

21st Annual Scientific Assembly

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It's time to think about the next Scientific Assembly — scheduled for Austin, Texas, from February 28 through March 4, 2015. The success of the 20th gathering in New York back in February will be tough to surpass. That's why I need your help.

It is my great honor to once again be in charge of putting together the AAEM Scientific Assembly.

I did it for five years from 2001 to 2006, before handing the reins over to Kevin Rodgers. But I lobbied for the job one more time, and I need to show that the trust put in me by Education Committee Chair Mike Epter and President Mark Reiter is warranted.

Where We Have Been

Our innovations over the last few years have been huge. Point-counterpoint arguments remain very popular. The literature review sessions are always welcome. The shorter sessions with built-in breaks between speakers have allowed attendees more freedom in choosing what to attend and are well received.

AAEM has always been ahead of the curve on educational innovations. We had our first workshop on simulations in Orlando more than 10 years ago — and it was a failure. We had only about six people show up, as the whole concept of learning through simulation was still quite new. Now, of course, it is part of what we do every year.

Three years ago we tried “flipping the classroom” — I recorded my talk and made it available for people to preview by download or streaming two months before the Scientific Assembly. People would listen in advance, then come and ask questions about what they had heard. Again, we were ahead of the curve. People showed up expecting to hear a lecture in standard fashion, as virtually no one had listened in advance. But now that adult-learning concepts are more readily accepted and people have become more comfortable with online learning, it's time to try it again.

Our “Open Mic” session continues to help us find the future voices of EM education. It is now copied by other organizations, but they require that people submit their topics and CVs in advance. Only AAEM takes the chance of allowing someone to sign up on the day of the session, to give an unvetted talk on the topic of their choice. More than 100 people have “auditioned” for AAEM since we started this innovative session, and this privilege has been abused only a small number of times.

Our big innovation for 2014 was the Pecha Kucha (Japanese for “chit chat,” also called PK) sessions — 20 slides at 20 seconds each — a total of 6 minutes 40 seconds to cover a topic or get an idea across. We were apparently right on target with this, as every chair was occupied and people lined the walls of the room, with more outside in the hall trying to hear what was going on.

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21ST ANNUAL SCIENTIFIC ASSEMBLY HILTON AUSTIN ★ AUSTIN, TX

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FEBRUARY 28 – MARCH 4, 2015

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For All AAEM
Members!***

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required



Where We Are Now

For many years, I think it was safe to say that AAEM Scientific Assembly was the premier educational event in emergency medicine. This may no longer be true. It's not that AAEM has slipped — not by a long shot. We continue to give our members the best forward-looking information on all aspects of clinical emergency medicine. But in the last few years, I have attended meetings in Ireland (ICEM2012) and Australia (SMACC and smaccGOLD – that's Social Media And Critical Care) that had some of the best teaching — and teachers — I have ever heard. I have also heard many of these people speak at AAEM Scientific Assemblies — Haney Mallemat, Scott Weingart, Rich Levitan, etc.

Where Do We Go From Here?

I need your help to keep us at the forefront of EM education. I need you to tell us the best teachers you have heard in the last few years, with an emphasis on the “third generation” teachers — people who may only be a few years out of training but who have already demonstrated outstanding teaching skills.

With the explosion of FOAMed (Free Open Access Medical Education) resources — blogs, podcasts, commentaries — we will continue to guide you into the best ways for keeping current on a daily basis, even if you feel you're “not of the Twitter generation.” From my personal perspective, I've been getting Social Security checks for several months now and consider Twitter to be my primary source of new information in EM. I was recently forced into getting an iPhone after resisting for many years, but somehow I had accumulated more than 3,000 followers on Twitter before this happened. In other words, if I can do it, you can do it.

I also want your involvement in a new way. As you know, AAEM does not charge its members to attend Scientific Assembly; it's part of your

member benefits and we intend to keep it that way. This means that people who speak at Scientific Assembly do so only for transportation and hotel reimbursement — they do not get a speaker's stipend. And that tells you AAEM's reputation is such that people will gladly speak at our meetings without expecting anything more than their expenses being paid.

Obviously we want to expand the Pecha Kucha session, our most successful innovation in 2014. We will do at least one full day of PKs in Austin. We will determine the time allotted for this session by the number of people who want to speak. Rather than assign topics, I want you to submit your idea for a PK that you want to give. A subcommittee will consider all the submissions and determine which topics and speakers to choose. Remember the rules: 20 slides, 20 seconds each, a total 6 minutes 40 seconds, and then off. If chosen, you will present for the love of teaching. If chosen, you will have to submit the usual information about Conflicts of Interest for CME purposes. You will have to write two or three questions for CME purposes. You will not be compensated for transportation or lodging **unless** you are invited to give another talk.

I have other ideas too: a half-day track on the philosophy of being a physician, and perhaps a session on how medicine's history should help form its future. We'll even leave an hour or two for last-minute developments that occur after the final program is published, months before the conference.

Or you can email me ideas directly at JoelLex@AAEM.org. You can also Tweet me @JoelLex5 or message me directly at 215-495-2588. I will take any and all ideas into consideration, as long as the anticipated results are 1) improved patient care and outcomes or 2) improved well-being for the practicing emergency physician. ■



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AAEM-0213-022