
 - a. Texas Monthly "Rising Star Super Doctor", 2021
 - b. Texas Monthly "Rising Star Super Doctor", 2020
 - c. Baylor College of Medicine Norton Rose Fulbright Faculty Excellence Award in Teaching and Evaluation, 2020
 - d. Emergency Medicine Residents Association (EMRA) 45 under 45, 2019
 - e. Texas Monthly "Rising Star Super Doctor", 2019
 - f. Baylor College of Medicine Early Career Faculty Award for Excellence in Patient Care, 2019
 - g. Houston Business Journal Health Care Hero, "Rising Star Award", 2018
 - h. American College of Emergency Physicians Council Horizon Award, 2016
 - i. American College of Emergency Physicians 9-1-1 Network Member of the Year, 2011
 - j. Khare Award Academic Scholar, University of Michigan EM Residency, 2010
- 2. Board Eligibility/Certification
 - a. Certified by the American Board of Emergency Medicine, 2012
 - b. Completed recertification, 2022
 - c. Active Maintenance of Certification
- 3. Other Non-academic Positions (Historical)
 - a. Tacoma Emergency Care Physicians, Tacoma, WA
 - 1) Attending Emergency Physician, 2011-2013
 - b. CEP America (now Vituity), Edmonds, WA
 - 1) Attending Emergency Physician and Partner, 2013-2014

II. RESEARCH INFORMATION

A. Research Support

Active Research Support n/a

Completed Research Support

Technical Title of Project: Biomarkers in Acute Stroke (BASE) Name of Funding Agency: Ischemia Care, LLC Investigator Relationship or Role on Project: site PI Funding: research staff funded, PI not funded 2015 – 2018

B. National Scientific and Professional Participation

- 1. Editorial Contributions
 - a. Peer Reviewer
 - 1) Emergency Medicine Reports, 2018 present

- 2) Annals of Emergency Medicine, 2018 present
- 3) PLOS One, 2020 present
- 2. Review Panels and Selection Committees
 - a. Chair, JACEP Open Editor-in-Chief Evaluation Task Force, 2021
- 3. Professional Societies
 - a. Membership in Professional Societies
 - 1) International Association of Medical Science Educators (IAMSE), 2022 present
 - 2) Texas Medical Association (TMA) and Harris County Medical Society (HCMS), 2014 present
 - 3) Council of Emergency Medicine Residency Directors (CORD), 2016 present
 - 4) American College of Emergency Physicians (ACEP), 2007 present
 - 5) Emergency Medicine Residents Association (EMRA), member + alumni member, 2007 present
 - b. Leadership in Professional Societies (excluding Elected Positions, noted below)
 - 1) National Emergency Medicine Political Action Committee (NEMPAC) Board of Trustees: 2012 2020
 - a) Leadership role in ACEP's PAC, the 4th largest physician PAC in the US
 - b) Assisted with allocation of almost \$1mil per year in national political contributions
 - 2) National Task Forces
 - a) ACEP ED Accreditation Task Force, Board Liaison, 2022-present
 - b) ACEP Emergency Medicine Telehealth Task Force, Board Liaison, 2021-2022
 - c) ACEP Residency Visit Program Task Force, 2019-2020
 - d) ACOG (American College of Obstetrics & Gynecology) Pregnancy & Heart Disease Presidential Task Force ACEP representative, 2018-2019
 - e) ACEP Joint Task Force on Reimbursement Issues, Balance Billing group: 2016-2019
 - f) National Perinatal Association workgroup on first trimester pregnancy loss in the ED: 2016-2017
 - g) ACEP Alternative Payment Models Task Force: 2015-2018
 - h) ACEP Advisory Group Task Force: 2012-2014
 - i) ACEP Delivery System Reform Task Force: 2011-2012
 - 3) National Committees
 - a) ACEP State Legislative Committee
 - 1. Board Liaison: 2017-2019, 2022-present
 - 2. Chair: 2015-2017
 - 3. Member: 2012-2019
 - b) ACEP Bylaws Committee Board Liaison, 2020-2021
 - c) ACEP Awards Committee Member, 2019-2020
 - d) ACEP Well-Being Committee Board Liaison, 2019-2020
 - e) ACEP Emergency Medicine Practice Committee Board Liaison, 2018-2020
 - f) ACEP Membership Committee Board Liaison, 2017-2018
 - g) EMRA Awards Committee, 2012-2016
 - h) ACEP Federal Governmental Affairs Committee, 2010-present
 - i) EMRA Health Policy Committee, 2009-2012
 - 4) National ACEP Sections (interest groups)
 - a) Palliative Medicine Section, Board Liaison, 2018-2021, 2022-present
 - b) Telehealth Section, Board Liaison, 2017-present
 - c) American Association of Women Emergency Physicians (AAWEP), Board Liaison, 2017-present
 - d) Young Physicians Section, Board Liaison 2020-2021, member 2011-2021
 - 5) ACEP Council
 - a) Leadership

- 1. Nominating Committee: 2018-2019
- 2. Council Steering Committee: 2015-2017
- 3. Council Reference Committee: 2013, 2015 (Committee B on policy issues)
- b) Participation
 - 1. Councilor, representing Texas State Chapter: 2015-2017
 - 2. Alternate Councilor, representing Washington State Chapter: 2013
 - 3. Alternate Councilor, representing EMRA: 2011, 2012
- 6) ACEP Chapter Involvement (State-Level Leadership)
 - a) Co-Chair, TCEP Leadership and Advocacy Fellowship Program: 2016-2018
 - b) TCEP Government Relations Committee: 2015-present
 - c) TCEP Education Committee: 2015-present
 - d) TCEP Leadership and Advocacy Fellow: 2015-2016
 - e) Washington ACEP Chapter Legislative Affairs Committee: 2011-2014
- 7) American Medical Association
 - a) Delegate, Texas Delegation to the Young Physicians Section at AMA Meeting, June & November 2017
 - b) Alternate Delegate, Texas Delegation to the House of Delegates at AMA Meeting, June & November 2017
- 8) Texas Medical Association / Harris County Medical Society (state/local leadership)
 - a) TMA Council on Health Promotion: 2016-2022 Chair, 2021-2022
 - b) TMA Select Committee on Medicaid, CHIP and the Uninsured, 2017-present
 - c) Harris County Medical Society (HCMS) Quality Committee: 2016
 - d) TMA Council
 - 1. Delegate, HCMS at TMA Council, 2020 present
 - 2. Delegate, Young Physicians Section and HCMS at TMA Council, 2017 & 2019
 - 3. Alternate Delegate, Harris County Medical Society at TMA Council, 2016

4. Elected Positions

- a. American College of Emergency Physicians (ACEP) Board of Directors
 - 1) Chair of the Board of Directors, October 2021 October 2022
 - 2) Vice President, October 2020 October 2021
 - 3) Board Member, October 2017 present (elected to two three-year terms)
 - a) ACEP is the largest national organization of emergency medicine physicians with nearly 40,000 members. Board members oversee all aspects of the organization including setting organizational policy, developing clinical policies, and overseeing educational activities and quality management programs.
- b. Texas College of Emergency Physicians (TCEP) Board of Directors, April 2016 April 2019 (three-year term)
- c. Emergency Medicine Residents Association (EMRA) Board of Directors
 - 1) Legislative Advisor, two-year term, October 2010 October 2012
- 5. Invited Lectures, Presentations, Research Seminars
 - a. International: no presentations completed outside of US; ACEP annual meeting has an international audience
 - b. National
 - American College of Emergency Physicians Annual Meeting (October 2022)
 "Practicing Medicine Without A Law Degree: Emergency Care in a Post-Roe Era"
 Delivered twice, both in-person in San Francisco, CA and on a virtual platform
 - 2) American College of Emergency Physicians Annual Meeting (October 2022)

San Francisco, CA

"Telemedicine Regulatory Challenges Zooming to Your Practice"

3) Florida Atlantic University Grand Rounds Distinguished Speaker (May 2022)

Boca Raton, FL – Virtual due to Covid-19

"Become an Advocate: How Residents Can Improve Health Care"

"Health Policy Hot Topics"

4) Council of Residency Directors Annual Meeting (February 2022)

San Diego, CA

"Clinical Pathologic Case Conference: Metabolic Acidosis"

5) American College of Emergency Physicians Annual Meeting (October 2021)

Boston, MA – Virtual due to Covid-19

"#InsuranceFail: Who is Covering these Surprise Bills?"

6) American College of Emergency Physicians Virtual Grand Rounds (June 2021)

Virtual with national audience

"How Advocacy Today Will Shape the Workforce of Tomorrow"

7) FeminEM Idea Exchange (October 2020)

Chicago, IL – prepared, but cancelled due to Covid-19

"Workshop: Your personal roadmap to professional organization leadership"

8) Illinois ACEP Resident Career Day (August 2020)

Chicago, IL – virtual due to Covid-19

"Become an Advocate: How Residents Can Improve Health Care"

9) American College of Emergency Physicians Annual Meeting (October 2019)

Denver, CO

"#Insurance Fail: Who is Covering these Surprise Bills?"

10) Arrowhead Regional Medical Center Emergency Medicine Residency Grand Rounds (June 2019)

Colton, CA

"Basic Billing and Coding for EM Residents" & "ACEP Update" & "Federal Advocacy in EM"

11) Kent Emergency Medicine Residency Grand Rounds (June 2018)

Warwick, RI

"Getting Sued One Month Out of Residency: A True Story"

12) Leadership and Advocacy Conference, American College of Emergency Physicians (May 2018)

Washington, DC

"Hot Topics: Prudent Layperson" & "State Level Advocacy" Panel

13) FeminEM Idea Exchange (October 2017)

New York City, NY

"Don't Just Get Mad: Get Involved – Advocacy for the FeminEM"

14) Leadership and Advocacy Conference, American College of Emergency Physicians (March 2017)

Washington, DC

"Out of Network / Balance Billing: Where Are We?"

15) Minnesota ACEP Annual Meeting: Keynote Lecture (November 2016) Edina, MN

"Emergency Care and the Changing Political Landscape"

16) University of Michigan Grand Rounds (August 2016)

Ann Arbor, MI

"Getting Sued One Month Out of Residency: A True Story"

17) Leadership and Advocacy Conference, American College of Emergency Physicians (May 2016)

Washington, DC

"State Strategies to Deal With Out of Network / Balance Billing"

18) Leadership and Advocacy Conference, American College of Emergency Physicians (May 2013)

Washington, DC

"Current Issues in Health Policy"

19) New York Emergency Medicine Health Policy Assembly (November 2012) New York City, NY

"20 Things EM Residents Can Do to Improve U.S. Healthcare"

c. Regional

AAMC Southern Group on Educational Affairs (SGEA) Regional Conference (March 2022) Virtual

"A Novel Approach to Curriculum Renewal through Student-Faculty Co-Creation." [workshop] Collaboration with Reusch RT, Khan N, Smith EE, Ismail N

Policy Prescriptions Health Policy Symposium (April 2018)

Houston, TX

"Universal Coverage: Getting There from Here"

Texas College of Emergency Physicians (TCEP) Annual Conference (April 2016)

Houston, TX

"Health Policy Current Events" with Cedric Dark

C. Publications

1. Full Papers in Peer Review Journals

Hameed AB, **Haddock A**, Wolfe DS, Florio K, Drummond N, Allen C, Taylor I, Kendig S, Presumey-Leblanc G, Greenwood E. Alliance for Innovation on Maternal Health: Consensus Bundle on Cardiac Conditions in Obstetric Care. Obstet Gynecol. 2023 Feb 1;141(2):253-263. doi: 10.1097/AOG.00000000000005048. Epub 2023 Jan 4. PMID: 36649333;

Zhu M, Srinivasan N, Karpe A, Bui A, Wang D, **Haddock A**. Characteristics of Healthcare Financial Assistance Programs Serving the Most Populous US Counties. Journal of Health Care for the Poor and Underserved. Aug 2022. PMID: 36245157. DOI: 10.1353/hpu.2022.0106

Mitchell K, **Haddock** A, Husainy H, Walter L, Rajapreyar I, Wingate M, Smith C, Tita A, Sinkey R. Care of the Postpartum Patient in the Emergency Department: A Systematic Review with Implications for Maternal Mortality. American Journal of Perinatology. 2021 Jul 29. doi: 10.1055/s-0041-1732455. Epub ahead of print. PMID: 34327686.

Eppes C, Han S, **Haddock A**, Buckler G, Davidson C, Hollier L. Enhancing Obstetric Safety through Best Practices. Journal of Women's Health. 30(2): 265-269, Nov 2020. PMID: 33227226

ACOG Presidential Task Force on Pregnancy and Heart Disease (including **Alison Haddock MD**). ACOG Practice Bulletin No 212: Pregnancy and Heart Disease. Obstetrics & Gynecology. 133(5):e320–e356, May 2019. DOI: 10.1097/AOG.000000000003243 PMID: 31022123

Boulee D, Kalra S, **Haddock A**, Johnson TD, Peacock WF. Contemporary stethoscope cleaning practices: What we haven't learned in 150 years. American Journal of Infection Control. 2019 March 47(3): 238-242. DOI: https://doi.org/10.1016/j.ajic.2018.08.005 PMID: 30396696

Dark C, Pillow M, **Haddock A**. Teaching Health Policy in Graduate Medical Education: Proposed Curricular Components. Med Ed Publish. November 14th, 2018. DOI: https://doi.org/10.15694/mep.2018.0000260.1

Jauch EC, Barreto AD, Broderick JP, Char DM, Cucchiara BL, Devlin TG, **Haddock AJ**, Hicks WJ, Hiestand BC, Jickling GC, June J, Liebeskind DS, Lowenkopf TJ, Miller JB, O'Neill J, Schoonover TL, Sharp FR, Peacock WF. Biomarkers of Acute Stroke Etiology (BASE) Study Methodology. Transl Stroke Res. 2017 May 5. PMID: 28477280

Paulsen M, **Haddock A**, Silbergleit R, Meurer W, Macy M, Haukoos J, Sasson C. Empirical Hospital and Professional Charges for Patient Care Associated with Out of Hospital Cardiac Arrest Before and After Implementation of Therapeutic Hypothermia for Comatose Survivors. Resuscitation. 83(10): 1265-70. October 2012. PMID: 22410427

2. Full Papers Without Peer Review: None

3. Abstracts

Thadani A, Chen Z, Huang A, Van Benschoten V, Wang D, Gupta R, Huang X, Staggers Andrews K, **Haddock A**, Jaung M. Medical and Social Resources at Emergency Department Discharges: A Prospective Analysis of the Impact of a Volunteer Patient Discharge Initiative on Emergency Department Revisits. *Annals of Emergency Medicine*. October 2021. 78(4): S7–S8

Turner, A, **Haddock**, A, Bicette, R, Andrabi, S, Tran, T, & Dark, C. (2021, October 25). A Team-Based Learning Approach to Charting and Coding Education for Emergency Medicine Residents. [Poster Abstract]. 2021 American College of Emergency Medicine Academic Assembly, Boston, MA, United States.

Thadani A, Huang A, Van Benschoten V, Chen Z, Gupta R, Wang D, **Haddock A**, Jaung M. Social Resources at Emergency Department Discharges: Evaluation of Patients Request and Utilization. BCM Health Policy Research Day, Judges 1st Choice Winner. May 2020.

Haddock A, Song A, Gaber H, Pillow M. Diversity in Media Representation of Physicians: An Analysis of Stock Images. BCM Center of Excellence in Health Equity, Training and Research (COE) Research Summit. June 2018.

4. Books

- a. Complete Books Written: none
- b. Books Edited
 - 1) **Haddock A** & Schlicher N. [Editors-in-Chief.] Emergency Medicine Advocacy Handbook, 6th edition. *Emergency Medicine Resident's Association*. Currently in editorial process; anticipated publication 2023.
 - 2) **Haddock A** & Schlicher N. [Editors-in-Chief.] Emergency Medicine Advocacy Handbook, 5th edition. *Emergency Medicine Resident's Association*. 2019.
 - 3) **Haddock A** & Schlicher N. [Editors-in-Chief.] Emergency Medicine Advocacy Handbook, 4th edition. *Emergency Medicine Resident's Association*. 2016.
- c. Book Chapters Written:
 - 1) **Haddock A** & Uren B. "Politics of a State System". *Strauss & Mayer's Emergency Department Management, 2nd edition.* American College of Emergency Physicians. January 2021.
- 5. Other Works: Communication To Scientific Colleagues
 - a. Turner A, **Haddock A**, Bicette R, Andrabi S, Tran T, Dark C. "Experimental Curriculum: Team-Based Learning for New AMA Charting and Coding Guidelines" EM Resident. March 10th, 2023.
 - b. **Haddock A**. New Legislation on DNR Orders: Now in Effect. TCEP Member Alert. April 19th, 2018.
 - c. Haddock A & Monroe H. Vermont to Launch All-Payer Accountable Care Organization Model for Financing Health Care. ACEPNow. January 10th, 2017 https://www.acepnow.com/article/vermont-launch-payer-accountable-care-organization-model-financing-health-care/
- 6. Other Works: Communication To General Public
 - Sheldon, M. and Mauro, E. (Feb 16, 2023) "In Texas, where abortion is already a crime, more roadblocks to access could be coming." CBC News, Canada. https://www.cbc.ca/news/world/texas-abortion-access-1.5957451
 - 2) Ungar, L and Hollingsworth, H. (Nov 20, 2022) "Despite dangerous pregnancy complications, abortions denied." Associated Press (widely disseminated) https://apnews.com/article/abortion-science-health-business-890e813d855b57cf8e92ff799580e7e8
 - 3) Zernike, K. (Sept 20, 2022) "Medical impact of Roe reversal goes well beyond abortion clinics, doctors say." New York Times. https://www.nytimes.com/2022/09/10/us/abortion-bans-medical-care-women.html

- 4) Vestal, C. (Sept 1, 2022) "Some abortion bans put patients, doctors at risk in emergencies." Pew Stateline. https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2022/09/01/some-abortion-bans-put-patients-doctors-at-risk-in-emergencies
- 5) Ali, S. (Aug 15, 2022) "State laws could be jeopardizing care in emergency rooms." The Hill. https://thehill.com/changing-america/well-being/prevention-cures/3603199-state-laws-could-be-jeopardizing-abortion-care-in-emergency-rooms/
- 6) Meyer, H. (Aug 9, 2022) "Patients and Doctors navigate conflicting abortion and and emergency care laws." Kaiser Health News (national distribution includes Scientific American) https://www.scientificamerican.com/article/patients-and-doctors-navigate-conflicting-abortion-and-emergency-care-laws/
- 7) Quijano, E. (Oct 12, 2021) "CDC: 65.5% of population partially vaccinated." CBSN, CBS News' 24/7 digital streaming news service. https://www.cbsnews.com/video/average-pace-of-first-dose-coronavirus-vaccinations-in-us-reaches-december-lows/
- 8) Ogilvie, J. (Sept 20, 2021) "COVID medical costs leave families in dire straits." DAME Magazine.
- Guzman, Z. (Sept 15, 2020) "We need a vaccine that's medically effective & trusted." Yahoo! Finance.
 https://au.finance.yahoo.com/news/bill-gates-coronavirus-response-154702039.html
- 10) Gray, L. (Aug 8, 2020) " 'This stuff is hard.' How one Houston ER doc keeps her family safe." Houston Chronicle.
- 11) King, J. (July 20, 2020) "Dr. Alison Haddock Discusses Rising Coronavirus Cases Pushing Hospitals to Breaking Point." CNN.
- 12) Brock, S. (July 19, 2020) "Miami sets curfew as Florida's coronavirus cases surge to 350,000; Record numbers in Texas as 85 babies test positive in one county." NBC Nightly News.
- 13) Reeves, J. (July 18, 2020) "As virus surges in some US states, emergency rooms are swamped." Associated Press. (widely disseminated, both nationally and internationally)
- 14) Berman, J. (July 17, 2020) "What's better: masks with filters or without?" FOX26 Houston.
- 15) Guzman, Z. (July 10, 2020) "Dow jumps as Gilead says drug reduces COVID-19 death risk." Yahoo! Finance.
- 16) Hernandez, H. (July 7, 2020) "Face masks vs face shields for teachers." KPRC-TV, Click2Houston.
- 17) Amroliwala, M. (July 7, 2020) "Coronavirus: Cases surge in the US." BBC World News.
- 18) Tur, K. (July 6, 2020) "Texas breaks COVID-19 case record over July 4th weekend." MTP Daily: MSNBC.

- 19) Tozzi, J et al. (June 24, 2020) "Hospitals are counting beds again with cases rising." Bloomberg.
- 20) Johnson, S. (May 29, 2020) "CDC underestimates COVID's toll on healthcare workers, experts say." Modern Healthcare.
- 21) Galvin, G. (April 14, 2020) "CDC: Nearly 10,000 Health Care Workers Had Coronavirus But There's Probably More." US News & World Report.
- 22) Grieder, E. (April 8, 2020) "Face masks are latest example of 'new normal' in coronavirus era." Houston Chronicle.
- 23) Moritz, M. (April 7, 2020) "Are you wearing your face mask correctly? Keeping your hands off the mask is key." KSAT, San Antonio.
- 24) Hernandez, H. (April 6, 2020) "Are you wearing your cloth mask the right way? Here are the most common mistakes." KPRC-TV, Click2Houston.
- 25) McArdle, J. (April 1, 2020) "Dr. Alison Haddock on U.S. Coronavirus Response." Washington Journal, CSPAN.
- 26) Deam, J. (March 22, 2020) "As cases mount, Texans tackle the reality of the pandemic." Houston Chronicle.
- 27) Deam, J. (March 19, 2020) "Texas doctor on pandemic's 'front line' wages harrowing, 8-hour battle to get tested for COVID-19." Houston Chronicle.
- 28) George, C. (Aug 7, 2019) "Physicians call for policy solutions following mass casualty shootings." Texas Medical Center News.
- 29) Lee, A. (Aug 6, 2018) "Blue Cross Blue Shield of Texas' Controversial ER Claims Process Begins." Houston Public Media.
- 30) Lee, A. (June 4, 2018) "Blue Cross Blue Shield of Texas Delays Controversial Change After Backlash). Houston Public Media.

III. TEACHING INFORMATION

A. Educational Leadership Roles

- 1. Thread Director, PREP (Preparing to Enter the Profession) and MIND (Metacognition, Inquiry and Discovery) (January 2022 present)
 - a. Responsible for coordination of curricular content throughout MS1-MS4 year in multiple subject areas, including clinical skills, communication, ethics, health systems science, professionalism, self-directed learning, inquiry/research and more. Role includes defining learning outcomes and objectives, ensuring continuity and completeness without redundancy across the four-year curriculum, collaboration with content experts to develop assessments and learning experiences. Reporting to the Assoc Dean of Curriculum and Vice Dean of the Medical School.
 - b. FTE support from the Curriculum Office
- 2. Master Teachers Fellowship Program Co-Director (July 2021 present)

- a. Role includes developing monthly customized curricula of 4 hours of educational programming to improve the knowledge, skills, and attitudes of BCM faculty in the field of education. Conducting individual meetings with fellows to support them in their educational research projects. Collaborating with co-director and advisory team on curriculum renewal to shift from time-based to competency-based curriculum. 22 fellows enrolled in current class of program (2021-2023).
- b. FTE support from the Dept of Education, Innovation and Technology
- 3. Curriculum Renewal Workgroup Member (November 2019 January 2022)
 - a. Chair of Metacognition, Inquiry and Discovery (MIND) Subgroup and Pathways ad hoc Subgroup of (CREW). Led a team of multiple faculty members and medical students in developing learning outcomes and curricular plans for pertinent subject matter in the new curriculum. Areas covered include self-directed learning, evidence-based practice, and forthcoming mandatory student research project. Also involved in development of various system blocks in the new MS1 curriculum.
 - b. FTE support from Office of the Provost
- 4. Course Director, Climate Change and Human Health pre-clinical elective (Fall 2020) In collaboration with student leaders, developed course, recruited participants
- 5. Emergency Medicine Health Policy GME Curriculum and Fellowship Co-Director (2015 present)
 - a. Fellowship initiated in 2015 with first fellow successfully recruited in '21-'22 AY
- 6. American Board of Emergency Medicine: Oral Examiner (2017-2019)
 - a. Served as examiner for new residency graduates to become board certified in EM
 - b. On hold currently due to conflict-of-interest concerns with other leadership roles
- 7. Chair, ACEP Education "Tiger Team" 2022-present
 Selected to lead a team of staff and members in developing an innovative new model for ACEP's annual meeting, which draws thousands of emergency physicians from around the globe
- 8. ACEP Education Committee, Educational Meetings Subcommittee member (2013-2017)
- 9. ACEP Education Committee, Board Liaison (2019-present)
 - a. Responsible for planning Health Policy and Risk Management tracks (total 20hrs of content) more than 6,500 annual attendees at this largest national conference in Emergency Medicine

B. Didactic Coursework

- 1. Courses Taught at BCM Within the Primary Department
 - a. Regularly precept BCM and external elective students during their EM rotations
 - b. BCM EM Residency Didactics Presentations: Audience includes EM residents, PA fellows and faculty colleagues
 - 1) Ethics, Professionalism and Policy (EP3) "Lifelong Learning" May 2022
 - 2) Malpractice Mock Trial April 2022
 - 3) Clinical Pathologic Case Conference: Hemolytic Anemia October 2021
 - 4) Hot Topics in Health Policy September 2021
 - 5) Wellness and Sleep January 2021
 - 6) Reimbursement Workshop Follow-Up January 2021
 - 7) Code Status Discussions Zoom Simulation December 2020
 - 8) Clinical Pathologic Case Conference: Multiple Sclerosis October 2020
 - 9) Intern Orientation: Risk Mitigation June 2020
 - 10) Cognitive Biases April 2020
 - 11) EP3 "Making Medical Choices" Unit Leader April 2020
 - 12) EP3 "Professionalism in Practice" Unit Leader October 2019
 - 13) Reimbursement Workshop August 2019
 - 14) Intern Orientation: Risk Mitigation July 2019
 - 15) EP3 "Health Economics" Unit Leader May 2019
 - 16) Reimbursement: Medical Decision Making April 2019

- 17) EP3 "Lifelong Learning" Unit Leader January 2019
- 18) Clinical Pathologic Case Conference: Rickettsial Disease September 2018
- 19) Communications Simulation: Code Status Discussions July 2018
- 20) Intern Orientation: Risk Mitigation June 2018
- 21) EP3 "End of Life" Unit Leader May 2018
- 22) How Residents Can Improve Health Care March 2018
- 23) "Business of Medicine" Panel February 2018
- 24) Malpractice Mock Trial January 2018
- 25) "Getting Sued One Month Out of Residency" January 2018
- 26) Intern Orientation: Risk Mitigation June 2017
- 27) Death Notification Role-Playing Didactics June 2017
- 28) Billing & Coding Workshop May 2017
- 29) Adverse Events / Medical Errors March 2017
- 30) Wellness Small Groups December 2016
- 31) Approach to Abnormal Vitals September 2015
- 32) Simulation: Wide Complex Tachycardia January 2015
- 33) Journal Club Leader annually, 2016-2022
- 34) Mock Oral Boards Examiner March 2015, March 2016 & March 2017

2. Courses Taught at BCM External to the Primary Department

a. Core Coursework

Learning Community Advisor – Indigo Quad (July 2019 – December 2021)

Provide 1:1 formal advising for medical school students 2x per year for one hour per meeting; additional informal advising through informal sessions, texts/phone calls, emails and social events throughout the year. Total of 50 students, ranging from MS1 to MS4, over my three years as an advisor.

FTE support from Office of Student Affairs

Critical Thinking and Problem Solving (CTAPS) Facilitator (2018 – present)

Designed several curricular units in inaugural year, 2018-2019

FTE support from Office of the Provost

Team based learning course designed to expose MS1s to case-based learning, early clinical decision-making and principles of learning science

Small group leader for MS1 Ethics Course – Spring 2016 & Spring 2017 & Spring 2019 Spring 2018: redesigned one unit of the curriculum with Christi Guerrini (course director) Spring 2022: served as substitute facilitator

Small group facilitator for MS1 Integrated Problem Solving Course – Fall 2017 – Spring 2018 Problem-based learning course for MS1s to develop student skills in self-directed learning and understanding of clinical application of basic science

PARTAKE Curriculum Facilitator – July 2017, July 2020, July 2021 Educational program to explore social determinants of health with MS1s during orientation

b. Elective Coursework

- 1) Faculty Participant with two pre-clinical electives primarily led by Dr Cedric Dark:
 - a) "Business of Medicine" combined BCM/UT elective for MS1/MS2 Spring 2015, Spring 2016, Spring 2017

- b) "Health Policy Journal Club" BCM elective for MS1/MS2 Fall 2017, Spring 2018, Fall 2019
- 2) Course Director, Climate Change and Human Health Elective October 2020
 - a) "Become an Advocate: Climate Change Advocacy"
- 3) Faculty Guest Speaker:
 - a) "Health Policy Analysis: Physicians Shaping Policy" Elective, invited by Prof Majumder April 2022, December 2022
 - b) "Physician as Advocate: Beyond the Exam Room" Elective, invited by Dr Joey Fisher June 2018, June 2022
 - c) "From Clinic to Capitol: Physicians as Advocates" Elective, invited by Dr Claire Bocchini September 2017
 - d) "The Policy Process" with Cedric Dark, General Surgery Residency Didactics February 2015
- 3. Courses Taught at Other Institutions While at BCM: n/a
- 4. Courses Taught Prior to BCM: n/a

C. Curriculum Development Work

- 1. Emergency Medicine Residency Health Policy & Advocacy Curriculum (2014-present)
 - a. Work to develop residency curriculum, including experiential learning and active learning, to develop program of education over three years for residents. Includes integration with BCM-wide EP3 program as well as departmental curricula in administration and social EM
 - b. Co-track leader with Dr Cedric Dark. Have recently added additional collaborators.
 - c. Audience includes 42 EM residents as well as PA fellows and some rotating medical students.

D. Non-didactic Teaching While at BCM

- 1. Resident Training
 - a. Every clinical shift at Ben Taub Hospital includes residency training and development
 - b. Active participant in daily white board rounds, weekly residency conference
 - c. Formal mentor to EM residents: Moises Gallegos (Class of 2018), Shehni Nadeem (Class of 2019), Pranali Koradia (Class of 2020)
- 2. Clinical Fellow Training: Health Policy Fellows
 - a. 2021-2022: Brianna Wapples
 - b. 2022-2023: Hannah Gordon
- 3. Graduate Student Training: n/a
- 4. Medical Student Mentoring
 - a. Informal mentor to multiple medical students
 - b. Have presented to EMIG on Health Policy and Organized Medicine Leadership
- 5. Undergraduate Student Mentoring
 - a. Mentor to the Rice Patient Discharge Initiative, 2016-present
 - 1) Role includes support for undergraduate volunteer program providing resources in the ED to address patient's social determinants of health.
 - 2) Also provide research mentoring and career advice for pre-medical students

E. Faculty Development / Continuing Medical Education

- 1. Faculty Retreat Coordinator, Department of Emergency Medicine (2018 present)
 - a. Planned curriculum and organized retreats in collaboration with other faculty members
 - b. Mini-retreats: December 2018, February 2019, December 2019, February 2020
 - c. Full-day retreats: May 2019, October 2019, May 2020 (cancelled due to COVID), May 2022
 - d. Quarterly faculty development sessions from Fall 2020 Spring 2022 for junior faculty
- 2. TCEP Track Planner, 2017-2019
 - a. Responsible for Health Policy Track for Texas College of Emergency Physicians annual meeting

F. Lectures and Presentations, national

 Association of American Medical Colleges Group on Faculty Affairs and Group on Women in Medicine and Science Joint Professional Development Conference, Hosted "Table Topic" on "Finding Fulfillment through Advocacy," July 2019

IV. PATIENT CARE AND CLINICAL CONTRIBUTIONS

A. Patient Care Responsibilities

- 1. Provide patient care at Ben Taub in the Emergency Center, 2014-present
- 2. Currently provide care via telehealth for Harris Health emergency patients, typically 1 shift per month
- 3. Provide patient care at Baylor St Luke's McNair campus on a PRN basis
- 4. Harris Health Ethics Committee Member, 2015-present assist with clinical Ethics Consult service 4 weeks/year, 2017 2019

B. Clinical Leadership or Business Development

- 1. Assisted with development and rollout of telehealth programs at both BCM/BLSMC and Harris Health
 - a. Role included regular meetings with BCM leadership in 2020-2021 to develop Baylor Medicine emergency telehealth program (in partnership with Integrated Emergency Services)
 - b. Served as one of the initial pilot providers of emergency telehealth at Harris Health via the Ask My Nurse telehealth program, giving feedback to leadership and helping optimize program

C. Voluntary Health Organization Participation

1. See "Leadership in Professional Societies"

D. Contributions, Initiatives of Recognition Related to Patient Safety and Healthcare Quality

- 1. Co-Chair, Alliance for Innovation on Maternal Health Patient Safety Bundle: Cardiac Conditions in Obstetrical Care: https://safehealthcareforeverywoman.org/aim/patient-safety-bundles/maternal-safety-bundles/cardiac-conditions-in-obstetrical-care/
 - a. Have participated in ongoing efforts to develop quality programs to improve maternal mortality nationwide
 - b. Representing emergency medicine clinicians and our perspective on both prenatal and postpartum care

E. Contributions to Health and Science Policy (institutional, regional, state, or federal level)

- 1. State
 - a. Texas Medical Association
 - 1) TMA Task Force on Health Care Coverage: 2021-2022

Participated in special group convened to respond to any legislative initiatives related to Medicaid expansion in TX in the 2021 Legislature; successfully helped advocate for the expansion of Medicaid coverage from 2 months to 6 months postpartum

2) HCMS Board on Medical Legislation: 2016-2020

Discussed state legislative and policy issues impacting Harris County, particularly providing the perspective of a physician working in a public hospital and in emergency medicine

3) TMA First Tuesdays: 2014-present

Regularly participate in annual lobby days in Austin, including bringing Harris County medical students along to learn about the legislative process

b. Texas College of Emergency Physicians

1) Active in varied issues through committee work, including advocacy for SB1264 in 2019, to resolve billing disputes between physicians and insurance companies while protecting patients from balance billing

2. Federal

- a. American College of Emergency Physicians
 - 1) Annual attendance at Leadership and Advocacy Conference since 2009

 Includes meeting with federal legislators on policy issues pertinent to emergency medicine; specifically advocating for:
 - 1. More resources to address physician mental health; legislation passed includes Lorna Breen Act (2022)
 - 2. Solution to balance billing which protects patients while requiring insurance companies to provide fair coverage; legislation passed includes No Surprises Act (2021), ongoing regulatory activity in 2022-present
 - 3. Enhanced access to buprenorphine, particularly to help patients in the ED with Opioid Use Disorder, with regulatory activity including the repeal of the X-waiver requirement (Consolidated Appropriations Act, 2023)
 - 2) Developed relationships with my representatives, Dan Crenshaw (R-TX) and Lizzie Fletcher (R-TX), including episodic meetings and contact with health staffers

V. SERVICE CONTRIBUTIONS

A. Administrative Assignments and Committees

- 1. Faculty Senate
 - a. Faculty Senate Delegate, Department of Emergency Medicine (2017-2018)
 - b. Faculty Senator, Department of Emergency Medicine (2018-2020, 2020-2023)
 - c. Participant in Strategic Planning, Faculty Affairs & Benefits, and Communication Committees
- 2. Medical Executive Committee, Department of Emergency Medicine (2017 2022)
 - a. Includes monthly meetings of 1-2 hours, assisting Chair in his leadership of our department
 - b. Faculty Diversity Task Force member and Exec Committee Liaison, 2018 2020

B. National, Regional or Local Participation in Professional or Voluntary Organizations

- 1. Co-Founder, FEM@BCM (2018-present)
 - a. Organization within the department created with a mission "to promote the advancement and equity of women in emergency medicine by mentoring and inspiring leadership"
 - b. Events have included faculty and residents including social events and service projects
- 2. Member, Board of Directors, Friends of the Texas Medical Center Library: 2016-2020

C. Other Pertinent Information

- 1. Completed BCM "Career Advancement Series: Assistant Professor Women" 2018
- 2. Representative from Department of EM to BCM Faculty Development Forum 2018-2019



2023 PRESIDENT-ELECT CANDIDATE WRITTEN QUESTIONS

Ryan A. Stanton MD, FACEP

Question #1: How would you address concerns that ACEP may be unduly influenced by corporate practice interests?

The impact of the corporate practice of medicine (CPOM) has been a narrative that has been propagated for decades yet escalated over recent years with broad consolidation within medicine. CPOM is a very important topic for our college and physicians and deserves ongoing focus.

During my four years on the board and all the meetings during my tenure, I have never felt there was any outside corporate or industry influence in the boardroom. The ACEP Board of Directors and our officers are held to the highest standard of ethical behavior and representation through our organizational documents, fellow members of the board, the representative body of our college, and our global membership. Our leaders know that their responsibility is to the college and our physicians, not to their own employers and interests outside of ACEP. We are an organization OF emergency physicians FOR emergency physicians.

I do acknowledge that imagery and perception are very powerful and feel we have significant opportunity within the college. It may be difficult to dispel a specific narrative when it is highly visible within the college. Subject matter displayed prominently on banners and advertisements can distract from the primary purpose of the gathering. We have made significant steps with the removal of corporate sponsorship of ACEP official gatherings such as the opening/closing sessions at SA and within the educational settings. We continue to strengthen the transparency of employers with the checklists and disclosures available to all attendees to SA. As for me personally, I would like to see us take several more steps to separate ACEP from the "business of medicine".

- 1) Remove employer advertisements and banners from high visibility areas of SA and our publications. These should be areas to promote the college and the wonderful work of our emergency physicians.
- 2) Redesign the vendor areas with a separate setting for employment opportunities like we see with EMRA, giving them all equal footing and opportunity, focusing on the job itself rather than flashy spaces and fleeting perks. This also provides a concentrated location for those in search of a job to focus on that alone. This also allows the remainder of the vendor area to be focused on other aspects of EM practice outside of employment.
- 3) Continue to strengthen transparency and expectations with employers across the board. As "The American College of Emergency Physicians", our role is to advocate as a component body for our physicians which means helping every one of them with the accurate and details information on employment opportunities no matter the setting in which they choose to work.
- 4) Continue to build and embolden resources for physicians, including contract review, legal resources, and as an advocate for emergency physicians when there are issues/concerns.
- 5) Continuing to address concerns of our members, providing them with resources, protection, and guidance when there are employment related challenges.

It is our responsibility as ACEP and our leaders to continue to demonstrate a clear separation and independence from outside entities. We must continue and further walk the walk and talk the talk of ACEP as the largest EM organization that will continue to fight and advocate for every emergency physician irrespective of practice model and setting.

Question #2: What are your ideas for creating and/or providing tangible and indispensable benefits to ACEP members?

Our charge is in our name. We are "The American College of Emergency Physicians". Every decision we make and project we pursue should be to the advancement and benefit of our emergency physicians. As we pivot the college into the future, we must narrow our focus and efforts to the simple idea of "how do we help our physicians/specialty" and by doing so, provide the best possible care to our patients. One of the greatest challenges is that some of the most significant ROI flies under the radar. The work of our reimbursement team has protected emergency physicians from significant cuts, protecting our codes, and ensuring that efforts to whittle away at physician payments are blocked. Legal and advocacy efforts on the state and federal level have protected physicians, our practice, and our patients. ACEP does amazing work on behalf of its physicians and is the organization that can truly move the needle for emergency physicians. There are three main things we must do as a college to address the question.

1) We must narrow our focus to projects and efforts that directly benefit the careers and environments of our emergency physicians. Giving our emergency physicians the best opportunities and settings allows them to provide the best care for each and every patient 24/7/365.

- 2) We must connect with our physicians "where they are" and provide the ACEP experience they need to maximize their career, communicating the resources, opportunities, efforts, and successes of ACEP to their specialty. This includes endeavors to update our platforms, IT infrastructure, and engagement to allow an ACEP experience that is tailored to each individual physician no matter their interests, stage of career, or environment of work. I want to see each physician able to connect to "My ACEP".
- 3) We must continue to foster leadership and opportunities for physicians within EM to utilize their expertise to advance emergency medicine and our specialty. None of us has all the skills sets or answers, but together, we can move mountains

4)

Question #3: What new thoughts do you have in balancing board-certified emergency physician workforce distribution gaps and safe scope of practice for non-physicians?

The workforce study shook the foundation of emergency medicine. After decades of assumptions that we would "never fill all the seats", we have been faced with the threat of an overabundance of emergency physicians which has led to some of the downstream impacts, including the match struggles. What is even more clear is that we continue to have a significant distribution issue within EM with abundance pushing down larger markets while rural and critical access setting still struggle to fill shifts. More recent data has demonstrated that the initial study significantly underestimated physician career longevity and attrition (which is an issue in itself), but it has provided an opportunity to address challenges that were known and unknown. The workforce efforts must continue with opportunities to guardrail residency growth, raise the bar on the skillsets of emergency physicians, and ensure we continue to recruit the best and brightest to this wonderful specialty. One of the major areas of focus must be on the distribution of EM physicians with opportunities within residency to have substantive rural and critical access experience. This also means advocating for incentives that can assist attracting physicians of all career stages to rural and critical access settings.

I have long felt that every emergency patient deserves access to an emergency physician. Non-physician practitioners have played an important role in the US healthcare system, but ongoing efforts for expanded scope of practice and independence is not in the best interest of our patients. I absolutely believe in the physician led team. Within my own PDG, I continue to push towards more physician coverage with selective NPP coverage where appropriate. I believe the best care is provided by an emergency physician...period. If we truly are experiencing saturation of available emergency jobs, then we need to see growing access to emergency physicians in all environments of emergency medicine.

Three take home points for what I believe.

- 1) There is no substitution for the physician led team. Every patient in a US emergency department deserves access to an emergency physician no matter their zip code.
- 2) At no point should a physician role be replaced by a NPP for any reason, but especially as a perceived profit/control strategy.
- 3) ACEP must continue to fight expanded scope of practice or independent practice on the state and federal level. Independent practice is the privilege earned with having a MD or DO after your name.

The workforce dilemma is a challenge we will face for years to come. I am proud that ACEP has been willing to tackle tough questions and work towards realistic solutions in the promotion of EM and our physicians.



CANDIDATE DATA SHEET

Ryan A. Stanton MD, FACEP

Contact Information

106 Stonewall Dr. Nicholasville KY, 40356

Phone: 859-948-2560 E-Mail: RStanton@acep.org

Current and Past Professional Position(s)

Central Emergency Physicians – 2003-Present

Medical Director – Lexington Fire/EMS – 2003-Present

Medical Director – GMR Motorsports/NASCAR/SRX/USF – 2017-Present

Founder/CEO – Everyday Medicine – 2012-Present

Chief Medical Contributor – Fox 56 News – 2022-Present

Medical Director- UK Good Samaritan EM – 2008-2013

Faculty- University of Kentucky Chandler Medical Center – 2008-2013

Chief Medical Contributor- WKYT TV 27 – 2019-2021

Chief Medical Contributor- WTVQ ABC-36 – 2008-2018

Clear Channel Radio-2005

National Public Radio- WETS-FM 89.5 – 1996-2008

Education (include internships and residency information)

University of Kentucky Emergency Medicine – 2005-2008

East Tennessee State University – Surgery Internship – 2003-2004

East Tennessee State University – James H. Quillen College of Medicine – Class of 2003

Specialty Board Certifications(e.g., ABEM, AOBEM, AAP, etc.) and dates certified and recertified)

ABEM – Emergency Medicine – 2009-2019, recert 2019-2029

ABEM – Emergency Medical Services – 2021-2031

Professional Societies

American College of Emergency Physicians – 2005-Present

Kentucky Chapter of the American College of Emergency Physicians – 2005-Present

Kentucky Medical Association/LMS – 2003-Present

American Academy of Emergency Medicine – 2019-2021

National ACEP Activities – List your most significant accomplishments

ACEP Frontline Podcast – Creator/Host – 2017-Present

Member – Communications/PR Committee – 2008-Present

ACEP/EDPMA Joint Task Force on Reimbursement – PR Chair – 2016-2017

Chair – Communications/PR Committee – 2014-2016

9-1-1 Network Advocacy Member of the Year – 2014

ACEP Spokesperson of the Year - 2012

ACEP Chapter Activities – List your most significant accomplishments

KACEP President – 2012-2014 KACEP PR Chair – 2008-Present KACEP Education Chair – 2008-2013

Practice Profile

 Total hours devoted to emergency medicine practice per year:
 1200
 Total Hours/Year

 Individual % breakdown the following areas of practice. Total = 100%.

 Direct Patient Care 100 %
 Research 0 %
 Teaching 0 %
 Administration 0 %

 Other: About another 2400 hrs per year of EMS and motorsports medicine.
 %

Describe current emergency medicine practice. (e.g. type of employment, type of facility, single or multi-hospital group, etc.)

I am a partner in a single hospital physician owned democratic group with 14 physicians serving a community hospital with a volume of 50k per year. Comprehensive stroke and heart center.

Provide specific title(s) or position(s) within your group, hospital, department, system (e.g., Medical Director, Regional Director, Director of Quality, Vice President, Chief of Staff, etc.)

Emergency Physician – Central Emergency Physicians

Expert Witness Experience

If you have served as a paid expert witness in a medical liability or malpractice case in the last ten years, provide the approximate number of plaintiff and defense cases in which you have provided expert witness testimony. Expert witness testimony is defined as oral or written evidence given by an expert witness under oath, at trial, or in an affidavit or deposition.

Defense Expert 3 Cases Plaintiff Expert 0 Cases



CANDIDATE CONFLICT OF INTEREST DISCLOSURE STATEMENT

	Ryan A. Stanton MD, FACEP				
1.	. Employment – List current employers with addresses, position held, and type of organization.				
	Employer:	Central Emergency Physicians			
	Address:	1740 Nicholasville Rd.			
		Lexington KY 40503			
	Position Held:	Emergency Physician			
	Type of Organization:	Private Democratic Group			
	Employer:	Lexington Fire/EMS			
	Address:	219 E. 3 rd Street			
		Lexington KY 40502			
	Position Held:	Medical Director			
	Type of Organization:	LFUCG Fire Department			
2.	Leadership Positions in Other Organizations, Chapters, Commissions, Groups, Coalitions, Agencies, and/Entities (e.g., Board of Directors positions, committees, and/or spokesperson roles) – <i>List all organizations an addresses for which you have served (past and current)</i> – <i>including ACEP chapter Board of Directors</i> .				
	Organization:	Kentucky Statewide Opioid Stewardship Program - KHA			
	Address:	2501 Nelson Miller Parkway			
		Louisville, KY 40223			
	Type of Organization:	Medical Society/Association			
	Leadership Position:	Emergency Department/Acute Care Lead			
	Term of Service:	2019-Present			
	Organization:	Kentucky American College of Emergency Physicians			
	Address:	PO Box 2831			
		Louisville, KY 40201			
	Type of Organization:	State Chapter – Medical Association			
	Leadership Position:	President, PR Chair, Education Chair			
	Term of Service:	2008-Present			

Candidate Conflict of Interest Disclosure Statement Page 2

Organization:	Everyday Medicine LLC			
Address:	106 Stonewall Dr.			
	Nicholasville, KY, 40356			
Type of Organization:	Media/Education			
Leadership Position:	Founder/CEO, Host, Producer			
Term of Service:	2012-Present			
Organization:	Kentucky Naloxone Project			
Address:				
Type of Organization:	Not for Profit			
Leadership Position:	Kentucky Lead			
Term of Service:	2022-Present			
	atterest (other than a less than 1% interest in a publicly traded company); or c) any ng, dining, or entertainment valued at more than \$100.			
I. Describe any financial interests or positions of responsibility in entities providing goods or services in support of the practice of emergency medicine (e.g., physician practice management company, billing company, physician placement company, book publisher, medical supply company, and/or a malpractice insurance company), other than owning less than a 1% interest in a publicly traded company.				
NONE☐ If YES, Please Describe: Tel	eflex – Clinical Advisor			
. Do you have any family members who are non-physicians providing care to patients, including, but not limited to, nurse practitioners, physician assistants, or certified nurse specialists? Family members include a spouse domestic partner, parent, child, sibling, grandparent, grandchild, parents, and siblings-in-law, stepparents stepchildren, guardians, wards, or members of your household.				
⊠ NONE				
☐ If YES, Please Describe:				
6. If you answered yes to Questi department or in urgent care?	ion 5, is your family member currently or was formerly employed in an emergency			
N/A □				
NOIf YES, Please Describe:				

Candidate Conflict of Interest Disclosure Statement Page 3					
7. Describe any other interest that may create a conflict w may create the appearance of a conflict of interest.	rith the fiduciary duty to	the membership of ACEP or that			
NONE					
☐ If YES, Please Describe:					
8. Do you believe that any of your positions, ownership would constitute a conflict of interest with ACEP?	interests, or activities, when	hether listed above or otherwise,			
⊠ NO					
☐ If YES, Please Describe:					
9. I have read and agree to abide by the ACEP Conflict of Interest policy statement. NO					
∑ YES					
10. I have read and agree to abide by the ACEP <u>Leadership and Volunteers Conduct</u> policy to ensure that ACEP volunteers, consultants, and staff can perform their valuable services to ACEP free of harassment and discrimination.					
□NO					
∑ YES					
I certify that the above is true and accurate to the best of my knowledge and belief: Should a possible conflict of interest arise, I recognize that I have the obligation to notify the appropriate individual(s) and to abstain from participation in any business of ACEP that may be affected from such perceived or actual conflict of interest until it is determined whether or not a conflict exists and if so how that conflict may be resolved. If any relevant changes occur in my circumstances that would be reasonably viewed as requiring disclosure, I recognize that I have an obligation to file an amended conflict of interest disclosure statement.					
Ryan A. Stanton MD, FACEP	Date	6/18/23			



KENTUCKY CHAPTER OF THE AMERICAN COLLEGE OF EMERGENCY PHYSICIANS



KACEP PO Box 2831 Louisville, KY 40201-2831

OFFICERS
President

Hugh Shoff, MD, FACEP

Immediate Past President Christopher Pergrem, MD, FACEP

President~ Elect Beth Spurlin, MD, FACEP

Secretary/Treasurer Jeffery Baker, MD

Education Jonathan Bronner, MD

Emergency Medical Services Timothy Price, MD, FACEP

Governmental Affairs Christopher Pergrem, MD, FACEP

*Membership*Diana Labrada, MD

Pediatric Emergency Medicine Danielle Graff, MD Beth Spurlin, MD, PhD, MBA

Public Relations Ryan Stanton, MD, FACEP

Emergency & Preparedness Andrew Pacitti, DO

Medical Reimbursement Karan Shah, MD

Wellness Martin Huecker, MD, FACEP

Young Physicians Patrick Grace, MD Diana Labrada, MD

Councillors

Jan. '21 - Dec. '22 Chris Pergrem, MD, FACEP Melissa Platt, MD, FACEP Hugh Shoff, MD, FACEP

Alternate Councillors

Jan. '21 - Dec. '22 Beth Sprulin, MD Steven Stack, MD, FACEP Salvator Vicario, MD, FACEP Daniel O'Brien, MD, FACEP Timothy Price, MD, FACEP

Staff

Executive Director
Ashlee Melendez, MSPH, BSN

August 6, 2023 Chair, Nominating Committee P.O. Box 619911 Dallas, TX 75261-9911

ACEP Councillors;

It is with great pleasure the Kentucky Chapter of ACEP (KACEP) and the ACEP Pain Management and Addiction Medicine Section endorse Dr. Ryan A. Stanton as a candidate for President-Elect for the American College or Emergency Physicians. We have had the pleasure of serving with Ryan over many years. He has shown exemplary state and national involvement in ACEP. Ryan is currently serving on ACEP Board of Directors and has held many state leadership roles; Councillor, Public Relations Committee Chair, Vice President, and President of KACEP. He remains an integral member of the state Board of Directors and serves as the Board Liaison for Pain and Addiction Medicine.

Ryan is our "go-to" member for all things public relations. His background in television and radio makes him very comfortable in front of crowds and the camera. He has natural leadership ability and is very charismatic. He serves in leadership and medical directorships for many different entities; Lexington Fire/EMS, AMR/NASCSR Safety Team, AirMed International, and Infield Care Team for NASCAR events.

Ryan works clinically in the emergency department and yet he always finds time to advocate for emergency medicine with the legislators in Frankfort and Washington. No matter how busy, we know we can always count on Ryan to testify on behalf of emergency physicians throughout the state and nation. He takes every opportunity to promote strategies that manage acute and chronic pain in emergency medicine. He has provided many educational presentations on the treatment of patients with opiate addiction.

Ryan always hosts our KACEP EMRA grant awardees at the ACEP Leadership and Advocacy meetings in Washington, DC. He provides our residents a view of the Hill that most would not be able to offer. This has opened many young minds to emergency medicine advocacy and its importance.

Ryan's curriculum vita illustrates his numerous achievements during his career. His medical work, Fire/EMS leadership, media roles, and his young physician mentorships have touched many lives. It is our pleasure to endorse Dr. Ryan Stanton.

Sincerely,

Hugh Shoff, MD, MS, FACEP

Thyh Whyl

President

KY Chapter of ACEP

Donald Stader, MD, FACEP

Chair

Pain Management and Addiction

Ryan A. Stanton MD, FACEP

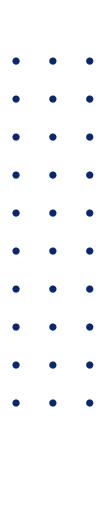
Fellow emergency physicians, we are in a time of significant change within our profession and college. We are facing significant challenges, but these obstacles also present equal opportunities. Our members and fellow physicians are hungry for a strong voice and advocate for our profession. Pressures from all sides willing to take advantage of our environment, departments, and physicians. We as ACEP must be the unifying voice willing speak and fight for our physicians. We have two major roles as the American College of Emergency Physicians. We serve as the "union" of EM, fighting as the body of emergency medicine physicians to move the needle in a positive direction for our physicians, patients, and profession. We also serve to facilitate each physician's "WHY". Every member has unique interests and skills. We must leverage our expertise and resources to help EVERY emergency physician achieve their best career possible.

I offer to this esteemed collection of emergency physicians 32 years of media experience, passionate advocacy on the state and federal levels, as well as platforms that help us reach far outside the membership rolls of ACEP. I have been driven throughout my career on a foundation of the emergency physician and our relationship with our patients. With this as the guiding principle, we can build the emergency medicine of the future that builds up our physicians and allows each and every one of us to provide the best care to every patient in their time of need.

The key is that "the college" can't do it alone. The president-elect and president represent the direction, will, and voice of the members. We must lean into our members and their expertise across the breadth of EM to advance the specialty into the future. I am fully prepared to be that voice and promote the greatness of our 39k+ members. Whether it is our medical students, residents, attendings, or legacy physicians, we are a community of individuals that together, can change the landscape of healthcare.

We are the American College of Emergency Physicians, individuals that serve every man, woman, and child in this country. Together, we are the safety net of this countries healthcare system and together, we can guide the future of emergency medicine.





THIS IS A TURNING POINT FOR ACEP AND EMERGENCY MEDICINE. OUR PHYSICIANS ARE STARVING FOR A STRONG VOICE AND ADVOCATE TO LEAD THE WAY INTO THE FUTURE FOR OUR SPECIALITY. OUR NUMBERS ARE OUR STRENGTH. WE WILL UNIFY AS A COLLEGE TO FIGHT FORWARD AND BUILD THE SPECIALITY WE WANT TO SEE AND ONE OUR PATIENTS NEED. OUR FUTURE AS ACEP AND MY DRIVE IS HELPING PHYSICIANS FIND THEIR "WHY" AND HELPING EMERGENCY PHYSICIANS BUILD THE CAREER THAT IS BEST FOR THEM BASED ON THEIR SKILLS, INTERESTS, AND PASSIONS. WE CATER TO THE EMERGENCY PHYSICIAN AND THEN UNITE AS THE VOICE, STRENGTH, AND ADVOCATE OF EMERGENCY MEDICINE.

OR. RYAN A.
STANTON, MD. FACEP



Ryan A. Stanton MD, FACEP, FAAEM

ADDRESS

106 Stonewall Dr. Nicholasville, KY 40356

PHONE

859-948-2560

EMAIL

ryanastanton@gmail.com youreverydaymedicine@gmail.com

WEB

www.StantonMD.com

Profile

Board certified emergency physician in Lexington, Kentucky with involvement in community, pre-hospital, and motorsports medicine. Interests in media and public education through internet, podcast, print, and television. Active in leadership with local and national organizations through work with Central Emergency Physicians, KACEP, ACEP, AMR, and NASCAR.

Experience

EMERGENCY PHYSICIAN, CENTRAL EMERGENCY PHYSICIANS, LEXINGTON, KY – 11/2013-PRESENT

Emergency Physician at Baptist Health Lexington

MEDICAL DIRECTOR, LEXINGTON FIRE/EMS LEXINGTON, KY - 3/2013-PRESENT

Medical Director for one of the premier fire departments and EMS services in Kentucky, overseeing the EMS operations for over 48,000 EMS runs annually.

MEDICAL DIRECTOR, AMR/NASCAR SAFETY TEAM-4/2017-PRESENT

On-track response physician for NASCAR as part of the AMR/NASCAR Safety Team at tracks throughout the country. Named team Medical Director as of 1/1/20.

KENTUCKY/FLORIDA STATE MEDICAL DIRECTOR, AIRMED INTERNATIONAL – 1/2014-PRESENT

Kentucky and Florida state medical director for AirMed International which provides air medical services throughout the world.

EVERYDAY MEDICINE AND ACEP FRONTLINE PODCASTS, 1/2010-PRESENT

Production of two emergency medicine based podcasts. Everyday Medicine in conjunction with Emergency Medicine News and ACEP Frontline with the American College of Emergency Physician

EMSConnect- 5/2019-Present

EMS part-owner and educator for EMSConnect. One of four physician educators for this nationwide company.

INFIELD CARE CENTER FOR NASCAR SANCTIONED AND OTHER RACING EVENTS KENTUCKY SPEEDWAY AND TALLADEGA SUPER SPEEDWAY – 6/2006-4/2017

Medical Services for Kentucky Speedway 2006-2014 and Talladega Super Speedway 2015-2017

"DOCTOR ON CALL" FOR ABC-36, LEXINGTON, KY -1/2009-12/2016

On-Air physician for weekly "ask the doc" segments, weekly "what's going around" segments, and as needed for health-related interviews.

EMERGENCY PHYSICIAN, MESA/TEAMHEALTH, LEXINGTON, KY -7/2008-7/2014

Emergency Physician and past Medical Director at UK Good Samaritan Hospital in Lexington, KY

ASSISTANT PROFESSOR OF EMERGENCY MEDICINE, UKHEALTHCARE, LEXINGTON, KY – 7/2008-6/2013

Emergency Physician and Assistant Professor for the UK Emergency Medicine Residency Program.

ABC NEWS MEDICAL UNIT INTERN, BOSTON, MA, FALL 2005

Worked with the ABC Medical Unit on story research, composition, interviews and writing for ABCNews.com and ABC News programs under the direction of Dr. Tim Johnson.

WETS-FM 89.5 NATIONAL PUBLIC RADIO PRODUCER, JOHNSON CITY, TN - 10/1996-12/2015

Produced "Everyday Medicine", a weekly segment pertaining to common medical topics focused towards patients and the lay public. Past roles as a board operator and announcer, as well as producer of several programs including "Reel Music" and "Ritmo Latino".

WJHL-TV CBS PRODUCTION ASSISTANT, JOHNSON CITY, TN - 4/1999-8/1999

Production assistant duties including camera operation, sound board, editing, story composition, and directing.

Board Certification

American Board of Emergency Medicine, Board Certified, 2009-Present

American Board of Emergency Medicine-, Emergency Medical Services, Board Eligible, 2019-Present

American Board of Emergency Medicine, Board Eligible, 2008-2009

Medical Licensure

Kentucky, 6/26/2008-Active -License #41963

Resident License- 1/2007-6/2008

Alabama, 9/25/2014-Active- License #MD.33740

Tennessee, 4/7/2016-Active- License #54178

Florida, 2017-Active- License #ME.134262

New York, 2018-Active- License #293995-1

Delaware, 2018-Active- License #C1-0012583

Georgia, 2018-Active- License #079785

Pennsylvania, 2018-Active- License #MD465496

Virginia, 2018-Active- License #0101264445

North Carolina, 2018-Active-License #2018-00671

Nevada, 2020-Active-License #19571

Indiana, 12/9/2004-Active- License #01060023A

Residency Training

University of Kentucky, Emergency Medicine, 7/2005-6/2008

East Tennessee State University, General Surgery Preliminary, 7/2003-6/2004

Education

ETSU James H. Quillen College of Medicine, Medical Doctor, 8/1999-5/2003

East Tennessee State University, BS- Chemistry, 8/1995-5/1999

Leadership Positions

Founder/CEO, Everyday Medicine LLC, 7/2013-Present

Board of Directors, American College of Emergency Physicians, 2019-Present

Medical Director, AMR/NASCAR Safety Team, 1/2020-Present

Medical Director, Lexington Fire/EMS, Lexington-Fayette Urban County Government, 3/2013-Present

President, KACEP(Kentucky Chapter of the American College of Emergency Physicians), 1/2013-12/2014

Chairman of Public Relations Committee, American College of Emergency Physicians, 10/2014-10/2016

Assistant Medical Director, AirMed International, 1/2014-Present

Director of PR, Media, and Education, Mesa Medical Group, Lexington, KY, 1/2013-7/2014

Medical Director, UK Good Samaritan Emergency Room, University of Kentucky Healthcare, 7/2008-7/2013

Assistant Medical Director, Kentucky Motor Speedway Emergency Medical Services, 2010-2013

President Elect, KACEP(Kentucky Chapter of the American College of Emergency Physicians), 1/2010-12/2012

Vice President, KACEP, 1/2010-12/2012

Public Relations Committee Chairman, KACEP, 7/2008-Present

Vice Chairman UK ED Executive Committee. UK Healthcare. 1/2010-6/2013

Counselor, American College of Emergency Physicians, 10/2011- Present

PR Committee, American College of Emergency Physicians, 10/2008-Present

National Spokesman, American College of Emergency Physicians, 10/2008-Present

Medical Operations Subcommittee Member, UK Good Samaritan Hospital, 2008-2013

Emergency Medical Advisory Board, Lexington/Fayette County, KY, 7/2008-Present

Chief Resident, UK Healthcare Emergency Medicine, 7/2007-6/2008

Awards/Honors

ACEP 911 Network Member of the Year, American College of Emergency Physicians, 2014

Spokesman of the Year, American College of Emergency Physicians, 2011-2012

Preceptor of the Year, UK Physician Assistant Program, 2010-2011

UK Leadership Legacy Mentor, University of Kentucky, 2011-2012

Gatton School of Business Executive Leadership Program, University of Kentucky, 2009-2010

Publications/Presentations/Talks

Recurring Media Productions

ACEP Frontline Podcast- 10/2015-Present

StantonMD TV Show- 3/2016-9/2018

The Doc is In TV Segment- 2012-Present

Six television markets around the southeast United States

Chief Medical Contributor- WKYT-TV Lexington- 1/2017-Present

WVLK 97.3FM/590AM- Weekly Medical Contributor and Guest Host(Various Shows)- 2010-Present

American College of Emergency Physicians- Spokesperson- 2008-Present

Everyday Medicine for Physicians Podcast- 1/2010-12/2019

Everyday Medicine Podcast- 1/2006-12/2015

Presentations/Talks

ACEP19- Moderator: SoMe in EM- Denver, CO 10/29/19

Emerald Coast Conference- Mythbusting: EM Medication Myths- Destin, FL 6/3-5/2019

Emerald Coast Conference- Law and Order: EM Medical Malpractice- Destin, FL 6/3-5/2019

Emerald Coast Conference- He Said, She Said: Vaccine Refusals- Destin, FL 6/3-5/2019

Kentucky Hospital Association- KY Statewide Opioid Stewardship- ALTO in EM and Beyond, Multiple Sites in KY 2019

Tennessee ACEP 2019- Opioids State of the Union- Chattanooga, TN 3/4/2019

ANC-AHE Annual Conference- State of the Union: Opioids in America-Savannah, GA, 2/20/19

NASCAR Summit 2019- What Can You Actually Do in a Racecar- Concord, NC 1/2019

Kentucky Hospital Association Leadership Academy- Moderator for Opioid Panel Discussion- Louisville, KY, November 2018

PHI Regional Outreach Critical Care Symposium- Sepsis in the EMS Setting-Morehead, KY, November 2018

ACEP18- Becoming Unjaded: The Opioid Epidemic- San Diego, CA, October 2018

ACEP18- Social Media: Collaboration or Litigation- San Diego, CA, October 2018

ACEP18- Mills Memorial Lecture- ACEP Past, Present, and Future- San Diego, CA, October 2018

SEC ACEP- Mythbusting in Emergency Medicine- Destin, FL, June 2018

SEC ACEP- Frontline Live: The Evolution of Medical Education- Destin, FL, June 2018

SEC ACEP- Opioid Epidemic: State of the Union- Destin, FL, June 2018

ACEP Leadership and Advocacy 2018- Advocacy Panel- Washington DC, May 2018

Tennessee ACEP- 2018 Annual Meeting- Opioid Epidemic: State of the Union-Chattanooga, TN, March 2018

NASCAR Summit 2018- AMR/NASCAR Year in Review- Concord, NC, January 2018

NASCAR Summit 2018- The Approach to the Car and Driver- Concord, NC, January 2018

KY ENA State Educational Conference- Surviving Dreamland: The Opioid Crisis, Lexington KY, August 2017

SEC ACEP- Opioids: Why That Didn't Work, Destin FL, June 2017

SEC ACEP- The Physician Pilot: Keeping the Skies Friendly, Destin FL, June 2017

Ohio ACEP Emergency Medicine Forum- Faces of Physician Leadership, Columbus OH, May 2017

11th Annual Intermountain Brain Injury Conference- Approach to the Acutely Agitated Patient, Johnson City TN, March 2017

11th Annual Intermountain Brain Injury Conference- TBI 101, Johnson City TN, March 2017

ACEP Leadership and Advocacy 2017- Where the Rubber Meets the Road: Emergency Medicine and SoMe, Washington DC, March 2017

TN ACEP Annual Meeting- Narcotics to Narcan: State of the Opioid Union

Address, Chattanooga TN, February 2017

KACEP Medical Director Conference- From IV to IO and In-Between, Louisvile KY, November 2016

ACEP16- Rapid Fire: Narcotics to Narcan, Las Vegas NV, October 2016

ACEP16- Rapid Fire: Do Your Patients Know You Care?, Las Vegas NV, October 2016

ACEP16- Feel the Burn: Preventing Burnout in EM, Las Vegas NV, October 2016

CECentral- Opioid Symposium, Narcotics to Narcan: Tackling the Opioid Epidemic, Lexington KY, October 2016

SEC ACEP- Critical Findings for the Community Doc, Destin FL, June 2016

SEC ACEP- Malpractice Minefield, Destin FL, June 2016

TN ACEP- Narcotics to Narcan, Chattanooga TN, March 2016

Can't Miss Trauma for the Community Physician, SEC ACEP, Destin FL, June 2016

NASCAR Summit- I Will Take CO for an Answer, Concord NC, January 11, 2016

SEC ACEP- Implementing Narcan, Destin FL, June 2015

SEC ACEP- Building a Disaster Plan, Destin FL, June 2015

NASCAR Summit- Metropolis in a Cornfield, Charlotte NC, January 2015

CECentral- Heroin: Old Dog with New Tricks, Lexington KT, October 2014

FACOS Annual Clinical Assembly- Building the Framework for a Disaster, Boston MA, September 2014

TN ACEP- Heroin: Old Dog with New Tricks, Chattanooga TN, March 2014

SEC ACEP- Opioid Legislation: That Just Happened, Destin FL, June 2014

SEC ACEP- Frequent Flyers: Can We Cut the Sky Miles, Destin FL, June 2014

NASCAR Summit- That Just Happened, Charlotte NC, January 2014

CECentral- The Good, Bad, and Ugly of Substance Abuse, The Frontline of Addiction and Substance Abuse, Lexington KY, August 2013

SEC ACEP- Encephalitis and Meningitis Make My Head Hurt, Destin FL, June 2013

SEC ACEP- Street Drug Abuse, Destin FL, June 2013

SEC ACEP- Opioid Crisis in the US, Destin FL, June 2013

The Faces of Substance Abuse- "KASPER Update Panel", Lexington KY, January 23, 2013

NASCAR Summit- "They Could Be Drunk...Or They Could Be Dying", Concord NC, January 8, 2013

ACEP Spokesman Network- "Prescription Drug Abuse Prevention", Multiple Presentations, 2012

KMA Annual Meeting- "HB1 Update", Louisville KY, September 2012

SEC ACEP Back to Basics- "The Weakest Link", Destin FI, June 12, 2012

SEC Hot Topics in Emergency Medicine- "Green Tobacco Sickness", Destin FL, June 2011

SEC Hot Topics in Emergency Medicine- "Scan Them Until They Glow: Risks of CT Radiation and Emergency Care", Destin FL, June 2010

AAEM National Conference Photo Contest- "Purulent Pericardial Effusion", February 2008

AAEM National Conference Open Mic Competition- "Anatomy of a Plane Crash", February 2008

Research Publications

Ryan Stanton, Jeff Schoondyke, Rebecca Copeland, "Papillary Fibroelastoma in the Left Ventricular Wall", Cardiology Review, Volume: Fall 2003,

Ryan Stanton, Ted Parks, "Bilateral Anterior Compartment Syndrome and Creatine Monohydrate Usage", Journal of Emergency Medicine, 2003

Ryan Stanton, Floranne Wilson, and Kyle Colvett, "MetastaticBasal Cell Carcinoma", Southern Medical Journal, October 2003

References

Dr. Mark Spanier, Baptist Health Lexington ED Medical Director, Central Emergency Physicians, 859-260-6180, markspanier1@gmail.com

BC Chad Traylor, Battalion Chief- Lexington Fire/EMS, 859-231-5644, traylorc@lexingtonky.gov

Dr. Chris Doty, Residency Director UK Department of Emergency Medicine, 859-323-5908, chris.doty@uky.edu