

The EPIC

The President's Letter

MAJ BRIAN C. BAXTER, MD, FACEP

Having just returned from the ACEP Committee Chair's Workshop, I am rejuvenated and energized with regards to the national organization and our participation in it. Now is your opportunity to become active and re-energized. You might ask: Can I really make a difference? The answer is: Yes. Several of our members will be on national committees for the upcoming year. Everyone I have spoken to truly enjoys his/her experience. One effort I personally participated in was on the Membership Committee this year. We recommended to the Board of Directors, and they approved, the Installment Plan for dues. Now, members can pay dues in quarterly installments. We have also recommended a retirement category of membership, which will go to the Council in October for a vote. These are two examples of how you can make a difference. Congratulations to Tamara Hoover, GSACEP Membership Committee Chair, on working to achieve a record high member number for the Chapter. We have 506 members as of June 30. We need to maintain 500 to keep the additional councillor seat for next year.

Make plans now to attend the many activities of Scientific Assembly! If you have never been to the Council meeting, it is well worth your time to see how the College functions. GSACEP

Earn This

CPT STEPHEN R. ELLISON, M.D.

Your note about the movie Saving Private Ryan touched me deeply. As you know I am a doctor specializing in Emergency Medicine in the Emergency Departments of the only two military Level One trauma centers. They are both in San Antonio, TX and they care for civilian emergencies as well as military personnel. San Antonio has the largest military retiree population in the world living here because of the location of these two large military medical centers.

As a military doctor in training for my specialty I work long hours and the pay is less than glamorous. One tends to become jaded by the long hours, lack of sleep, food, family contact and the endless parade of human suffering passing before you. The arrival of another ambulance does not mean more pay, only more work. Most often it is a victim from a motor vehicle crash. Often it is a person of dubious character who has been shot or stabbed. With our large military retiree population it is often a nursing home patient. Even with my enlisted service and minimal combat experience in Panama prior to medical school, I have caught

I realized that I had seen these same men and women coming through my Emergency Dept and had not realized what magnificent sacrifices they had made.

will have a chapter meeting/board meeting on Sunday, 22 October at 1930-2130. This is an excellent opportunity to help guide the Chapter. Additionally, please review the Chapter's Strategic Plan in this issue and provide us with any input you may have. GSACEP will also host a reception at Scientific Assembly on Tuesday, October 24, from 1830-2000. Come and see all of your colleagues from the past and present!

Lastly, in an effort to meet your needs and keep the vitality of our Educational Meetings, Joint Services will be held in San Antonio, TX in March 2001 (dates are March 26-March 29). Then, in 2002, we plan to hold a national meeting in Orlando, FL in March. We hope this will encourage support from some military members and

non-members who have never attended our meetings. We also hope it will encourage families to attend. We have made special arrangements with the hotel to keep rates low before and after the meeting dates. Please provide your feedback.

Hope to see you in October. If there are any concerns you'd like to see supported or discussed, let your Board know.

myself groaning when the ambulance brought in yet another sick, elderly person from one of the local retirement centers that cater to military retirees. I had not stopped to think of what citizens of this age group represented.

I saw Saving Private Ryan. I was touched deeply. Not so much by the carnage in the first 30 minutes but by the sacrifices of so many. I was touched most by the scene of the elderly survivor at the graveside asking his wife if he'd been a good man. I realized that I had seen these same men and women coming through my Emergency Dept and had not realized what magnificent sacrifices they had made. The things they did for me and everyone else that has lived on this planet since the end of that conflict are

priceless.

Situation permitting I now try to ask my patients about their experiences. They would never bring up the subject without the

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Congratulations

Several of GSACEP members have recently been appointed to key leadership positions in ACEP. We do not have everyone's name yet, but will publish them as we learn of them.

MAJ. Brian Baxter, MD, FACEP, named Chair of the ACEP Membership Committee.

Marco Coppola, DO, FACEP re-appointed to the Academic Affairs Committee of ACEP.

LtCol.Linda Lawrence, MD, FACEP, re-appointed to the ACEP Educational Meetings Committee.

Bernadette Carr, Executive Director, re-appointed to the Public Relations Committee of ACEP.

Scientific Assembly Announcements

The Government Services Chapter and Board of Directors meeting at Scientific Assembly is being held on Sunday evening, October 22, from 1930 to 2130 at The Philadelphia Marriott. We don't have the room number yet, but will publish it on the website. All GSACEP members are welcome.

GSACEP will have booth number 756 at Scientific Assembly. Come visit us from 0930 to 1530 Monday, October 23 through Wednesday, October 26.

The GSACEP reception is being held on Tuesday evening, October 24, from 1830 to 2000 at the Philadelphia Marriott. GSACEP members and their guests only. Reception room to be announced on our website.

Advertise in the EPIC

For more information, or to place an ad, contact the GSACEP office at 718-759-0699.

Full Page B/W (7 1/4" by 10") \$300

Two-Thirds B/W (4 3/4" by 10") \$200

Half Page BW (7 1/4" by 4 3/4") \$150

New Members

Aaisya N. Ansari-Lawai, MD Blanchfield Army Comm. Hospital, Ft. Campbell, KY

Todd Eric Arkava, MD

Darnall Army Comm. Hospital, Ft. Hood, TX
Fayetteville, NC

John Joseph Coakly, DO

Darnall Army Comm. Hospital, Ft. Hood, TX
San Antonio, TX

Chad Scott Crystal

Diane Devita, MD

Arlington, VA

Christopher Drew, MD

East Amherst, NY

Allen Daxter Holder, MD

Ft. Sam Houston, TX

Michael D. Jones, MD

Darnall Army Comm. Hospital, Ft. Hood, TX

Paul W. Krantz, MD

Tulsa, OK

Evan W. Lee, Jr., DO

Naval Medical Center, Portsmouth, VA

Susan J. Letterlee, MD

Travis AFB, CA

Richard Charles Lotsch, DO

Wright Patterson Med Ctr, Fairborn, OH

Kelly Manning, MD

Birmingham, AL

Brit McLeod Lovvorn, MD

Madigan Army Medical Ctr., Tacoma, WA

Tina J. Nelders, MD

Darnall Army Comm. Hospital, Ft. Hood, TX

Jamie M. Patel, MD

Naval Medical Center, San Diego, CA

Donald Sallee, MD

Ardmore, PA

Christopher Sullivan

Seattle, WA

Kimberlee Ann Yeargin

Earn This

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inquiry. I have been privileged to an amazing array of experiences recounted in the brief minutes allowed in an Emergency Dept encounter. These experiences have revealed the incredible individuals I have had the honor of serving in a medical capacity, many on their last admission to the hospital.

There was a frail, elderly woman who reassured my young enlisted medic trying to start an IV line in her arm. She remained calm and poised despite her illness and the multiple needle-sticks into her fragile veins. She was what we call a "hard stick." As the medic made another attempt I noticed a number tattooed across her forearm. I touched it with one finger and looked into her eyes. She simply said "Auschwitz." Many of later generations would have loudly and openly berated the young medic in his many attempts. How different was the response from this person who'd seen unspeakable suffering.

A long retired Colonel who as a young USN officer had parachuted from his burning plane over a pacific island held by the Japanese. Now an octogenarian, his head cut in a fall at home where he lived alone. His CT scan and suturing had been delayed until after midnight by the usual parade of high priority ambulance patients. Still spry for his age, he asked to use the phone to call a taxi to take him home then realized his ambulance had brought him without his wallet. He asked if he could use the phone to make a long distance call to his daughter who lived 70 miles away. With great pride we told him that he could not as he'd done enough for his country and the least we could do was get him a taxi home, even if we had to pay for it ourselves. My only regret was that my shift wouldn't end for several hours and I couldn't drive him myself.

I was there the night MSG Roy Benavidez came through the Emergency Dept for the last time. He was very sick. I was not the doctor taking care of him but I walked to his bedside and took his hand. I said nothing. He was so sick he didn't know I was there. I'd read his Congressional Medal of Honor citation and wanted to shake his hand. He died a few days later.

The gentleman who served with Merrill's Marauders, the survivor of the Baatan Death March, the survivor Omaha Beach, the 101 year old World War I veteran, the former POW held in frozen North Korea, the former Special Forces medic now with non-operable liver cancer, the former Viet Nam Corps Commander. I remember these citizens. I may still groan when yet another ambulance comes in but now I am much more aware of what

an honor it is to serve these particular men and women. I am angered at the cut backs, implemented and proposed, that will continue to decay their meager retirement benefits. I see the President and Congress who would turn their back on these individuals who've sacrificed so much to protect our liberty. I see later generations that seems to be totally engrossed in abusing these same liberties won with such sacrifice. It has become my personal endeavor to make the nurses and young enlisted medics aware of these amazing individuals when I encounter them in our Emergency Dept. Their response to these particular citizens has made me think that perhaps all is not lost in the next generation. My experiences have solidified my belief that we are losing an incredible generation and this nation knows not what it is losing. Our un-caring government and ungrateful civilian populace should all take note. We should all remember that we must "Earn this."

Rangers Lead the Way!

CPT Stephen R. Ellison, M.D.

Editors Note: This letter from an Army Captain resident physician in our emergency department was first sent earlier this month to a retired special forces friend in Dallas in response to an email about "Saving Private Ryan," his response has been forwarded around the globe, civilian and military alike, including some of the top leadership of the Army and Air Force.

Biography: Captain Stephen R. Ellison, M.D. is a resident physician specializing in Emergency Medicine in the joint Brooke Army Medical Center - Wilford Hall Medical Center Emergency Medicine Residency in San Antonio, TX. He is a native of San Marcos, TX and a graduate of Jack C. Hays High School in Kyle, TX. He received his B.S. in Biology from Southwest Texas State University in San Marcos, TX. He then enlisted in the U.S. Army, serving in the 1st Battalion, 75th Ranger Regiment, Hunter Army Airfield, GA. He was the Enlisted Honor Graduate of his Ranger School class and participated in the parachute assault of Torrorrijos/Tocumen Airport, Panama during Operation: Just Cause. He attended medical school at the University of Texas Health Science Center at San Antonio on a U.S. Army scholarship and received his Doctor of Medicine degree in 1995. His transitional internship was performed at Brooke Army Medical Center. He then served as the initial company commander and program director for the new Joint Special Operations Medical Training Center, Ft. Bragg, NC. He currently resides in San Antonio, Texas, with his wife Marta and his two children.

Strategic Goals 2000 - 2001

On March 12th GSACEP held its annual Strategic Planning Meeting in San Antonio, Texas. During this meeting the following goals and objectives were made:

Education Committee

1. Increase market share/penetration of CME
2. Develop an identified network of experts.

Communications Committee

1. State of the art technology
2. Archival databases

Membership Committee

1. Chapter membership will be greater than 500*
2. Membership on committees will increase
3. A large number of members will run for elected leadership positions

* Goal was reached in June.

Policy Committee (position open)

1. Needs of Chapter members are identified
2. No gaps exist between chapter policies and identified needs
3. Solutions to shared challenges are communicated through all levels of the organization, 100% of the time.
4. Chapter members are consulted by ACEP leaders and other chapters on all policy positions in members' areas of expertise.

Board Consultants

1. EM faculty positions are coveted, and academic productivity increases.
2. EM residencies receive the highest applicant/position ratio
3. Members will renew their commitment to military service

Wellness Committee (position open)

1. Wellness information is disseminated.
2. Mentoring

Resident's Corner

CPT STEVE CURRIER, MD

Welcome to all the new interns and congratulations to everyone else on another year survived. This column is supposed to cover resident issues. I often cover issues which affect us at a national level or other issues more specific to the military but today I want to talk about education. No, not another boring lecture but a list of web based resources that make my life easier and hope will help you in your search for answers to everyday questions in Emergency Medicine.

1. ACEP.ORG. This is the official ACEP website it contains information on meetings and issues that impact Emergency Medicine at a national level.

2. GSACEP.ORG Similar to the ACEP site but limited in focus to the Government Services Chapter of ACEP.

3. EMRA.ORG This site contains information more specific to residents as a group. It does have some educational content such as the pearls section, which focuses on day to day issues in the workplace rather than actual clinical questions.

4. eMedicine.com This site is great! It is strictly academic and has folders for various specialties. Emergency Medicine is one of the only folders finished. This is similar to a textbook with up to date information and references.

5. East.ORG I will warn you now: DON'T type east.com or you will find yourself on a web page that may land you in trouble if you are on a government system.

This site is a trauma site with limited information but the few topics they cover are outstanding. Their opinion is backed up by literature and they will break the subject down stating where there is level I, II, III data for each point. If you find yourself with a lecture topic on trauma, I recommend this be the first site you visit.

6. MDConsult.com You have to pay for this one or use your library's subscription. It gives you instant access to full text articles from 50 journals. This makes the literature search on a subject much less library intensive.

I know there are many more sites out there but these are the ones I find most helpful on a day-to-day basis.

As I sat down to write this column I checked my e-mail and Dr. Baxter the President of GSACEP dropped me a line. He wanted me to drum up business for ACEP. Simply translated this means: Make sure all the military residents join ACEP. As I checked my lists of residents, I found there are many military residents who are not members of GSACEP. Please, let your fellow residents know ACEP is our one national voice and we need to be a part of it. ACEP fights for many causes such as the patient bill of rights or, closer to home, our reimbursement from HCFA. There has been a lot of negative talk about ACEP from other groups. However, if you just ask them what they are doing about the issues they say ACEP is not addressing, you will see they are talkers not doers. The easiest way to join GSACEP is on the GSACEP webs site. Just log on and follow the directions.

MEMBERSHIP COMMITTEE GOALS AND STRATEGIES

LCDR. Tamara Hoover developed these membership committee goals in response to GSACEP's Strategic Plan. We will publish the goals of other Committee Chairs as we receive them. If you are interested, please contact us and we will put in touch with Dr. Hoover.

I. Chapter membership will remain greater than 500

- A. Vigorously promote membership among PGY-1's
- B. Vigorously promote membership among GMOs
 - 1. Obtain the lower \$50.00 membership fee for post-internship GMOs (This is being addressed by Brian Baxter with national ACEP.)
- C. Keep GSACEP members who have moved. [Note: This actually was addressed by Patty Stowe at ACEP last spring and is working quite well].

II. Membership on committees will increase

- A. Committee chairmen and members (with e-mail addresses) will be published in EPIC annually
- B. Committee Goals and strategies will be published annually

in EPIC

- 1. Specific committee needs must be identified and publicized
- C. Committee members will be rewarded for their service
 - 1. Establish annual awards for outstanding contributions

III. A large number of members will run for elected leadership positions

- A. Leaders will be rewarded for their service
 - 1. Consider free attendance at all GSACEP conferences
 - 2. Consider reimbursement for airfare to all GSACEP conferences
 - 3. Establish annual awards for outstanding contributions
- B. Leadership position descriptions must be published with approximate time commitments required to fulfill that obligation
- C. A questionnaire will be disseminated among chapter members to define their expectations of what GSACEP membership and its leaders should provide

CME Articles Online

A decision has been taken by GSACEP to publish the CME articles online only. GSACEP understands that the CME article is very popular with our membership and we wish to continue to offer CME to our members. However, by publishing the EPIC's CME article online instead of in the EPIC, we will save thousands of dollars which will help us to keep our membership costs down.

The CME articles can always be found on our website at <http://www.gsacep.org/Members/Epic.cfm>. The articles are published with Adobe Acrobat to preserve the quality of the article. If you have any difficulty logging in to the web site, please contact our webmaster at webmaster@gsacep.org.

CME #15 - NEUROLEPTIC MALIGNANT SYNDROME

CPT THOMAS N. BOTTONI, LCDR, MC, USNR

Government Services EPIC CME Course has been approved by the American College of Emergency Physicians for up to 10 hours of ACEP Category I credit.

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17th Annual Emergency Medicine Symposium

GSACEP and Naval Medical Center San Diego jointly sponsored with ACEP the 17th Annual EMS at the Concourse in San Diego.

The conference featured several nationally known speakers and a full curriculum for its three-day-sessions from Monday, July 24 to Wednesday, July 26. Course Coordinator LCDR Peter Mishky took over in March from Dr. Gerry Van Houdt who left military service for a civilian appointment in Washington State. Dr. Mishky and his team did an outstanding job.

Our sponsors included Audio Digest Foundation, a nonprofit arm of the California Medical Association, who recorded parts of the conference. If you attended and are interested in obtaining a particular speaker's lecture, contact Marilyn Lowry at Audio Digest (818)240-7500. Not all speakers will be available, but she will let you know who is.

We want to thank sponsors Ortho-McNeil and Wyeth-Ayerst as well as our exhibitors: Abbott, Bayer, Boehringer Ingelheim, Dura Pharmaceuticals, Medtronic Physio-Control, Merck, Pfizer, Smithkline Beecham, SonoSite, and Zoll Medical.

IMPORTANT DATES

October 21-22: Council Meeting ACEP, Philadelphia, PA

October 23-26: Scientific Assembly, Philadelphia, Pa

October 22: Chapter and Board Meeting, GSACEP, 1930 to 2130, Philadelphia Marriott

October 24: GSACEP Reception, 1830 to 2000 Philadelphia Marriott

March 25, 2001: GSACEP Strategic Planning Meeting and Board meeting, Sheraton Four Points, San Antonio, TX

March 26-29: Joint Services Symposium 2001, Sheraton Four Points, San Antonio, TX

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