



Steering Committee Meeting

**October 6, 2023
6:00 – 7:00 pm**

**Grand Ballroom G (Marriott, Level 5)
Philadelphia, PA**



Scientific Assembly
PHILADELPHIA, PA 23

Approved January 2019

Antitrust

Reaffirmed January
2019, June 2013 and
October 2007

Revised October 2001 and
June 1996

Approved April 1994

The American College of Emergency Physicians is a national not-for-profit professional organization that exists to support quality emergency medical care and to promote the interest of emergency physicians. The College is not organized to and may not play any role in the competitive decisions of its members or their employees, nor in any way restrict competition among members or potential members. Rather it serves as a forum for a free and open discussion of diverse opinions without in any way attempting to encourage or sanction any particular business practice.

The College provides a forum for exchange of ideas in a variety of settings including its annual meeting, educational programs, committee meetings, and Board meetings. The Board of Directors of the College recognizes the possibility that the College and its activities could be viewed by some as an opportunity for anti-competitive conduct. Therefore, the Board is promulgating this policy statement to clearly and unequivocally support the policy of competition served by the antitrust laws and to communicate the College's uncompromising policy to comply strictly in all respects with those laws.

While recognizing the importance of the principle of competition served by the antitrust laws, the College also recognizes the severity of the potential penalties that might be imposed on not only the College but its members as well in the event that certain conduct is found to violate the antitrust laws. Should the College or its members be involved in any violation of federal/state antitrust laws, such violation can involve both civil as well as criminal penalties that may include imprisonment for up to 3 years as well as fines up to \$350,000 for individuals and up to \$10,000,000 for the College plus attorney fees. In addition, damage claims awarded to private parties in a civil suit are tripled for antitrust violations. Given the severity of such penalties, the Board intends to take all necessary and proper measures to ensure that violations of the antitrust laws do not occur.

In order to ensure that the College and its members comply with the antitrust laws, the following principles will be observed:

- The American College of Emergency Physicians or any committee, section, chapter, or activity of the College shall not be used for the purpose of bringing about or attempting to bring about any understanding or agreement, written or oral, formal or informal, expressed or implied, among two or more members or other competitors with regard to prices or terms and conditions of contracts for services or products. Therefore, discussions and exchanges of information about such topics will not be permitted at College meetings or other activities.
- There will be no discussions discouraging or withholding patronage or services from, or encouraging exclusive dealing with any health care provider or group of health care providers, any supplier or purchaser or group of suppliers or purchasers of health care products or services, any actual or potential competitor or group of actual potential competitors, any patients or group of patients, or any private or governmental reimbursor.
- There will be no discussions about allocating or dividing geographic or service markets, customers, or patients.
- There will be no discussions about restricting, limiting, prohibiting, or sanctioning advertising or solicitation that is not false, misleading, deceptive, or directly competitive with College products or services.
- There will be no discussions about discouraging entry into or competition in any segment of the health care market.
- There will be no discussions about whether the practices of any member, actual or potential competitor, or other person are unethical or anti-competitive, unless the discussions or complaints follow the prescribed due process provisions of the College's bylaws.
- Certain activities of the College and its members are deemed protected from antitrust laws under the First Amendment right to petition government. The antitrust exemption for these activities, referred to as the Noerr-Pennington Doctrine, protects ethical and proper actions or discussions by members designed to influence: 1) legislation at the national, state, or local level; 2) regulatory or policy-making activities (as opposed to commercial activities) of a governmental body; or 3) decisions of judicial bodies. However, the exemption does not protect actions constituting a “sham” to cover anticompetitive conduct.
- Speakers at committees, educational meetings, or other business meetings of the College shall be informed that they must comply with the College's antitrust policy in the preparation and the presentation of their remarks. Meetings will follow a written agenda approved in advance by the College or its legal counsel.
- Meetings will follow a written agenda. Minutes will be prepared after the meeting to provide a concise summary of important matters discussed and actions taken or conclusions reached.

At informal discussions at the site of any College meeting all participants are expected to observe the same standards of personal conduct as are required of the College in its compliance.

Approved April 2023

Conflict of Interest

Revised April 2023,
January 2017, June 2011,
June 2008

Reaffirmed October 2001

Revised September 1997

Originally approved
January 1996

All Key Leaders (defined below) of the American College of Emergency Physicians (ACEP) and others acting on behalf of the College have a fiduciary duty to the College, including the duties of loyalty, diligence, and confidentiality. The following groups or individuals are defined as Key Leaders:

1. Officers
2. Board of Directors
3. Past Presidents, Past Speakers, Past Chairs of the Board
4. Councillors, Alternate Councillors
5. Committee Chairs and Members
6. Section and Task Force Chairs
7. Section and Task Force Members who participate in the development of policy and resources on behalf of the College
8. Editors of ACEP-sponsored publications (e.g., *Annals of Emergency Medicine*, *JACEP Open*, *ACEP Now*, various podcasts)
9. ACEP staff leadership, including its Executive Director, Chief Operating Officer, and members of the Senior Management Team

Those in positions of responsibility must act in utmost good faith on behalf of the College. In accepting their positions, they promise to give the College the benefit of their work and best judgment. They should exercise the powers conferred solely in the interest of the College and should not use their role or position for their own personal interest or that of any other organization or entity. Even the perception of conflict can potentially compromise the confidence and trust of College members and the public in the stewardship of its leaders.

Conflicts of interest arise when participants in positions of responsibility have personal, financial, business, or professional interests or responsibilities that may interfere with their duties on behalf of the College. The immediacy and seriousness of various conflicts of interest situations may vary. Of basic importance is the degree to which the interest would tend one toward bias or pre-disposition on an issue or otherwise compromise the interests of the College.

A conditional, qualified, or potential conflict of interest can arise when the outside interest is not substantial or does not relate significantly to any contemplated action of the College. For example, a person might hold a minor financial interest in a company wishing to do business with the College. Disclosure is ordinarily sufficient to deal with this type of potential conflict of interest, provided that there is no expectation that one's duty to the College would be affected.

Direct conflicts of interest arise, for example, when an individual engages in a personal transaction with the College or holds a material interest or position of responsibility in an organization involved in a specific transaction with the College or that may have interests at variance or in competition with the College. The appropriate and necessary course of action in such cases is to disclose the conflict and recuse oneself, during the deliberations and the vote on the issue.

In rare circumstances, an individual may have such a serious, ongoing, and irreconcilable conflict, where the relationship to an outside organization so seriously impedes one's ability to carry out the fiduciary responsibility to the College, that resignation from the position with the College or the conflicting entity is appropriate.

Dealing effectively with actual, perceived, or potential conflicts of interest is a shared responsibility of the individual and the organization. The individual and organizational roles and responsibilities with regard to conflicts of interest follow.

A. General

1. All individuals who serve in positions of responsibility within the College need not only to avoid conflicts of interest, but also to avoid the appearance of a conflict of interest. This responsibility pertains to Key Leaders and other elected or appointed leaders, and staff. Decisions on behalf of the College must be based solely on the interest of the College and its membership. Decisions must not be influenced by desire for personal profit, loyalty to other organizations, or other extraneous considerations.
2. Key Leaders shall annually sign a statement acknowledging their fiduciary responsibility to the College and agree to avoid conflicts of interest or the appearance of conflicts of interest. The issue of conflicts of interest with regard to the remainder of the staff shall be the responsibility of the Executive Director. The issue of adherence to this policy regarding conflicts of interest of Section and Task Force Members who participate in the development of policy and resources on behalf of the College shall be the responsibility of the Section and Task Force Chairs.
3. Key Leaders shall annually complete a form designated by the Board of Directors that includes the disclosure of pertinent financial and career-related information and shall update that information as necessary to continuously keep it current and active.
4. Key Leaders shall annually sign a statement acknowledging that they may have access to confidential information and agree to protect the confidentiality of that information.
5. Officers, Board Members, the Executive Director, Chief Operating Officer, and members of the Senior Management Team shall annually agree to clarify their position when speaking on their own behalf as opposed to speaking on behalf of the College, or as an Officer or member of the Board of Directors or members of the Senior Management Team.
6. Officers, Board Members, the Executive Director, the General Counsel, or their designees will periodically review the conflict of interest disclosure statements submitted to the College to be aware of potential conflicts that may arise with others.
7. When an Officer, Board Member, the Executive Director, or General Counsel believes that an individual has a conflict of interest that has not been properly recognized or resolved, the Officer, Board Member, Executive Director, or General Counsel will raise that issue and seek proper resolution.

8. Any member may raise the issue of conflict of interest by bringing it to the attention of the Board of Directors through the President or the Executive Director. The final resolution of any conflict of interest shall rest with the Board of Directors.

B. Disclosure Form

1. Key Leaders shall acknowledge that their service to the College requires annual completion of a Conflict of Interest Disclosure Form related to certain affiliations and interests that discloses the following:
 - a. Name of employer. Positions of employment, including the nature of the business of the employer, the position held, and a description of the daily employment.
 - b. Positions of leadership in other organizations, chapters, commissions, groups, coalitions, agencies, and/or entities (eg, Board of Director positions, committees, and/or spokesperson roles). Include a brief description of the nature and purposes of the organization or entity.
 - c. Family members who are non-physicians, currently or formerly employed in an emergency department or urgent care center, 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, sibling-in-law, child-in-law, parent-in-law, stepparent, stepchild, guardian, ward, or a member of the individual's household.
 - d. Outside relationship with any person(s) or entity from which the College obtains goods and services, or which provides services that compete with the College 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; c) any gifts, favors, gratuities, lodging, dining, or entertainment valued at more than \$100.
 - e. Financial interests or positions of responsibility in any entity providing goods or services in support of the practice of emergency medicine (eg, physician practice management company, billing company, physician placement company, book publisher, medical supply company, malpractice insurance company), other than owning less than a 1% interest in a publicly traded company.
 - f. Outside relationship with any health plan, health insurance company, delegated payer, health insurance company administrative service organization, or health insurance company related philanthropic organization or entity where such relationship involves: a) holding any position of responsibility; b) an equity interest (other than a less than 1% interest in a publicly traded company); c) any stipend, contribution, gift, gratuities, lodging, dining or entertainment valued at more than \$100.
 - g. Industry-sponsored research support within the preceding twenty-four (24) months.
 - h. Speaking fees from non-academic entities during the preceding twenty-four (24) months.
 - i. The receipt of any unusual gifts or favors from an outside entity or person, or the expectation that a future gift or favor will be received in return for a specific action, position, or viewpoint taken, in regard to the College or its products.
 - j. Any other interest the Key Leader believes may create a conflict with the fiduciary duty to the membership of the College or that may create the appearance of a conflict of interest.
2. Key Leaders shall acknowledge and agree to the following on the Conflict of Interest Disclosure Form:
 - a. Fiduciary responsibility to the College to avoid conflict of interest or the appearance of conflict of interest.
 - b. Access to confidential information and to protect the confidentiality of that information.
 - c. Clarify position when speaking on own behalf as opposed to speaking on behalf of the College.
 - d. To abide by the terms and requirements of the ACEP Conflict of Interest Policy.
 - e. Recognize the obligation to notify the appropriate individual as required by the Conflict of Interest Policy should a possible conflict of interest arise in responsibilities to the College. To

abstain from participation in any business of the College 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 that would be reasonably viewed as requiring disclosure, there is a continuing obligation to file an amended Conflict of Interest Disclosure Form.

3. Except as provided in Section 5 below, completed disclosure forms shall be submitted to the President and the Executive Director, or other designee(s), no later than thirty (30) days prior to commencement of the annual meeting of ACEP's Council. For Officers and Board Members newly elected during a meeting of ACEP's Council, the forms shall be submitted no later than thirty (30) days following their election if they were not previously submitted. Any Key Leader who has not submitted a completed disclosure form by the applicable deadline will be ineligible to participate in those specific College activities for which they have been appointed or elected until their completed disclosure forms have been received and reviewed as set forth in this policy.
4. Information disclosed by Officers, Board Members, and the Executive Director pursuant to this policy will be placed in the General Reference Notebook available at each Board meeting for review by Officers and Board Members. Committee, Section, and Task Force Chairs will have access to the disclosure forms of the members of the entity they chair. In addition, any College member may request a copy of a Key Leader's disclosure form upon written request to the ACEP President.
5. Completed disclosure forms required from Section and Task Force Members will be submitted to the relevant Section or Task Force staff liaison, or other designee(s), within thirty (30) days of appointment or assignment.
6. The College may provide to its members and the public the disclosure forms of its Key Leaders and anyone who speaks at the Council meeting.

C. Additional Rules of Conduct

1. Prior to participating in any deliberation or vote on an issue in which they may have a conflict, Key Leaders shall disclose the existence of any actual or possible interest or concern of:
 - a. The individual;
 - b. A member of that individual's immediate family; or
 - c. Any party, group, or organization to which the individual has allegiance that can cause the College to be legally or otherwise vulnerable to criticism, embarrassment, or litigation.
2. After disclosure of the interest or concern that could result in a conflict of interest as defined in this policy and all material facts, the individual shall leave the Board, Committee, Section, or Task Force meeting while the determination of a conflict of interest is discussed and voted upon. The remaining Board, Committee, Section, or Task Force members shall decide by majority vote if a conflict of interest exists. If a conflict of interest is determined to exist, the individual having the conflict shall retire from the room in which the Board, Committee, Section, or Task Force is meeting and shall not participate in the deliberation or decision regarding the matter under consideration. However, that individual shall provide the Board, Committee, Section, or Task Force with any and all relevant information requested.
3. The minutes of the Board, Committee, Section, or Task Force meeting shall contain:
 - a. The name of the individual who disclosed or otherwise was found to have an interest or concern in connection with an actual or possible conflict of interest, the nature of the interest, any action taken to determine whether a conflict of interest was present, and the Board's, Committee's, Section's, or Task Force's decision as to whether a conflict of interest existed;
 - b. The extent of such individual's participation in the relevant Board, Committee, Section, or Task Force meeting on matters related to the possible conflict of interest; and
 - c. The names of the individuals who were present for discussion and votes relating to the action, policy, or arrangement in question, the content of the discussion including alternatives to the proposed action, policy, or arrangement, and a record of any votes taken in connection therewith.

Council Steering Committee Meeting

Philadelphia Marriott
Grand Ballroom G (Level 5)
Friday, October 6, 2023
6:00 pm – 7:00 pm

AGENDA

- | | | |
|------|--|----------------|
| I. | Call to Order | Dr. Gray-Eurom |
| | A. Conflict of Interest Disclosure | |
| II. | Introductions | Dr. Gray-Eurom |
| | A. Steering Committee Members | |
| | B. Executive Director and Council Secretary – Sue Sedory, MA, CAE | |
| | C. Parliamentarian – Jim Slaughter, JD | |
| | D. Board Members | |
| | E. Candidates | |
| | <u>President-Elect</u> | |
| | Jeffrey M. Goodloe, MD, FACEP | |
| | Alison J. Haddock, MD, FACEP | |
| | Ryan A. Stanton, MD, FACEP | |
| | <u>Speaker</u> | |
| | Melissa W. Costello, MD, FACEP (AL) – unopposed | |
| | <u>Vice Speaker</u> | |
| | Kurtis A. Mayz, JD, MD, MBA, FACEP (IL) | |
| | Michael J. McCrea, MD, FACEP (OH) | |
| | Larisa M. Traill, MD, FACEP (MI) | |
| | <u>Board of Directors</u> | |
| | William B. Felegi, DO, FACEP (NJ) | |
| | Robert J. Hancock, DO, FACEP (TX) | |
| | Chadd K. Kraus, DO, DrPH, FACEP (PA) | |
| | Abhi Mehrotra, MD, MBA, FACEP (NC) | |
| | Henry Z. Pitzele, MD, FACEP (IL) | |
| | James L. Shoemaker, Jr., MD, FACEP (incumbent – IN) | |
| III. | Acceptance of Minutes | Dr. Gray-Eurom |
| | A. Steering Committee, April 30, 2023 | |
| IV. | Council Officer Reports | |
| | A. Speaker | Dr. Gray-Eurom |
| | B. Vice Speaker | Dr. Costello |
| V. | New Business | Dr. Gray-Eurom |
| | A. Review and Discussion of Late Resolutions | |
| | B. Board Position and Vote on Amended Resolution 74(21) Regulation by State Medical Boards of All Who Engage in Practice of Medicine (second resolved) | |
| | C. Brief Review of Council Meeting Agenda | |
| VI. | Adjourn | |

2023 Council Steering Committee

Updated February 2023



**Kelly Gray-Eurom, MD, MMM,
FACEP - Speaker**

Jacksonville, FL



**Melissa W. Costello, MD, FACEP - Vice
Speaker**

Mobile, AL



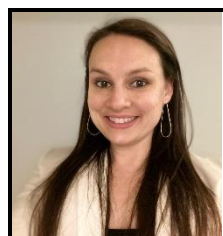
Erik Blutinger, MD, MSc, FACEP

New York, NY



Sara Ann Brown, MD, FACEP

Monroeville, IN



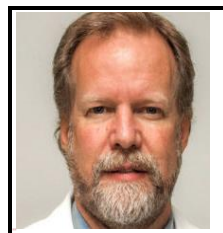
Emily Fitz, MD, FACEP

Zionsville, IN



Vik Gulati, MD, FACEP

San Diego, CA



Carlton E. Heine, MD, PhD, FACEP

Spokane, WA



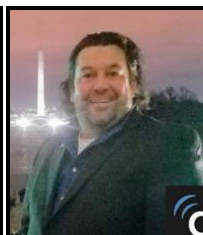
C. Ryan Keay, MD, FACEP

Lynnwood, WA



Alexander J. Kirk, MD, FACEP

Carrollton, TX



Phillip Luke LeBas, MD, FACEP

New Orleans, LA



Marc Mendelsohn, MD, FACEP

St. Louis, MO



Diana Nordlund, DO, JD, FACEP

Caledonia, MI

2023 Council Steering Committee
Picture Roster (continued)



Bing Pao, MD, MD, FACEP

Rancho Santa Fe, CA



Christopher S. Sampson, MD, FACEP

Columbia, MO



Matthew J. Sanders, DO, FACEP

Springboro, OH



Gary C. Starr, MD, MBA, FACEP

Montreal, Quebec CA



Thomas J. Sugarman, MD, FACEP

Evanston, IL



Amanda Irish, MD
(EMRA REP to Steering Committee)

Columbia, SC



ADVANCING EMERGENCY CARE

Steering Committee Conference Call April 30, 2023

Minutes

Speaker Kelly Gray-Eurom, MD, FACEP, called to order a conference call meeting of the Council Steering Committee of the American College of Emergency Physicians at 8:09 Eastern time on Sunday, April 30, 2023.

Steering Committee members present for all or portions of the meeting were: Eric Blutinger, MD, MSc, FACEP; Melissa Costello, MD, FACEP, vice speaker; Emily Fitz, MD, FACEP; Kelly Gray-Eurom, MD, FACEP, speaker; Vik Gulati, MD, FACEP; Carlton Heine, MD, PhD, FACEP; Amanda Irish, MD; C. Ryan Keay, MD, FACEP; Alexander Kirk, MD, FACEP; Phillip Luke LeBas, MD, FACEP; Marc Mendelsohn, MD, FACEP; Diana Nordlund, DO, JD, FACEP; Bing Pao, MD, FACEP; Christopher Sampson, MD, FACEP; Matthew Sanders, DO, FACEP; Gary C. Starr, MD, FACEP; and Thomas Sugarman, MD, FACEP.

Other members and guests present for all or portions of the meeting were: Stephen H. Anderson, MD, FACEP; L. Anthony Cirillo, MD, FACEP; J. T. Finnell, MD, FACEP, vice president; Deborah Fletcher, MD, FACEP; Jeffrey Goodloe, MD, FACEP; Alison Haddock, MD, FACEP; Sanford Herman, MD, FACEP; Christopher Kang, MD, FACEP, president; Gabor Kelen, MD, FACEP; Rami Khoury, MD, FACEP; Heidi C. Knowles, MD, FACEP; Chadd Kraus, DO, FACEP; Aaron Kuzel, DO; Michael McCrea, MD, FACEP; Harry Severance, MD, FACEP; James Shoemaker, MD, FACEP, secretary-treasurer; and Aisha Terry, MD, FACEP, president-elect.

Staff present for all or portions of the meeting were: Adriana Alvarez; Mary Ellen Fletcher, CPC, CEDC, CAE; Robert Heard, MBA, CAE; Sonja Montgomery, CAE; Leslie Moore, JD; Jennifer Moulton; Sandra Schneider, MD, FACEP; Susan Sedory, MA, CAE; Sam Shahid, MBBS, MPH; and Jessica Vaughn.

Minutes

The minutes of the January 31, 2023, Steering Committee meeting were approved as written.

Officer and Staff Reports

Speaker

Dr. Gray-Eurom welcomed everyone and thanked them for their participation and commitment to the College. She then announced the 2023 Council awards recipients:

Council Meritorious Service Award – Gary R. Katz, MD, MBA, FACEP

Council Horizon Award – George RJ Sontag, MD

Council Teamwork Award – Pain Management & Addiction Medicine Section

Council Champion in Diversity & Inclusion Award – Adetolu Odufuye, MD, FACEP (posthumously)

Council Curmudgeon Award – John D. Bibb, MD, FACEP

Dr. Gray-Eurom announced the 2023 candidates:

President-Elect: Jeffrey M. Goodloe MD, FACEP
Alison J. Haddock, MD, FACEP
Ryan A. Stanton, MD, FACEP

Speaker Melissa W. Costello, MD, FACEP (unopposed)

Vice Speaker Kurtis A. Mayz, JD, MD, MBA, FACEP
Michael J. McCrea, MD, FACEP
Larisa M. Traill, MD, FACEP

Board of Directors: William B. Felegi, DO, FACEP
Robert J. Hancock, MD, FACEP
Chadd K. Kraus, DO, DrPH, CPE, FACEP
Abhi Mehrotra, MD, MBA, FACEP
Henry Z. Pitzele, MD, FACEP
James L. Shoemaker, MD, FACEP

Dr. Gray-Eurom reminded the Steering Committee of the June 6, 2023, Resolution Preparation Session that will be held virtually and the various meetings that will be held on Friday, October 6, 2023, Philadelphia.

Vice Speaker

Dr. Costello reported on her service on the Finance Committee as the speaker's designee.

President

Dr. Kang expressed his appreciation to the Steering Committee for their leadership. He discussed several challenges ACEP is facing and the priorities he is addressing for the remainder of his year as president. He announced that a Practice Essentials course will debut at ACEP23.

President-Elect

Dr. Terry discussed the priorities she will address during her year as president. She reported on recent meetings she has attended and building relationships with other organizations.

Executive Director

Ms. Sedory highlighted key successes of the College and the challenges ahead for ACEP in addressing member needs. Staff are working to further refine personalization of membership value for members and adapting education needs and delivery methods. She urged everyone to reinforce with colleagues everything that ACEP does for all emergency physicians.

Amended Resolution 25(22) Advocacy for Safe Access to Full Spectrum Pregnancy Related Health Care

Dr. Gray-Eurom reminded the Steering Committee of their discussion during the January 31, 2023, Steering Committee regarding the Board's deferred action on Amended Resolution 25(22) Advocacy for Safe Access to Full Spectrum Pregnancy Related Health Care. The Board requested the Emergency Medicine Reproductive Health & Patient Safety Task Force to review the third resolved, determine if any revisions were needed, and provide a recommendation to the Board regarding any suggested revisions that do not alter the intent of the resolution. The Steering Committee reviewed the proposed revisions at the January 31, 2023, meeting and agreed that the recommended revisions were consistent with the Council's intent. The Board adopted Amended Resolution 25(22) Advocacy for Safe Access to Full Spectrum Pregnancy Related Health Care with additional revisions as recommended by the Emergency Medicine Reproductive Health & Patient Safety Task Force on February 2, 2023:

RESOLVED, That ACEP affirm that: 1) abortion is a medical procedure and should be performed only by a duly licensed physician, surgeon, or other medical professional in conformance with standards of good medical practice and the Medical Practice Act of that individual's state; and 2) no physician or other professional personnel shall be required to perform an act violative of good medical judgment and this protection shall not be construed to remove the ethical obligation for referral for any medically indicated procedure; and be it further

RESOLVED, That ACEP support the position that the early termination of pregnancy (publicly referred to as "abortion") is a medical procedure, and as such, involves shared decision making between patients and their physician regarding: 1) discussion of reproductive health care; 2) performance of indicated clinical assessments; 3) evaluation of the viability of pregnancy and safety of the pregnant person; 4) availability of appropriate resources to perform indicated procedure(s); and 5) is to be made only by health care professionals with their patients; and be it further

RESOLVED, That ACEP oppose ~~the criminalization or mandatory reporting of reproductive health-related patient concerns~~ statutory provision of criminal penalties for any medically appropriate care provided in the emergency department and additionally oppose mandatory reporting with the intent (explicit or implicit) to prosecute patients or their health care professionals, which includes, but is not limited to, care for any pregnancy, pregnancy-related complications, or pregnancy loss; and be it further

RESOLVED, That ACEP specifically oppose the ~~criminalization~~, imposition of penalties, or other retaliatory efforts against patients, patient advocates, physicians, health care workers, and health systems for receiving, assisting, or referring patients within a state or across state lines to receive reproductive health services or medications for contraception and abortion, and will further advocate for legal protection of said individuals; and be it further [this was previously the last resolved]

RESOLVED, That ACEP support an individual's ability to access the full spectrum of evidence-based pre-pregnancy, prenatal, peripartum, and postpartum physical and mental health care, and supports the adequate payment from all payers for said care; ~~and be it further~~.

~~RESOLVED, That ACEP oppose the criminalization, imposition of penalties, or other retaliatory efforts against patients, patient advocates, physicians, health care workers, and health systems for receiving, assisting, or referring patients within a state or across state lines to receive reproductive health services or medications for contraception and abortion, and will further advocate for legal protection of said individuals.~~ [moved to 4th resolved]

It was moved THAT THE STEERING COMMITTEE ACCEPT THE AMENDED LANGUAGE OF AMENDED RESOLUTION 25(22) ADVOCACY FOR SAFE ACCESS TO FULL SPECTRUM PREGNANCY RELATED HEALTH CARE AS ADOPTED BY THE BOARD OF DIRECTORS ON FEBRUARY 2, 2023. The motion was adopted.

There were concerns expressed about the third resolved opposing mandatory reporting as it relates to other state laws pertaining to mandatory reporting of other things such as child abuse.

Annual Meeting Subcommittee

Dr. Keay presented the subcommittee's report on their assigned objectives.

The subcommittee reviewed the format and topics from previous Town Hall meetings and provided suggestions for the 2023 Town Hall meeting topic. The subcommittee supports the current format of the Town Hall meeting that includes a pro/con debate of various aspects of an issue by high-level speakers/content experts followed by a period of Q & A. The subcommittee suggested the following topics for consideration:

The Future of EM in a broken healthcare system

- What happened in the match?
- Scope of practice? Will AI/technology replace medicine?

Workforce/environment

- How to create a palatable work environment.
- How do we continue to love the work we do?
- Independent Dispute Resolution/No Surprises Act/Billing Changes
- Providing mental health for us and them in a world with no services.
- Pediatric access – what's the future for our kids?

The Council officers will make the final determination about the format, topic, and speakers for this year's Town Hall meeting this summer.

The subcommittee reviewed the implementation actions on 2020-2022 resolutions and concurred that the actions taken are consistent with the Council's expectations. Updates to the implementation action on the resolutions can be accessed on the ACEP website by all members. <https://www.acep.org/what-we-believe/actions-on-council-resolutions/>

The subcommittee provided suggestions for questions that should be considered to use as survey questions during the Council meeting:

- Tie questions to the Town Hall topic.
- Do you use AI systems in the ED?
- Where do you practice clinical emergency medicine? (List various settings instead of asking how many clinical hours do you work. For example, urgent care, telehealth, EMS, addiction medicine, etc.)
- What makes you want to continue practicing emergency medicine? (clinical, camaraderie, non-clinical, patients, population health focus, financial, etc.)
- Availability of pediatrics or other specialty care.
- What do you think is the impact of the 2023 Match on emergency medicine? (positive, negative, neutral)

The Council officers will determine the final survey questions this summer.

The subcommittee reviewed the draft 2023 Council meeting agenda and supported moving the executive director's report to the first day of the Council meeting before recessing to the Reference Committee hearings and moving the EMF and NEMPAC reports to the second day morning before discussion of the Reference Committee reports. It was noted that video reports for EMF and NEMPAC could be played as the Council meeting goes into a break and could be played on demand through the Council meeting website.

Bylaws & Council Standing Rules Subcommittee

Dr. Heine reported that the subcommittee was scheduled to hold a virtual meeting on April 4, 2023, to discuss their assigned objectives. The meeting was cancelled because there were no revisions to the Council Standing Rules identified by the Steering Committee or subcommittee members. Additionally, there were no Bylaws or Council Standing Rules resolutions that had been submitted for the 2023 Council meeting (at that time) for the subcommittee to review.

Candidate Forum Subcommittee

Dr. Gray-Eurom presented the subcommittee's report on their assigned objectives. The majority of the subcommittee's objectives will be completed this summer and during the 2023 Council meeting. The subcommittee will meet immediately following this Steering Committee meeting to finalize the candidate written questions and to review the assignments for moderators, coordinators, and door monitors. The subcommittee will meet 4:30 – 6:00 pm in Philadelphia on Friday October 6, 2023, to review the format for the Candidate Forum, finalize questions for the Candidate Forum, and meet with the candidates.

Council Horizon Award

Dr. Gray-Eurom led a discussion regarding the eligibility criteria for the Council Horizon Award and reviewed the history of the award. There was consensus to retain the current eligibility criteria of the first five years of service to the Council, consider service as a councillor only (i.e., do not include alternate councillor service), and do not include any gap years in Council service when determining the first five years. For example, an individual served as a councillor 2017-20, did not serve in 2021, and served again in 2022. The time is calculated based only on the years actually served. The eligibility criteria will be updated to reflect the Steering Committee's discussion and will be used by the 2024 Council Awards Committee to determine the 2024 award recipient.

Board Action on Three 2023 Resolutions

Dr. Gray-Eurom informed the Steering Committee about three resolutions that the Board of Directors will discuss at their meeting later today:

1. Substitute Resolution 61(21) Advocating for a Required Emergency Medicine Experience at All U.S. Medical Schools – The Academic Affairs Committee revised the "Guidelines for Undergraduate Education in Emergency Medicine" policy statement to address the resolution.



Late Resolution

RESOLUTION: 56(23)

SUBMITTED BY: Indiana Chapter

SUBJECT: In Memory of William A. Nice, MD

1 WHEREAS, Emergency medicine lost a beloved leader of our specialty in the passing of William A. Nice,
2 MD, who died March 4, 2023; and
3

4 WHEREAS, Dr. Nice earned his medical degree from Indiana University School of Medicine in 1968 and
5 was vice-president of the Christian Medical Society chapter and he then completed a transitional year at South Bend
6 Memorial Hospital; and
7

8 WHEREAS, After completing his transitional year, Dr. Nice went to Rhodesia (now Zimbabwe) and was the
9 only physician at Chidamoyo Christian Hospital in the bush of the north part of the country for three years; and
10

11 WHEREAS, Dr. Nice returned to the U.S. and settled in Bloomington, Indiana, in early 1973 and began his
12 practice of emergency medicine more than six years before emergency medicine was a specialty; and
13

14 WHEREAS, Dr. Nice was a founding member of Unity Physician Group and the Director of the Emergency
15 Department at the Bloomington Hospital for over 25 years, as well as being on staff at several other Indiana hospitals
16 and immediate care centers; and
17

18 WHEREAS, Dr. Nice was one of the first emergency physicians certified by the American Board of
19 Emergency Medicine and soon became an oral examiner for the Board; and
20

21 WHEREAS, Dr. Nice was an early member of the American College of Emergency Physicians and was
22 President of the Indiana Chapter in the mid-1970s and he was instrumental in hiring the first two executive directors
23 of the Indiana Chapter; and
24

25 WHEREAS, Dr. Nice was an active councillor from Indiana for many years in the 1970s and 1980s and
26 served on the Tellers, Credentials, & Elections Committee for several of those years; and
27

28 WHEREAS, Dr. Nice is a legacy physician in Indiana and on behalf of emergency medicine at the national
29 level; therefore be it
30

31 RESOLVED, That the American College of Emergency Physicians recognizes the outstanding contributions
32 of William A. Nice, MD, to emergency medicine and extends the College's condolences to his family and his life-
33 long medical group partners.



Late Resolution

RESOLUTION: 57(23)

SUBMITTED BY: Angela Cornelius MD, MA, FACEP
D. Mark Courtney, MD, FACEP
Angela F. Gardner, MD, FACEP
Jeffrey M. Goodloe MD, FACEP
Andrew Hogan, MD
S. Marshal Isaacs, MD, FACEP
Jeff Jarvis MD, MS, FACEP
Jeffery C. Metzger, MD, MBA, FACEP
Brian L. Miller MD, FACEP
Brandon Morshedi, MD, DPT, FACEP
Kathy Rinnert, MD, MPH, FACEP
John J. Rogers MD, FACEP
Gilberto A. Salazar, MD, FACEP
Robert E. Suter, DO, MHA, FACEP
Raymond E. Swienton, MD, FACEP
Dustin Williams, MD, FACEP
Georgia College of Emergency Physicians
Texas College of Emergency Physicians

SUBJECT: Commendation for Raymond L. Fowler, MD, FACEP, FAEMS

1 WHEREAS, Raymond Logan Fowler, MD, FACEP, FAEMS, has practiced for a half century as an
2 enthusiastic and beloved frontline emergency physician and is a talented educator of paramedics, nurses, medical
3 students, and residents; and
4

5 WHEREAS, For the last two decades, Dr. Fowler has served as a highly published Professor of Emergency
6 Medicine and Chief of the Emergency Medical Services/Disaster/Global Health Division at UT Southwestern Medical
7 Center, and a brilliant attending in the nation's busiest emergency department, Parkland Hospital in Dallas, TX; and
8

9 WHEREAS, Dr. Fowler served as the president of the Georgia Chapter of ACEP and president of the
10 National Association of EMS Physicians and he has received numerous awards including ACEP's Award for
11 Outstanding Contribution in EMS in 2012; and
12

13 WHEREAS, Dr. Fowler is the author of numerous articles and textbooks including serving as one of the
14 Editors in Chief for the text *Emergency Medical Services: Clinical Practice and Systems Oversight*; and
15

16 WHEREAS, Dr. Fowler served as the inaugural Program Director for the ACEP-affiliated International
17 Trauma Life Support Course; therefore be it
18

19 RESOLVED, That the American College of Emergency Physicians commends Raymond Logan Fowler, MD,
20 FACEP, FAEMS, for his outstanding service and commitment to the College, the specialty of emergency medicine,
21 the subspecialty of EMS medicine, and his patients.



Late Resolution

RESOLUTION: 58(23)

SUBMITTED BY: New York Chapter

SUBJECT: In Memory of Bradley Middleton, MD

1 WHEREAS, The specialty of emergency medicine lost a beloved colleague who was just starting a promising career
2 and was entering a post-graduate ultrasound fellowship when Bradley Middleton, MD, passed away on June 26, 2023 at the
3 age of 34; and
4

5 WHEREAS, Dr. Middleton completed his medical school training at SUNY Upstate and his residency training in
6 emergency medicine at the same institution; and
7

8 WHEREAS, Dr. Middleton was one of the kindest and most compassionate physicians with an entire career ahead of
9 him; and
10

11 WHEREAS, Dr. Middleton was a highly sought after educator, clinician, emergency medicine team member,
12 husband, father, and a member of the extended emergency medicine family; therefore be it
13

14 RESOLVED, That the American College of Emergency Physicians cherishes the memory of Bradley Middleton,
15 MD, whose short career touched many lives; and be it further
16

17 RESOLVED, That the American College of Emergency Physicians extends to his wife Liz, their daughters Penelope
18 (3) and Mae (2), and son Vander (2 months), as well as the extended Middleton and West families, gratitude for his
19 tremendous service to emergency medicine.



Late Resolution

RESOLUTION: __ (23)

SUBMITTED BY: California Chapter
Florida College of Emergency Physicians
Illinois College of Emergency Physicians
Massachusetts College of Emergency Physicians
New York Chapter
North Carolina College of Emergency Physicians
Ohio Chapter
Pennsylvania College of Emergency Physicians
Texas College of Emergency Physicians

SUBJECT: ACEP Financial Decision Transparency

1 WHEREAS, ACEP has recently decided without input or discussion from chapters to pass along credit card
2 processing fees to the chapters; and
3

4 WHEREAS, ACEP chapters and sections are the direct member facing portions of the organization; and
5

6 WHEREAS, These additional fees being passed on after budget considerations were made by chapters places
7 financial strain on chapters; and
8

9 WHEREAS, Passing on credit card fees will also affect chapter political action committees (PACs) that focus
10 on the local issues affecting members; and
11

12 WHEREAS, Members are not made aware of how fees are passed on to chapters and sections, or the portion
13 of section memberships dues that go directly to the sections; therefore be it
14

15 RESOLVED, That ACEP suspend passing on credit processing fees pending an open comment period from
16 member chapters; and be it further
17

18 RESOLVED, That ACEP provide a substantial notice period to chapters and/or sections before passing on
19 costs to allow for budgeting; and be it further
20

21 RESOLVED, That ACEP allow for transparency to the membership on fees and how dues are utilized for
22 chapters and sections by making this information available to members and reported by the treasurer to the Council.



Late Resolution

RESOLUTION: __ (23)

SUBMITTED BY: California Chapter
Florida College of Emergency Physicians
Illinois College of Emergency Physicians
Massachusetts College of Emergency Physicians
Michigan College of Emergency Physicians
New York Chapter
North Carolina College of Emergency Physicians
Ohio Chapter
Pennsylvania College of Emergency Physicians
Texas College of Emergency Physicians

SUBJECT: Cooperation Between National ACEP and State Chapters

WHEREAS, ACEP and the state chapters share membership and must work together to increase membership;
and

WHEREAS, Decreases in membership impact both ACEP and the state chapters including the resultant
financial strain; and

WHEREAS, The ACEP Board recently voted to approve transferring the credit card fees paid for membership
dues back to the state chapters; and

WHEREAS, The State chapters were recently informed of this decision and were not involved in the
discussions regarding this change or its implementation; and

WHEREAS, The state chapters have different fiscal calendars and vary on annual budget completion making
this decision difficult to implement for some chapters; and

WHEREAS, Many states allow members to voluntarily pay the credit card fees for membership and this may
help to decrease the fiscal impact for state chapters; and

WHEREAS, ACEP has the resources to determine which states may pass this cost on to members and can
revise the membership payment process to allow members to choose to pay these fees and if not, the fees can be
passed on to state chapters; therefore be it

RESOLVED, That ACEP staff revise the membership payment process to allow members to voluntarily pay
for any credit card fees that are permitted to be passed on to the member and then require each state chapter to pay for
any fees not paid; and be it further

RESOLVED, That the ACEP Board of Directors and ACEP staff include the chapters or representatives of
the chapters in discussions that will directly impact the finances of the chapters and strive to implement decisions in a
timely way to allow chapters to budget for those changes; and be it further

RESOLVED, That ACEP notify state chapters at least 12 months prior to the start of ACEP's fiscal year of
any financial changes that will impact state chapters.

Memorandum

To: Council Steering Committee
2023 Council

From: Kelly Gray-Eurom, MD, MMM, FACEP
Council Speaker

Melissa W. Costello, MD, FACEP
Council Vice Speaker

Date: September 1, 2023

Subj: Board Position and Vote on Amended Resolution 74(21) Regulation by State Medical Boards of All Who Engage in Practice of Medicine (*second resolved*)

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Gabor D. Kelen, MD, FACEP

Rami R. Khoury, MD, FACEP

Heidi C. Knowles, MD, FACEP

Kristin B. McCabe-Kline, MD, FACEP

Ryan A. Stanton, MD, FACEP

Arvind Venkat, MD, FACEP

COUNCIL OFFICERS

Kelly Gray-Eurom, MD, MMM, FACEP
Speaker

Melissa W. Costello, MD, FACEP
Vice Speaker

EXECUTIVE DIRECTOR

Susan E. Sedory, MA, CAE

The 2021 Council and the Board of Directors adopted Amended Resolution 74(21) Regulation by State Medical Boards of All Who Engage in Practice of Medicine:

RESOLVED, That ACEP support that anyone, physicians or non-physician practitioners, who engage in the practice of medicine be regulated by the respective state medical board of their respective states; and be it further

RESOLVED, That ACEP work with the AMA and submit a resolution to their house of delegates to create a universal definition of the practice of medicine to include the ordering of diagnostic tests, diagnosing clinical condition/disease, prescribing of medications, and/or ordering of treatments on human beings.

The first resolved was assigned to the State Legislative/Regulatory Committee (SLRC) to develop a policy statement. The Board adopted the policy statement “State Board of Medicine Regulation of Non-Physician Practitioners Practicing Medicine” on April 30, 2023.

The second resolved was assigned to the AMA Section Council on Emergency Medicine. The AMA Section Council on Emergency Medicine discussed the second resolved extensively and was concerned that, contrary to the seeming intent of the resolution, a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable. If defined too narrowly, it leaves an opening for nurse practitioners to further expand their scope of practice and if defined too broadly it could remove needed functions provided by nurse practitioners and potentially nurses as well. An overly broad definition could also introduce new complications wherein anyone offering friendly advice to someone could be construed as providing medical advice and therefore subject them to liability concerns.

Another challenge is if a universal definition is offered by emergency medicine to the AMA House of Delegates (HoD), primary care and other specialties in attendance would then propose alterations or alternative definitions more suited to their own members. This could pit emergency medicine against other specialties within the house of medicine with no guarantee that our definition would prevail, and thereby introduce risk that whatever consensus definition ultimately emerged from the HoD could be much more problematic for emergency medicine (especially given its unique nature) than any perceived issues posed by the current lack of a definition.

The Board of Directors approved the following recommendations on April 30, 2023:

1. Rescind the motion approved at the October 28, 2021, meeting to adopt the second resolved of Amended Resolution 74(21) “Regulation by State Medical Boards of All Who Engage in Practice of Medicine.
2. Overrule the second resolved of Amended Resolution 74(21) Regulation by State Medical Boards of All Who Engage in Practice of Medicine.

The Board also adopted a motion “that ACEP work with the American Medical Association and other stakeholders to support that anyone, physicians or non-physician practitioners, who engage in the practice of medicine be regulated by the respective state medical board of their respective states.”

The Steering Committee was informed of the recommendations to the Board at their April 30, 2023, meeting. A message regarding the Board’s decision was posted on the Council engaged on May 30, 2023.

The ACEP Bylaws, Article VIII – Council, Section 8 – Board of Directors Action on Resolutions, paragraphs one and two, state:

The Board of Directors shall act on all resolutions adopted by the Council, unless otherwise specified in these Bylaws, no later than the second Board meeting following the annual meeting and shall address all other matters referred to the Board within such time and manner as the Council may determine.

The Board of Directors shall take one of the following actions regarding a non-Bylaws resolution adopted by the Council:

1. Implement the resolution as adopted by the Council.
2. Overrule the resolution by a three-fourths vote. The vote and position of each Board member shall be reported at the next meetings of the Steering Committee and the Council.
3. Amend the resolution in a way that does not change the basic intent of the Council. At its next meeting, the Steering Committee must either accept or reject the amendment. If accepted, the amended resolution shall be implemented without further action by the Council. If the Steering Committee rejects the amendment, the Board at its next meeting shall implement the resolution as adopted by the Council, propose a mutually acceptable amendment, or overrule the resolution.

Board of Directors Vote and Position

L. Anthony Cirillo, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine with their report of conversations that did occur with other leaders within the AMA. In addition, there were specific concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

J.T. Finnell, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine and the concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

Jeff Goodloe, MD, FACEP

I voted to overrule the second resolved based on the recommendation of ACEP's AMA Section Council on Emergency Medicine (represented by Dr. Stephen Epstein) with specified concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

Alison Haddock, MD, FACEP

Abstention – Dr. Haddock was temporarily out of the room when the vote was taken.

Christopher Kang, MD, FACEP

I voted to overrule the second resolved of Council Resolution 74(21) Regulation by State Medical Boards of All Who Engage in Practice of Medicine based on the recommendation of the AMA Section Council on Emergency Medicine and concerns regarding the feasibility, accuracy, and acceptance of a universal definition of the practice of medicine and its applicability to the current and evolving scope of practice of non-physician healthcare professions, including roles, education, licensure, credentialing, certification, and regulation at the hospital, state, and federal levels.

Gabe Kelen, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine and the concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

Rami Khoury, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine after a very lengthy discussion. Concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable which I believe to be true.

Heidi Knowles, MD, FACEP

I voted to overrule the second resolved based on the wisdom and recommendation of the AMA Section Council on Emergency Medicine and the concerns for unintended consequences that a universal definition of the practice of medicine could result in, including negatively affecting the scope of practice of APPs as well as nurses, increased liability, the potential to pit emergency medicine against other specialties, and the possibility that future definitions could be harmful to EM.

Kristin McCabe-Kline, MD, FACEP

I voted to overrule based on the recommendation from the ACEP representative to the AMA regarding the position of the AMA but in full support of further action to preserve the intent of the Council while aligning with the AMA.

Gillian Schmitz, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine and the concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

James Shoemaker, Jr., MD, FACEP

I voted to overrule the 2nd resolved based on the analysis from the AMA Section Council on EM that felt a universal definition of the practice of medicine could inadvertently result in more scope creep vulnerabilities and could negatively impact nurses and nurse

practitioners. The potential liability concerns identified were also enough to overrule not to mention other specialties in the House of Medicine wanting to make changes to best fit their needs. One size does not fit all.

Ryan Stanton, MD, FACEP

I voted to overrule based on the recommendation and guidance of our colleagues representing the College with the AMA in order to promote a solution that maintains our relationships with the AMA while still providing a pathway for best achieving the intent of the resolution.

Aisha Terry, MD, FACEP

I voted to overrule the second resolved based on the recommendation of the AMA Section Council on Emergency Medicine and the concerns that a universal definition of the practice of medicine could leave emergency medicine more vulnerable on scope of practice issues rather than less vulnerable.

2023 Council Meeting

October 7-8, 2023

Pre-Meeting Events Occur Friday Evening, October 6, 2023
Pennsylvania Convention Center, Terrace Ballroom II-III (400 Level)
Philadelphia, PA

TIMED AGENDA

Saturday, October 7, 2023

Continental breakfast available – Terrace Ballroom II-III

7:30 am

- | | | |
|--|----------------|---------|
| 1. Call to Order | Dr. Gray-Eurom | 8:00 am |
| A. Meeting Dedication | | |
| B. Pledge of Allegiance | | |
| C. National Anthem | | |
| 2. Introductions | Dr. Gray-Eurom | 8:10 am |
| 3. Welcome from PA Chapter President | Dr. Hamilton | 8:12 am |
| 4. Tellers, Credentials, & Election Committee | Dr. Char | 8:14 am |
| A. Credentials Report | | |
| B. Meeting Etiquette | | |
| 5. Changes to the Agenda | Dr. Gray-Eurom | 8:16 am |
| 6. Council Meeting Website Overview | Mr. Joy | 8:16 am |
| 7. EMF Council Challenge | Dr. Wilcox | 8:21 am |
| 8. NEMPAC Council Challenge | Dr. Jacoby | 8:23 am |
| 9. Review and Acceptance of Minutes | Dr. Gray-Eurom | 8:25 am |
| A. Council Meeting – September 29-30, 2022 | | |
| 10. Approval of Steering Committee Actions | Dr. Gray-Eurom | 8:26 am |
| A. Steering Committee Meeting – January 31, 2023 | | |
| B. Steering Committee Meeting – April 30, 2023 | | |
| 11. Executive Directors Report | Ms. Sedory | 8:27 am |
| 12. Call for and Presentation of Emergency Resolutions | Dr. Gray-Eurom | 8:47 am |
| 13. Steering Committee's Report on Late Resolutions | Dr. Gray-Eurom | 8:50 am |
| A. Reference Committee Assignments of Allowed Late Resolutions | | |
| B. Disallowed Late Resolutions | | |
| 14. Nominating Committee Report | Dr. Gray-Eurom | 9:00 am |
| A. Speaker | | |
| 1. Slate of Candidates | | |
| 2. Call for Floor Nominations | | |
| B. Vice Speaker | | |
| 1. Slate of Candidates | | |
| 2. Call for Floor Nominations | | |
| C. Board of Directors | | |
| 1. Slate of Candidates | | |
| 2. Call for Floor Nominations | | |

D. President-Elect		
1. Slate of Candidates		
2. Call for Floor Nominations		
15. Candidate Opening Statements	Dr. Gray-Eurom	
A. Speaker Candidates (2 minutes each)		9:05 am
B. Vice Speaker Candidates (2 minutes each)		9:07 am
C. Board of Directors Candidates (2 minutes each)		9:15 am
D. President-Elect Candidates (5 minutes each)		9:30 am
16. Reference Committee Assignments	Dr. Gray-Eurom	9:45 am
BREAK		9:50 am – 10:00 am
17. Reference Committee Hearings		10:00 am – 1:00 pm
A – Governance & Membership – Room 122A-B (100 Level)		
B – Advocacy & Public Policy – Room 121A-C (100 Level)		
C – Emergency Medicine Practice – Room 120A-C (100 Level)		
Boxed Lunches Available – Room 121A-C Foyer (100 Level)		11:00 am – 12:30 pm
18. Reference Committee Executive Sessions		1:00 pm – 2:30 pm
A – Room 122A-B (100 Level)		
B – Room 121A-C (100 Level)		
C – 120A-C (100 Level)		
BREAK – Return to main Council meeting room – Terrace Ballroom		1:00 pm – 1:15 pm
19. Town Hall Meeting – Terrace Ballroom II-III	Dr. Costello	1:15 pm – 2:15 pm
A. What's AI Got to Do With IT? The Future of Health Care Automation		
20. Candidate Forum for the President-Elect Candidates – Terrace Ballroom II-III		2:20 pm – 2:50 pm
BREAK – Return to Reference Committee meeting rooms Room 122A-B, Room 121A-C, Room 120A-C (100 Level)		2:50 pm – 3:00 pm
21. Candidate Forum for Board of Directors and Council Officer Candidates Candidates rotate through Reference Committee meeting rooms.		3:00 pm – 4:45 pm
BREAK – Return to main Council meeting room – Terrace Ballroom II-III		4:45 pm – 5:00 pm
22. Speaker's Report	Dr. Gray-Eurom	5:00 pm
23. In Memoriam	Dr. Gray-Eurom	5:15 pm
A. Reading and Presentation of Memorial Resolutions Adopt by observing a moment of silence.	Dr. Costello	
24. EMRA Report	Dr. Adkins Murphy	5:30 pm
25. ABEM Report	Dr. Johnson	5:35 pm
26. Secretary-Treasurer's Report	Dr. Shoemaker	5:40 pm
27. President's Address	Dr. Kang	5:45 pm
RECESS		6:05 pm

Sunday, October 8, 2023**Continental breakfast available – Terrace Ballroom II-III****7:30 am**

- | | | |
|---|-----------------------------|----------|
| 1. Call to Order | Dr. Gray-Eurom | 8:00 am |
| 2. Tellers, Credentials, & Elections Committee Report | Dr. Char | 8:00 am |
| 3. Electronic Voting | Dr. Char | 8:05 am |
| A. Electronic Voting Testing | | |
| 4. EMF Report | Dr. Kraus | 8:30 am |
| 5. NEMPAC Video Report | | 8:35 am |
| 6. Submitting Amendments Electronically | Dr. Gray-Eurom | 8:40 am |
| 7. Reference Committee Reports | | 8:45 am |
| A. Reference Committee ____ | | |
| B. Reference Committee ____ | | |
| 8. Awards Luncheon – <i>Terrace Ballroom I</i> | | 12:00 pm |
| A. Welcome | Dr. Gray-Eurom | 12:40 pm |
| 1. Recognition of Past Speakers and Past Presidents | | |
| 2. Recognition of Current and Past Board Members | | |
| 3. Recognition of Chapter Executives | | |
| B. ACEP Awards Announcements | Dr. Kang | |
| C. Reading and Presentation of Commendation Resolutions | Dr. Gray-Eurom/Dr. Costello | |
| <i>Adopt by acclamation.</i> | | |
| D. Council Award Presentations | Dr. Gray-Eurom/Dr. Costello | |
| 1. Council Service Milestone Awards – 5, 10, 15, 20, 25, 30, 35+ Year Councillors | | |
| 2. Council Teamwork Award | | |
| 3. Council Horizon Award | | |
| 4. Council Champion in Diversity & Inclusion Award | | |
| 5. Council Curmudgeon Award | | |
| 6. Council Meritorious Service Award | | |

LUNCHEON ADJOURNS – Return to main Council meeting room – Terrace Ballroom II-III**1:30 pm**

- | | | |
|--|--------------------|---------|
| 9. Tellers, Credentials, & Elections Committee Report | Dr. Char | 1:40 pm |
| 10. Reference Committee Reports Continue | | 1:45 pm |
| C. Reference Committee ____ | | |
| 11. President-Elect's Address | Dr. Terry | 4:45 pm |
| 12. Installation of President | Dr. Kang/Dr. Terry | 5:05 pm |
| 13. Tellers, Credentials, & Elections Committee Report | Dr. Char | 5:10 pm |
| 14. Elections | Dr. Char | 5:10 pm |
| A. Speaker | | |
| B. Vice Speaker | | |
| C. Board of Directors | | |
| D. President-Elect | | |
| 15. Announcements | Dr. Gray-Eurom | 5:40 pm |

ADJOURN**5:45 pm****Next Annual Council Meeting • September 27-28, 2024 (Friday-Saturday) • Las Vegas**

Friday, September 30, 2022***Coffee, water, soft drinks available – Grand Ballroom A******7:30 am***

- | | | |
|---|-----------------------------|------------------------|
| 1. Call to Order | Dr. Gray-Eurom | 8:00 am |
| 2. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 8:00 am |
| 3. Electronic Voting | Dr. Kraus | 8:05 am |
| A. Electronic Voting Testing | | |
| 4. Executive Directors Report | Ms. Sedory | 8:30 am |
| 5. Submitting Amendments Electronically | Dr. Gray-Eurom | 8:50 am |
| 6. Reference Committee Reports | | 8:55 am |
| A. Reference Committee ____ | | |
| B. Reference Committee ____ | | |
| 7. Awards Luncheon – <i>Continental Ballroom 4</i> | | <i>12:00 pm</i> |
| A. Welcome | Dr. Gray-Eurom | 12:45 pm |
| 1. Recognition of Past Speakers and Past Presidents | | |
| 2. Recognition of Current and Past Board Members | | |
| 3. Recognition of Chapter Executives | | |
| B. ACEP Awards Announcements | Dr. Schmitz | 12:55 pm |
| C. Reading and Presentation of Commendation Resolutions | Dr. Gray-Eurom/Dr. Costello | |
| <i>Adopt by acclamation.</i> | | |
| D. Council Award Presentations | Dr. Gray-Eurom/Dr. Costello | |
| 1. Council Service Milestone Awards – 5, 10, 15, 20, 25, 30, 35+ Year Councillors | | |
| 2. Council Teamwork Award | | |
| 3. Council Horizon Award | | |
| 4. Council Champion in Diversity & Inclusion Award | | |
| 5. Council Curmudgeon Award | | |
| 6. Council Meritorious Service Award | | |

Luncheon Adjourns – Return to main Council meeting room – Grand Ballroom B***1:30 pm***

- | | | |
|--|----------------------|---------|
| 8. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 1:40 pm |
| 9. Reference Committee Reports Continue | | 1:45 pm |
| C. Reference Committee ____ | | |
| 10. President-Elect's Address | Dr. Kang | 4:45 pm |
| 11. Installation of President | Dr. Schmitz/Dr. Kang | 5:05 pm |
| 12. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 5:10 pm |
| 13. Elections | Dr. Kraus | 5:10 pm |
| A. Board of Directors | | |
| B. President-Elect | | |
| 14. Announcements | Dr. Gray-Eurom | 5:40 pm |

ADJOURN***5:45 pm******Next Annual Council Meeting • October 7-8, 2023 • Philadelphia, PA***

Friday, September 30, 2022*Coffee, water, soft drinks available – Grand Ballroom A***7:30 am**

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|---|-----------------------------|-----------------|
| 1. Call to Order | Dr. Gray-Eurom | 8:00 am |
| 2. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 8:00 am |
| 3. Electronic Voting | Dr. Kraus | 8:05 am |
| A. Electronic Voting Testing | | |
| 4. Executive Directors Report | Ms. Sedory | 8:30 am |
| 5. Submitting Amendments Electronically | Dr. Gray-Eurom | 8:50 am |
| 6. Reference Committee Reports | | 8:55 am |
| A. Reference Committee ____ | | |
| B. Reference Committee ____ | | |
| 7. Awards Luncheon – Continental Ballroom 4 | | 12:00 pm |
| A. Welcome | Dr. Gray-Eurom | 12:45 pm |
| 1. Recognition of Past Speakers and Past Presidents | | |
| 2. Recognition of Current and Past Board Members | | |
| 3. Recognition of Chapter Executives | | |
| B. ACEP Awards Announcements | Dr. Schmitz | 12:55 pm |
| C. Reading and Presentation of Commendation Resolutions | Dr. Gray-Eurom/Dr. Costello | |
| <i>Adopt by acclamation.</i> | | |
| D. Council Award Presentations | Dr. Gray-Eurom/Dr. Costello | |
| 1. Council Service Milestone Awards – 5, 10, 15, 20, 25, 30, 35+ Year Councillors | | |
| 2. Council Teamwork Award | | |
| 3. Council Horizon Award | | |
| 4. Council Champion in Diversity & Inclusion Award | | |
| 5. Council Curmudgeon Award | | |
| 6. Council Meritorious Service Award | | |

Luncheon Adjourns – Return to main Council meeting room – Grand Ballroom B**1:30 pm**

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| 8. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 1:40 pm |
| 9. Reference Committee Reports Continue | | 1:45 pm |
| C. Reference Committee ____ | | |
| 10. President-Elect's Address | Dr. Kang | 4:45 pm |
| 11. Installation of President | Dr. Schmitz/Dr. Kang | 5:05 pm |
| 12. Tellers, Credentials, & Elections Committee Report | Dr. Kraus | 5:10 pm |
| 13. Elections | Dr. Kraus | 5:10 pm |
| A. Board of Directors | | |
| B. President-Elect | | |
| 14. Announcements | Dr. Gray-Eurom | 5:40 pm |

ADJOURN**5:45 pm****Next Annual Council Meeting • October 7-8, 2023 • Philadelphia, PA**