



ED Management Solutions: Principles and Practice

September 5-6, 2019
New Orleans, LA

Exhibitor and Sponsor Opportunities

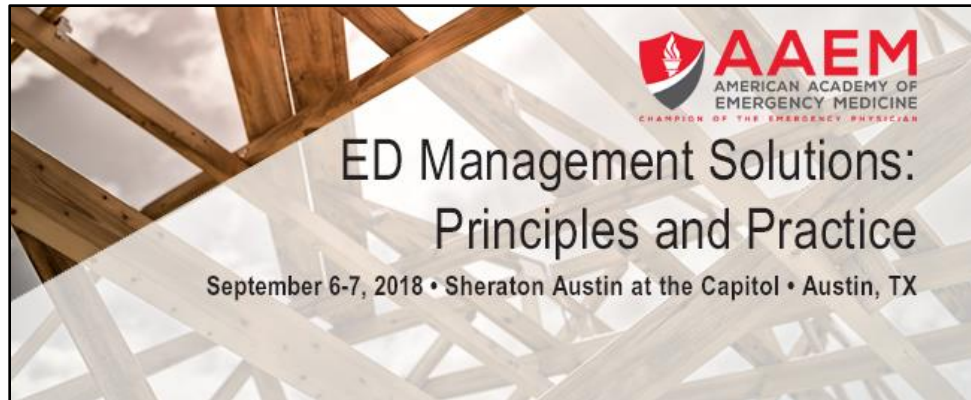
Meeting Information

The 2nd Annual ED Management Solutions: Principles and Practice equips physicians and other health care providers with the tools to improve emergency department management and leadership. Continuing medical education credit is provided to participants.



The course targets a diverse audience of learners, both in terms of professional background and practice environment. The audience is comprised primarily of emergency medicine physicians, board certified or board eligible, residents, and ED administrators.

Meeting History



The inaugural ED Management Solutions: Principles and Practice was held in Austin, Texas on September 6-7, 2018. Revenue exceeded budget, feedback from the attendees was universally positive, and the energy among the attendees was very high. We could not have hoped for a better start.



The planning committee was pleased to see over 40 people in attendance. We are anticipating as many as 50 to 60 attendees at our 2019 meeting.

Hotel Information

Hilton New Orleans/St. Charles Avenue Hotel
333 St. Charles Avenue
New Orleans, LA 70130
(504) 378-2800

Room Rates:

- \$109 per night for single/double occupancy
- \$129 per night for triple occupancy
- \$149 per night for quad occupancy



The Hilton New Orleans/St. Charles Avenue hotel was inducted into the Historic Hotels of America in November 2014. Discover a wealth of jazz and blues venues, entertainment and 5-star restaurants in the nearby French Quarter and Arts District.

Exhibitor Fee: \$1,000

- One 8” deep by 10' wide table located outside breakout rooms
- Exhibitor listing in AAEM’s membership magazine, *Common Sense* (July/August issue)
- Company listing in the final on-site syllabus including company description and contact information
- 15% discount on advertising in *Common Sense*
- Access to networking opportunities throughout the conference and during the Opening Reception

Exhibitor Schedule

Thursday, September 5, 2019

7:30am – 8:00am	Registration & breakfast buffet
9:45am - 10:00am	Break
12:00pm - 12:45pm	Lunch
2:15pm - 2:30pm	Break
5:30pm - 7:00pm	Opening Reception

Friday, September 6, 2019

7:30am – 8:00am	Breakfast buffet
10:00am – 10:15am	Break
12:15pm – 1:00pm	Lunch

To exhibit at ED Management Solutions, please complete the Exhibit Application and Contract on pages 6-8.

Exhibit Application and Contract

CONTACT INFORMATION

List company name, address, telephone, and email as you wish them to appear in the exhibitor listings.

Company Name: _____

Exhibit Coordinator Contact: _____

Title: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____ Email: _____

RESPONSIBILITY CLAUSE

Exhibitor assumes responsibility and agrees to indemnify and defend the American Academy of Emergency Medicine and Hilton New Orleans/St. Charles Avenue, and the Hotel's Owner, and their respective owners, managers, subsidiaries, affiliates, employees and agents against any claims or expenses arising out of the use of the exhibition premises, arising out of the negligence, gross negligence or intentional misconduct of Exhibitors.

The Exhibitor understands that neither the American Academy of Emergency Medicine nor the Hotel Parties maintain insurance covering the Exhibitor's property and it is the sole responsibility of the Exhibitor to obtain such insurance.

Signature: _____ Date: _____

Exhibit Application and Contract

RECRUITING

If your company will be actively recruiting physicians on site, please read and indicate below that your organization is able to adhere to one of the following criteria:

____ I certify that the advertised positions support fair working practices for emergency physicians, one that provides a democratic and equitable work environment including provisions for due process, the absence of restrictive covenants and is not owned directly or indirectly in part or in whole by a lay entity or individual.

____ I certify that the advertised positions are for 1) a hospital, non-profit or medical school employed position, 2) a military/government position, or 3) an independent contractor position rather than owner-partner or employee position, and therefore is not able to be in compliance with the above standards.

____ I certify that I am eligible to sign this form, having knowledge on all points listed above. I agree to notify AAEM, within 30 days, of any changes to our status as listed above which would affect our eligibility to exhibit at ED Management Solutions: Principles and Practice.

Signature: _____ Date: _____

Exhibit Application and Contract

PAYMENT

Total payment must accompany this application. Make checks payable to AAEM or complete credit card information below. If payment is not received, AAEM will not hold booth space.

Method of Payment (check one): Check enclosed VISA
 MasterCard Discover American Express

Card Number: _____ Expiration Date: _____

Cardholder Name: _____

Signature: _____

Return completed application with payment to:

AAEM, Attn: Rebecca Sommer
555 East Wells Street, Suite 1100, Milwaukee, WI 53202
Tel: (800) 884-2236 Fax: (414) 276-3349
rsommer@aaem.org

Sponsorship Opportunities

Opening Reception Sponsorship: \$3,000

- Your company acknowledged on conference signage, in the conference handout, and throughout reception area
- An opportunity to address attendees for 5 minutes at beginning of reception
- Display table near the registration desk, which can be staffed during networking breaks, lunches, and the opening reception

Breakfast and Coffee Break Sponsorship:

\$2,000 Thursday | \$1,500 Friday | \$3,000 both days

- Your company acknowledged on signage on the break tables and in the conference handout
- Display table near the registration desk, which can be staffed during networking breaks, lunches, and the opening reception

Lunch Sponsorship:

\$2,700 Thursday | \$2,700 Friday | \$5,000 both days

- Your company acknowledged on signage on the lunch tables and in the conference handout
- Display table near the registration desk, which can be staffed during networking breaks, lunches, and the opening reception

To become a sponsor at ED Management Solutions, please complete the Sponsorship Request Form and Written Agreement for Commercial Support on pages 10 – 14.

Sponsorship Request Form

Company Name: _____

Sponsor Coordinator Contact: _____

Title: _____

Address: _____

City: _____ State: _____ ZIP: _____

Telephone: _____ Email: _____

Select a sponsorship opportunity below.

- Opening Reception Sponsorship (\$3,000)
- Lunch Sponsorship: Thursday (\$2,700)
- Lunch Sponsorship: Friday (\$2,700)
- Lunch Sponsorship: Both days (\$5,000)
- Breakfast and Coffee Break Sponsorship: Thursday (\$2,000)
- Breakfast and Coffee Break Sponsorship: Friday (\$1,500)
- Breakfast and Coffee Break Sponsorship: Both days (\$3,000)

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MasterCard Discover American Express

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American Academy of Emergency Medicine Written Agreement for Commercial Support

The American Academy of Emergency Medicine is committed to presenting CME activities that promote improvements or quality in health care and are independent of the control of commercial interests. As part of this commitment, American Academy of Emergency Medicine has outlined in this written agreement the terms, conditions, and purposes of commercial support for its CME activities. Commercial Support is defined as financial, or in-kind, contributions given by a commercial interest, which is used to pay all or part of the costs of a CME activity.

Title of CME Activity		ED Management Solutions Principles and Practice	
Activity Location	New Orleans, LA	Activity Date	September 5-6, 2019
Name of Commercial Interest			
Amount of Educational Grant (direct or in-kind)			
Grant will be used for the following:			
Speaker Honoraria	Speaker Expenses (itemize)	Meeting Expenses (itemize)	Other (list)

Terms, Conditions, and Purposes

Independence

1. This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of the Commercial Interest.
2. The Accredited Provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CME, selection of education methods, and the evaluation of the activity.

Appropriate Use of Commercial Support

3. The Accredited Provider will make all decisions regarding the disposition and disbursement of the funds from the Commercial Interest.
4. The Commercial Interest will not require the Accredited Provider to accept advice or services concerning teachers, authors, or participants or other education matters, including content, as conditions of receiving this grant.
5. All commercial support associated with this activity will be given with the full knowledge and approval of the Accredited Provider. No other payments shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.
6. The Accredited Provider will upon request, furnish the Commercial Interest documentation detailing the receipt and expenditure of the commercial support.

Commercial Promotion

7. Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.
8. The Commercial Interest may not be the agent providing the CME activity to the learners.

Disclosure

9. The Accredited Provider will ensure that the source of support from the Commercial Interest, either direct or "in-kind," is disclosed to the participants, in program brochures, syllabi, and other program materials, and at the time of the activity. This disclosure will not include the use of a trade name or a product-group message. The acknowledgment of commercial support may state the name, mission, and clinical involvement of the company or institution and will not include corporate logos and slogans.

The Commercial Supporter and the American Academy of Emergency Medicine agree to abide by all requirements of the Accreditation Council for Continuing Medical Education (ACCME) [Standards for Commercial Support of Continuing Medical Education](#).

Name of Accredited Provider		American Academy of Emergency Medicine	
Tax ID Number		26-3697887	
Contact Person	Kay Whalen	Email Address	kwhalen@aaem.org
Phone Number	800-884-2236	Fax Number	414-276-3349
Name of Commercial Interest			
Address			
City, State, Zip			
Contact Person		Email Address	
Phone Number		Fax Number	

Agreed by Authorized Representatives

Commercial Interest

Accredited Provider

Signature and Date

Kay Whalen

Signature and Date

Print Name

Kay Whalen, MBA CAE

Print Name

Title

Executive Director, AAEM

Title

ⁱ A "commercial interest" is defined as any entity producing, marketing, reselling, or distributing health care goods or services. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.