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CAL/AAEM NEWSLETTER

President's Message

What services can the California chapter of the American Academy of Emergency Medicine (CAL/AAEM) provide, and how do we differ from the California chapter of the American College of Emergency Physicians (CAL/ACEP) and other emergency medicine organizations? These two core questions arose during my first two months as CAL/AAEM president. The first naturally surfaced when laying out an action plan for CAL/AAEM for the coming year. The second emerged when the leaders of CAL/ACEP graciously proposed that we explore and promote a unification process of our two parent organizations – AAEM and ACEP.

Regarding the question about services, we are currently seeking to provide several innovative services for our members. First, we are on target to provide free web-based summaries of all of the American Board of Emergency Medicine-required Lifelong Learning and Self Assessment (LLSA) articles by the fall of this year. Along with this, we plan to tie in CME credits through questions derived from these articles. For our members in medical school and residency, we plan to push forward with our development of a one-to-one mentoring/advisory service. Finally, Steve Gabaeff, CAL/AAEM immediate past president, has proposed a novel, free legal advisory service to be provided to our chapter members. We have approved the allotment of funds for this and are currently seeking an attorney who can fill this role.

The second question about how we are different was (is) a tougher one. National ACEP and AAEM both have very knowledgeable, talented leaders who are strongly committed to improving and strengthening emergency medicine. We both advocate for fair reimbursement against the onslaught of healthcare budget cuts that loom in the near future. We truly are more alike than we are different. An answer to this question, however, became clear as I read AAEM's call for support of their legislative effort in a sentinel case in Texas. On behalf of one of its members, AAEM seeks to block the takeover of eight emergency department contracts by TeamHealth. This case epitomizes AAEM's struggle to defend the independent emergency medicine physician against being swallowed up by those who promote the corporate abuse of emergency medicine. It is precisely this cause that sets us apart. Quite simply, there is no one else who fights this fight. See www.aaem.org for details about this case and directions about how to further support this cause.

Robert Rodriguez, M.D.