



President's Message

An Encouraging Sign

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I received communication this week from a group of senior residents who see an opportunity to take a contract currently held by a CMG. They have gone through the initial phase; now they need help/advice as to how to proceed with the bid and subsequent initiation of the contract and are coming to us for that assistance. We are only too happy to help out with this request!

Less than two years ago, we didn't have as much to offer. Though the Academy espoused independent democratic groups, we had little available to members who sought to gain a contract or needed assistance in maintaining one they already had. With the help of many, the Practice Management Committee was established last year. This expert body is now available to assist these young physicians and others like them who may see an opportunity and wish to capitalize upon it. We could also use the expertise of others who have established and run their own groups. I encourage each of you with such experience to become a member of the Practice Management Committee. Here is your chance to give back.

It is encouraging to see that physicians are beginning to come to the Academy for such assistance. Most people I have talked to who have managed large physician groups agree that a local independent group will do a much better job than a CMG, provided it is properly managed. The entrepreneurship of these young physicians is to be commended. May they inspire other members who read this to go out and do the same!

“Board Certified, Residency Trained” = Age Discrimination?

Shortly after becoming AAEM president, I received an email from a respected former colleague. He wanted to let me know that he felt that the above phrase was being used to keep the seasoned physicians from being eligible for certain jobs. I have since heard similar observations from some other physicians in the same cohort. I find this to be very unfortunate.

The practice track closed in 1988. This means that anyone who wanted to grandfather in and be eligible to take the ABEM exams had to have had the equivalent of five years practice experience by the end of 1988. Hard to believe that someone with over twenty-five years of EM experience and recertified twice is considered less of a candidate than someone just coming out of training.

To my knowledge, we are the only specialty that has such ads. All the others ask that candidates be board certified. Since 1988, the only means to become board certified is to have successfully completed an accredited residency program. So any emergency physician who is board certified has over two decades of experience and/or has completed a residency program. It seems that using the phrase “board certified, residency trained” could be taken as showing a preference for candidates in a younger cohort. Excluding those with decades of experience, which allows most of them to be very efficient and provide a different perspective to the practice, is short-changing your group. ■

Contact the President: president@aaem.org

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