

EMinMD

Chapter Newsletter

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President's Message

Michael A. Silverman, MD, FACEP

Dear Colleagues,

Earlier this month, National ACEP joined other organizations in sending a very powerful letter to the President Biden regarding the impact boarding has on the delivery of care. If you haven't read it yet, I highly encourage you to do so.

The authors shared many stories of bad outcomes created by boarding and delays to patient care and asked for help to solve the boarding crisis.

As I sit here writing this message, my own emergency department has had back-to-back record volume weeks. This volume is I'm sure similar to others, as we struggle with high volumes, flu and RSV surges, and a critical shortage of PICU beds. Fortunately, during this time, boarding hasn't been too bad at my site, which is a needed respite.

On the Maryland ACEP side, you may think this is a quiet period. Afterall, our Councillors had a successful session at National ACEP in early October. Dr. Gabor Kelen was re-elected to the National ACEP Board, continuing a strong tradition of Marylanders contributing on a national level. While our legislative session doesn't begin until January, and our outstanding in-person CME event isn't until March, that doesn't mean our Maryland Chapter hasn't been busy behind the scenes.

First, I want to start with a huge recent win for emergency physicians in Maryland that I sent an email about earlier this month. Here's some of the back story that highlights the importance of the impact that individuals can have for our community. Earlier this year, Dr. Gina Ambrose identified a billing irregularity among pediatric mental health patients covered through Optum. Separately, Dr. Jason Adler, also identified some billing irregularities with Optum. Our legislative team started working with Drs. Ambrose and Adler, and after identifying some issues, thought we had solved the problem. Then, this fall, Dr. Jason Adler identified other problems with Optum reimbursement. Again, our legislative team went to work. Please see my email to the chapter dated Monday, November 14th @ 9:00AM EST for full details. To use Dr Ambrose's words from an email she sent earlier this year, "this is a lot of lost revenue for our hard-working providers." I am really happy that Maryland ACEP remained vigilant to identify all of the issues affecting physician revenue and continued to push the Maryland Department of Health to fully address the shortfalls from the Optum policy to help all of our members capture this revenue.

Second, for over a year, our Practice Management Committee (PMC) was very engaged in the development of the EQIP payment model, which is going live in January. Now, under new committee leadership, our PMC is returning to their roots and looking to share best practices of issues we all face among ED leaders.

Third, Maryland ACEP has lent its voice on several other issues. Going back to the increased volumes caused by RSV, flu, and COVID-19 cases, we joined with our fellow colleagues in AAP and MedChi and sent Governor Hogan a letter requesting additional resources to address staffing and capacity issues. Maryland ACEP also joined forces with our behavioral health colleagues to urge the Maryland Department of Health to expeditiously issue the new RFP for the behavioral health insurance contract to provide the next vendor with adequate time to avoid the pitfalls that providers have experienced under the current contract.

All of this is to say that Maryland ACEP is working for you, but we need your help. Our legislative policy committee will begin weekly meetings in January. Meetings are virtual and you are welcome to join. And we are [taking nominations](#) to join our Chapter Board of Directors as well as looking for a Treasurer of our Political Action Committee (EMPACT). There is an opportunity for everyone to make a difference. And while I realize the clinical world is currently exhausting, getting involved in your professional organization can be both rewarding and recharging.

To stay up to date with what's going on with Maryland ACEP, please check out our [website](#) and follow us on social media. We are on both [Facebook](#) and [Twitter](#) and post a lot of useful EM news there to keep you up to date.

We will get through this flu season, and I look forward to our Maryland ACEP events in 2023. If I don't see you soon, please have a wonderful and safe holiday and a Happy New Year. Please mark your calendar & [register](#) for our Legislative Reception at the [Red Red Wine Bar](#) in Annapolis on Thursday, January 26th. I hope to see you there!



Maryland Chapter

**AMERICAN COLLEGE OF
EMERGENCY PHYSICIANS**

JOIN US! / **2023 Legislative
Reception /**

DATE:

Thursday,
January 26, 2023

TIME:

6:00PM

DESTINATION:

Annapolis, MD

VENUE:

Red, Red, Wine Bar

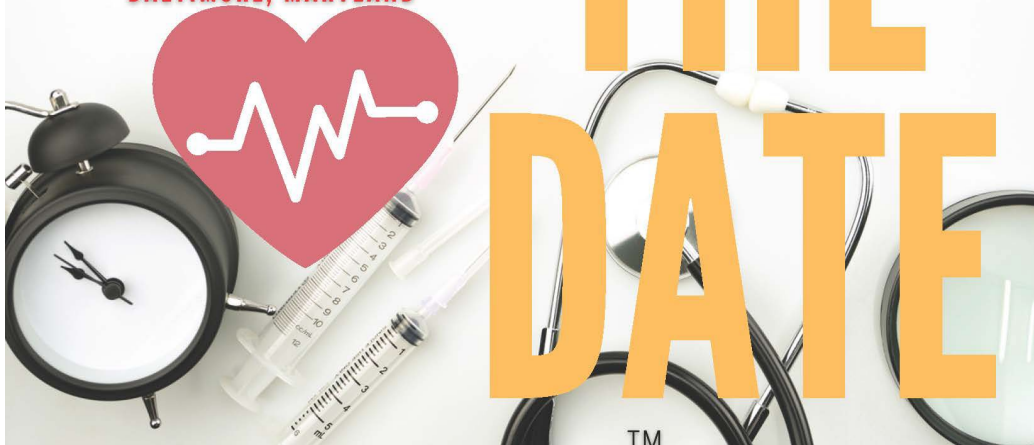
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ANNAPOLIS, MD 21401

/BUSINESS CASUAL /

RSVP / <https://bit.ly/3Nkp9Tu> / 410 727 2237

**THURSDAY
MARCH 30
2023**

**MARYLAND ACEP CHAPTER EDUCATIONAL
CONFERENCE & ANNUAL MEETING
THE UNIVERSITY OF MARYLAND
BALTIMORE, MARYLAND**



Approved for AMA PRA Category 1 Credit™

News Legislative & Public Policy Committee
Theresa E. Tassey, MD
Danna Kauffman - Chapter Lobbyist

The 2023 Session begins on Wednesday, January 11th. This Session will mark the beginnings of a new Administration when Governor-elect Wes Moore is sworn in. Since winning the election, Governor-elect Moore has been building his cabinet and his transition team. To date, he has not announced appointments for new Secretaries of State agencies, such as the Department of Health. Over the next month, it is expected that he will begin to do so.

In addition to a new Administration, the General Assembly will see many new faces. Retirements, redistricting and the election has brought a forty percent change or so in the composition of the legislature. As a result, we can expect a shuffling of committee assignments. At the end of the 2022 Session, we already saw leadership changes in the House, when Delegate Ben Barnes was named as Chair to the House Appropriations Committee and Delegate Joseline Pena-Melnyk as Chair to the House Health and Government Operations Committee. With the retirement of Senator Delores Kelley, we are awaiting the announcement from President Ferguson as to who will be the new Chair of Senate Finance.

Regarding topics for this Session, the General Assembly will be focusing its attention on a few major issues. With Marylanders overwhelmingly voting to allow recreational cannabis, the General Assembly will be decided on how best to regulate it and the interface between medical and recreational cannabis. With the

recent SCOTUS abortion decision, it is also expected that the General Assembly will be taking on the issue to protect physicians and health care practitioners who perform abortions in Maryland, especially when the patient is from another State.

On other health care issues, it can be expected that scope of practice will continue to dominate with non-physicians seeking to expand their scope to ensure “greater access” to services. MDACEP has been participating in regular meetings to discuss proposed changes to the laws regulating physician assistants’ practice in Maryland. The PAs are seeking to change Maryland practice law requirements for supervision to a collaborative practice agreement within Maryland. A similar bill was proposed last year but did not pass during the MD General Assembly. The push for collaboration agreements as opposed to supervision is part of a national advocacy effort for “Optimal Team Practice” by NP and PA groups. In general, the PAs and their respective national societies are looking to make changes to supervision requirements as a national answer to the Full Practice Authority granted to NPs in many states. Of course, the concerns about the amount of training PAs receive, scope of practice creep, the need for continued supervision – particularly for new graduates and PAs who have changed their specialty practice - and potential patient safety and legal ramifications for physicians have all been brought up as key concerns.

MDACEP will be holding weekly legislative meetings each Monday during Session to review introduced bills and take positions. MDACEP welcomes new members to this process. In addition, given the number of new legislators and the change in Administration, it is vital that MDACEP has strong attendance at its annual Legislative Day in Annapolis. Please mark your calendars for Thursday, January 26th.

News Pediatric EM Committee **Suzanna Martin, MD, PhD, FACEP**

Pa - WHAT - ovirus??? An emerging pathogen in infants.

RSV, Covid, Rhino-enterovirus, and Influenza have a new playmate! Parechovirus (pear - ECHO - virus) is a member of the picornavirus family and is closely related to enteroviruses. It is a ssRNA virus that is transmitted via a respiratory or fecal/oral route. The incubation time is unknown (assumed 2-10 days), but the shedding time can be 1-3 weeks via respiratory and up to 6 months via GI. Most cases of parechovirus infection are mild and self-limited, with most children having been infected by kindergarten. However, infants under 3 month of age can become critically ill or die with the HPeV3 subtype.

In July, the CDC issued an [alert](#) after several outbreaks of Parechovirus meningitis in infants were reported ("hundreds" of cases this summer).

The most common symptoms of severe parechovirus infection in infants are fever, rash, and IRRITABILITY. These babies are often inconsolable. Clinical manifestations can also include URI, GI, myocarditis, hepatocoagulopathy, seizures, paralysis, and meningoencephalitis. Laboratory findings are usually completely normal including a normal LP (few to no WBC, even when encephalopathic). Diagnosis, however, requires LP at this time (viral panel of CSF). Of the 14 cases at CNMC this summer, all had normal LPs, even those who had seizures and abnormal brain MRIs.

So, what is the treatment for this potentially lethal infection? Supportive care! There is some investigation into IVIG and the antiviral Pleconaril, but in the emergency department, supportive care is the standard. Once admitted, these infants will need an ID and Neuro consult.

If you see a fussy and febrile neonate with normal labs, consider parechovirus at the source!

And because I never forget pediatric psych issues in the ER, please take the time to read the Baltimore Banner's excellent [article](#) about children housed in Maryland emergency departments for months at a time: "Maryland kids in distress are being kept in emergency departments for weeks, months" by Liz Bowie, Hallie Miller, and Ryan on Aug 9th. Little.

News Practice Management Committee
J. David Gatz, MD, FACEP
Edana D. Mann, MD, FACEP (Co-Chair)

The Maryland ACEP Practice Management Committee had a wonderful initial event in early November focused on waiting room and triage management strategies given the rise of inpatient boarding.

Attendees represented numerous different medical systems across Maryland and Washington DC.



Strategies discussed included the use of dedicated waiting room personnel for patient satisfaction and reassessment, the successes and limitations of provider-in-triage and tele-triage models, and the liability associated with abnormal results of patients who leave before being seen.

This topic was selected based on your responses to a survey on what issues matter most to you. Other leading topics included "state-of-the-art sepsis care," understanding/implementing the new 2023 E/M guidelines, and ambulance offloading.

You can still submit your own survey responses [here](#). Keep an eye out for our next event, which will be a virtual discussion hosted either in late January or early February!

Resident Corner
Stephannie Acha-Morfaw, MD, PGY-4
Journey to the top: Hopkins PGY3 wins First Place in ACEP Resident Case Conference

Presenting in front of a large group can be a daunting process and can prove anxiety provoking for many people. Doing this at the national level to peers and supervisors where you are being judged can be even more overwhelming. Despite this, Johns Hopkins PGY-3, Arvin Jundoria, MD, MHS plunged headfirst into this challenge. As a champion of medical education within her residency program, Dr.

Jundoria is constantly looking for good teaching points in the cases she gets to take part in and values the role of evidence-based medicine and FOAMed in her residency education and practice. She took one of her many interesting cases and submitted it to the ACEP Resident Case competition and after presenting her poster at ACEP22 in San Francisco this year, won first place. I had the opportunity to discuss this achievement with Dr. Jundoria and learn more about the process and how other residents in Maryland can present and compete at the national level.

How did you decide on what case to present?

I keep a running list of patient cases that I find interesting. This case was early in my second year of residency and I decided to pick it for CaseCon because bupropion toxicity is something I had not encountered before, and it was very fascinating to me how bupropion overdose could imitate brain death.

How did you prepare?

After I found out I was a finalist, I drafted my poster, and practiced in front of my laptop! I recorded myself as I ran through the case several times to make sure I was in the allotted timeframe and to improve my presentation. I also reached out to Dr. Ehmann, one of my APDs and 2022 ACEP Jr. Faculty Teaching Award recipient, who helped edit my poster, review my presentation, and provide feedback to support me throughout this entire process.

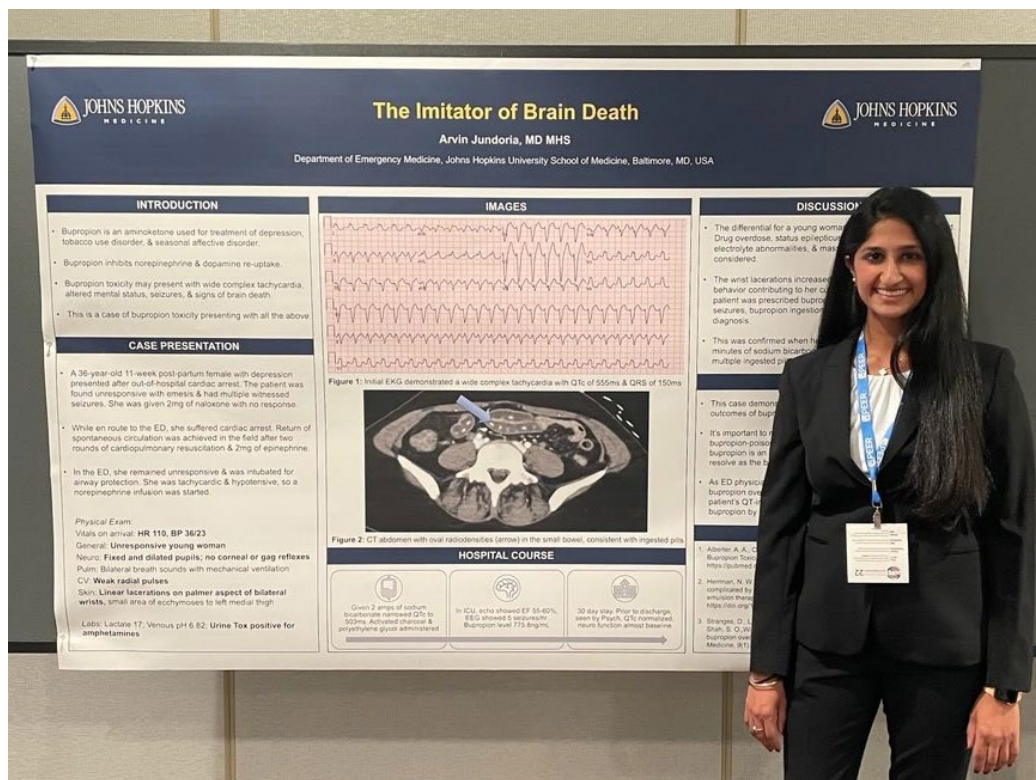
Did you have any obstacles?

Not at all. This was a fun experience!

What advice do you have for other residents interested in presenting at the national level?

Keep an inventory of patient cases that are interesting to you and submit your case! There is nothing to lose by submitting your case and it can be an educational process for you, while simultaneously teaching others. I also recommend having a mentor you can reach out to! I had a great one who proved invaluable. Not only do mentors provide advice, but they're in your corner and want to help you achieve your goals.

I hope Dr. Jundoria's recent success will inspire other residents to present at both the state and national level. I encourage other residents to start by presenting at the MDACEP Educational Conference, which will take place on Thursday, March 30, 2023 at the University of Maryland in Baltimore.



Council Meeting Summary Karen Dixon, MD, FACEP

As a first-time Councillor, I was pleased to have the seasoned experience of my co-Councillors for the 2022 ACEP Council Meeting. Our chapter had 8-seats which included 1-past leader and 7-Councillors. The meeting was held in San Francisco on Sept 29 and 30 this year. We had 3-reference committees, and a full 2-days of testimony and debates. Our President-Elect Aisha Terry, MD was elected, as well as 4-new Board Members, Maryland's own Gabe Kelen, MD (incumbent), Jeffrey Goodloe, MD (incumbent), Ryan Stanton, MD (incumbent), and Kristin McCabe-Kline, MD.

The session started with very animated debates on over 60-resolutions. Many of the new resolutions focused on important issues of reproductive health care, scope of practice, and efforts to improve treatment for opioid use disorder. There was also an emphasis on our need to address the rural workforce. The first day involved work within the reference committee rooms to debate and decide any proposed amendments to submitted resolutions, divide, and conquer. The second day was devoted to full council debate and testimony to bring resolutions to a vote. I enjoyed the rigor and candor of statements by my fellow councilors, from across the nation.

The 2022 ACEP Council Meeting was a success and was an eye-opening experience. I highly recommend participation in the ACEP Council, for those interested in trying something new and being a part of driving the agenda for our ACEP Board and fellow emergency clinicians.



From Left to Right: Dr. Greenwald, Dr. Dixon, Dr. Mann, Dr. Hansen, Dr. Hirshon, Dr. Bond, Dr. Forrestal, and Dr. DeAngelis



Councillor Dinner @ John's Grill in San Francisco. From Left to Right: Dr. DeAngelis, Dr. Forrestal, Dr. Bond, Dr. Hirshon, Dr. Greenwald, Dr. Mann, Dr. Hansen, and Adriana



MedChi Physician of the Day

Are you interested in volunteering to serve as the MedChi Physician of the Day in the Maryland State House's first aid room during the Maryland General Assembly's 2023 Legislative Session?

Please see the [volunteer form](#) to sign up. When you sign up, please make sure you choose three possible dates, as they are first come, first served. Once complete, please [email](#) the form to Chip O'Neil, MedChi Advocacy Coordinator and he will send you and a confirmation letter with your confirmed date and instructions.

Congratulations!



Congrats to new FACEPs!

Shana Durant, MD, FACEP
Anne Soriano, MD, FACEP

Welcome Members!

Christopher Cabanillas, MD
Elsa Louise Perreand
Haneet S. Chadha
Heather Groves
Ikechukwu Daniel Enenmoh
Jonathan Thierman, MD, FACEP

Nneka C. Azih, MD
Patricia Yang, MD
Robert Desverreaux, MD, PhD, FACEP
Ryan J McFague, DO
Sophie Qian Jin, MD
Tom-meka Archinard, MD, FACEP

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