



Global Emergency Medicine Academy

An Academy of Society for Academic Emergency Medicine

2013 GEMA Newsletter No. 5

The Global Emergency Medicine Academy (GEMA) aims to improve the global delivery of emergency care through research, education, and mentorship as well as to enhance SAEM's role as the international Emergency Medicine organization that augments, supports, and shares advances in global research, education, and mentorship.

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From The President

Scott Weiner, MD, MPH

Thank you to all of you who were able to join us at SAEM this year. I think that, by far, this conference had the most Global EM topics ever! The event started with a hugely successful AEM Consensus Conference in which future research directions for Global EM were established. Congratulations to Drs. Stephen Hargarten, Mark Hauswald, Jon Mark Hirshon and Ian Martin who co-chaired the conference, and everyone else (particularly break-out session leaders) who made it all work. A new agenda for research going forward was set, and we all look forward to seeing the finished recommendations when published.

Our business meeting was successful and highlighted all of the incredible accomplishments of this past year. We gave a warm and well-deserved Thank You to our outgoing president and founded, Dr. Ian Martin, who fortunately for me remains on the board.

In addition to myself (President) and Dr. Martin (Past-President), your new board members are:

Dr. Adam Levine - Vice President

Dr. Bhakti Hansoti - Vice President

Dr. Vicken Totten - Secretary/Treasurer

We also welcome Dr. Jim Holmes, from UC Davis, who is our new SAEM Board of Directors Liaison.

A big THANK YOU to Dr. Michael Runyon for serving as the Chair of Elections. The voting process utilizing YouTube videos and Survey Monkey was unique and successful. I am pleased that Mike has agreed to continue this role.

This year's GEMA awards were presented to five outstanding individuals that we heartily congratulate:

Dr. Gabrielle Jacquet
GEMA Young Physician Award

Dr. Stephanie Kayden
GEMA Humanitarian Service Award

Dr. Janet Lin
GEMA Academic Achievement Award

Dr. Teri Reynolds
GEMA EM Globalization and Advancement Award

Dr. Lee Wallis
GEMA Presidential Lifetime Achievement Award

We then had a fantastic Fellowship Showcase. This session has become one of our regular features and was well-attended. The Showcase gives a chance for 3 fellowship programs to describe their programs, which serves as a recruitment tool and also allows all of us to see the innovative and exciting projects the fellowships are offering. This year's participants were:

University of Massachusetts

Johns Hopkins University

Hennepin County

Look for related articles in this issue.

In case you missed it, all three presentations from the Showcase are now online, at our website.

In fact, if you haven't had a chance to check the website out, please do! Go to SAEM.org, log in, choose the GEMA academy, and you can access a host of documents. Please log on, update your profile – which you can even import from LinkedIn! and take a look around.

We have provided the 2013 Fellowship Showcase presentations and just uploaded the 2012 presentations as well (in case you missed them last year).

The new GEMA Code of Conduct document for

Global EM rotations, formally introduced by Dr. Hansoti, is also there. As a GEMA member, you can also upload documents and videos, such as your lectures that pertain to global EM and important articles pertaining to global EM. We'll also begin recording GEMA lectures and uploading those as well. Conference call agendas and minutes will also be there. The bottom line is that it is recognized that we can't all be in multiple places at once, but if you miss a conference, you'll still have access to the content.

Moving forward, I announced our new committee structure. There are 6 new committees that will "divide and conquer." If you are interested in participating in any of them, please let me know! Please note that you must be a GEMA member in good standing to participate.

The committees are:

Research – This committee will work to develop a “pre-congress” course that can be taken to EM conferences around the globe, sponsored by GEMA. The group will also work with EuSEM and other organizations to co-sponsor meeting research forums. The idea is to host the abstract session of the conference, providing abstract scoring and moderators from GEMA/SAEM. Finally, the group will gather a series of lectures about research methodology that can be given around the world.

Social Media/Brand-building – This committee will work on GEMA's social presence, including content on Facebook and Twitter. It will work on building up GEMA's page on SAEM's website. It will develop a quarterly webinar highlighting global EM projects, and manage the Academy's relationship with Emergency Physicians International.

Mentorship – This committee will liaison with the EMRA/AAEM international sections/IEM Fellowship consortium to provide mentorship opportunities. The group will also identify and publicize available international EM rotations for students/fellows

Grants – The committee will identify sources of funding for EM development/Global Health research. It will maintain a database of these sources, and facilitate/encourage submissions from GEMA members.

Annual Meeting – This committee will work to de-

velop GEMA programming at the Annual Meeting, maintaining the high level of quality. The group will select the next participants of our Fellowship Showcase, organize the didactic proposals coming from GEMA, and select an additional hour of programming for the business meeting.

EM Education Task Force – This group is initially charged with developing the “Blank Background” powerpoint project that contains ~50 canned lectures covering core content of EM that can be easily translated and exportable to other settings

The day after the business meeting, we held GEMA's two sponsored didactic sessions. They were both very well-attended and appreciated. The first session was co-sponsored by GEMA and AWAEM, entitled “Life and a Career in Global Health: Can You Have It All?” The hour long discussion featured Drs. Stephanie Kayden, Tracy Sanson and Bobby Kapur and was expertly moderated by Dr. Bhakti Hansoti. Numerous tips about balancing life and an academic career were shared! The second session was co-sponsored by GEMA and the Global Emergency Medicine Literature Review. Drs. Adam Levin and Gabrielle Jaquet shared the top 10 global Emergency Medicine articles from 2012. I found the studies they shared to be innovative, at times practice-changing, and inspired further ideas for study.

As you can see, GEMA is really heating up! We're finally going to get a lot of projects done that we have talked about for years, and raise the bar even higher for Global EM.

Because many GEMA members are going to be busy writing up the Consensus Conference papers, the next conference call will take place in late July (more info to come). But for now, thank you for your loyal membership and feel free to contact me at any time at sweiner@massmed.org with suggestions/ideas/questions.



From The Editor

Vicken Totten, MD



Welcome home from SAEM 2013. As always, SAEM's annual meeting was very exciting. International aspects of Emergency Medicine were represented each day. Yes, a 'sea-change' has happened. SAEM is moving towards globalization. I'd like to talk a little about the Globalization of Emergency Medicine and the role of SAEM.

As the world shrinks, everything is local again.

The world has gone global in such a short time that not all medical societies have kept pace. SAEM, on the other hand, has embraced its role as the world organization for academic emergency medicine.

Founded 1989, SAEM was "American" by accident of birth. However, SAEM was never meant to a country-specific organization. The name says it all: we are a society of academicians interested in emergency medicine. SAEM is the natural home of emergency academicians anywhere in the world. SAEM is the place to go to if you want to learn about creating an EM specialty training program; SAEM is the place to learn about how to do research in EM; SAEM should be the place you look if you want a collaborator from another country for your project. SAEM is the place to learn about academic emergency medicine.

The "Global Emergency Medicine Academy" (GEMA) is now 2 years old. GEMA's mission statement is:

- To improve the global delivery of emergency care through research, education, and mentorship
 - To enhance SAEM's role as the international emergency medicine organization that augments, supports, and shares advances in global research, education, and mentorship
- This year, we reached an important maturational milestone. The founding president, Ian Martin, MD, has stepped down, and Scott Weiner, MD has taken his place at the helm.

What have we accomplished in our lifetime?

Dues reduction: GEMA's proudest accomplishment so far is to tie the cost of SAEM dues to country of practice. Member dues are proportional to the Hinari World Bank classification for median income by country. SAEM will be more affordable for EM academicians from lower income countries.

Multinational Trainees: GEMA has collaborated with EMRA, to offer scholarships to senior EM trainees from non-US countries to attend the Chief Resident's forum during the annual SAEM meeting. The first 2 recipients will attend SAEM in May 2012.

Safety Abroad: CORD, EMRA and GEMA are concerned about the safety of trainees sent abroad. The Safety Abroad Consensus Paper has been published. See our webpage.

Endorsing regional conferences: SAEM/GEMA is one of the endorsers of the First Global Network Conference on Emergency Medicine, which was held in Dubai, UAE, 13-17, January 2012. We sponsored a delegate to the African Conference on Emergency Medicine, held in Ghana in November of 2012.

AEM Consensus Conference 2013: GEMA helped organize and sponsor the 2013 Consensus Conference on Global Health and Emergency Care: A Research Agenda. Watch for papers from the conference.

EuSEM Collaboration: This year featured the 2nd Annual "Best of EuSEM Research Abstracts."

EPi Collaboration: EPi is the current social networking partner for GEMA. GEMA will be contributing articles to EPi and in return, EPi will offer a secure chat area for academicians throughout the world.

In SAEM, there is a place for all the researchers and teachers of emergency medicine. GEMA is driving the expansion across borders.

The African Federation of Emergency Medicine **“Supporting Emergency Care Across Africa”**

Teri Reynolds, AFEM Scientific Committee Chair

The African Federation of Emergency Medicine (AFEM) was founded 2009, partnering with the Emergency Nursing Society of South Africa (ENSA). Representing one of the world's poorest areas, AFEM runs on very low overhead, funded almost entirely by the University of Cape Town, Stellenbosch University, and in-kind donations from the EMS system of the Western Cape government.

AFEM activities are greatly expanding. AFEM is grateful for donations from more developed countries. Dr. Reynolds hopes emergency physicians in developed countries would consider donating the income from a single shift to help get educational materials and research support out to as many providers as possible. Donated funds will be used to cover material costs only. 3 priority projects are:

1. The AFEM Handbook of Emergency and Acute Care. This book is designed to be used by a range of providers, targeted to available resources and the burden of disease in the region, and is slated to come out in November 2013. Funding will help cover production and distribution of 8000 hard copies of the book to 2000 clinical sites in 40 countries where the availability of devices to use an electronic version is limited.

2. Small grants (\$1,000-5,000) to support emergency care research projects for African trainees. High quality, high-impact research can be produced with very little funding in many clinical settings in Africa. The regional burden of disease is severely under-documented. Your single-shift donation can provide enough research to generate practice-changing data.

3. Dissemination of the AFEM educational materials emerging from the AFEM Consensus Conference on Emergency Medicine in Africa, currently including the framework for emergency nursing and the AFEM one-year EM curriculum.

Contact information: teri.reynolds@ucsf.edu
AFEM president Lee Wallis (lee.wallis@afem.info)

Email a pledge of your support and we'll get you the information to make your tax-deductible donation. Let us know if we can answer any other questions about AFEM projects.



The WONDOOR Program in Women's Health

Katie Might, MD

WONDOOR (pronounced "one door") is an innovative global health program, located at University Hospitals/MacDonald Women's Hospital in Cleveland, Ohio. The core belief of the program is that women should have the same opportunity to receive quality health care whether they are living abroad or in our own backyard.

The WONDOOR program seeks to collaboratively reduce maternal and neonatal morbidity and mortality rates through academic enrichment of medical students, nurses, residents and faculty in under-resourced communities both in the United States and abroad. It accomplishes this through several different initiatives: The Global Health Scholars Program, the Global Women's Health Fellowship, International Residency Programs and Research.

Created by Dr. Margaret Larkins-Pettigrew in 2010, the WONDOOR Program works in the United States and abroad. Currently, a select group of eleven UH Ob/Gyn residents comprise the Global Health Scholars, a group that completes an additional curriculum concurrently with the UH OB-GYN resident curriculum. Additionally, several faculty and staff members from UH and other academic medical institutions travel to Georgetown Public Hospital (GPHC) in Georgetown, Guyana to assist in the teaching of the Ob/Gyn residency program.

The Ob/Gyn residency program at Georgetown Public Hospital was created by WONDOOR, GPHC, Ministry of Health-Guyana and the University of Guyana in 2012. It is the first Ob/Gyn residency program in the country of Guyana. It is a sustainable post-graduate education program that seeks to reduce 'brain drain' while reducing maternal and neonatal morbidity and mortality.

After the completion of the first year of the program, there are promising results that demonstrate the effectiveness of this model.

For more information about the WONDOOR Program please visit:

<http://www.uhhospitals.org/macdonald/education/won-door-global-health-program> or contact Dr. Larkins-Pettigrew directly at Margaret.Larkins-Pettigrew@UHHospitals.org or 216-286-2297.

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WONDOOR

Fellowship Showcase at SAEM 2013

GEMA presented the 2nd Annual Fellowship Showcase at SAEM 2013. This year's 3 were the Hennepin County Medical Center's Fellowship in International Emergency Medicine, the Johns Hopkins International Emergency Medicine and Public Health, and the University of Massachusetts Global Health and International Emergency Medicine Fellowship.

Hennepin County Medical Center's Fellowship in International Emergency Medicine
Dr. Stephen Dunlop (stephenjdunlop@hotmail.com)

Hennepin County's Fellowship was presented by Dr. Stephen Dunlop. Dr. Dunlop's focus is on East Africa. He said, "Our program at HCMC is based on a review of the IEM literature and then plays on the strengths found at HCMC and the University of Minnesota. In a nutshell," he continued, "the program is designed to be a 2-year fellowship that includes an MPH or other Master's level education as well as completing a course that qualifies you to sit for the American Society of Tropical Medicine and Hygiene exam."

He described the default course as the "U of MN/CDC's Global Health Course". The program can be tailored to the needs of each of the Fellows. The 'abroad experience' is a minimum of 3 months, but ideally, closer to 6 continuous months. However, there are many other options. One major focus of the Fellowship is to specifically address the oncoming epidemic of trauma and non-communicable diseases in the developing world.

"Just as our infectious disease colleagues took ownership of malaria and HIV," said Dr. Dunlop, "we feel it is the responsibility of International Emergency Medicine to take ownership of this predictable burden of disease. After all, trauma and non-communicable diseases fall squarely into our niche!" International EM programs are part of how the U of MN hopes to reduce the burden of disease.

Dr. Dunlop went on. "One aspect that makes our Fellowship unique is that the fellow is encouraged to bring to the program their own ideas, dreams and connections. They have the opportunity to create their own site and project. The idea is not to pigeon-hole fellows into doing a project that interests the fellowship more than it interests the Fellow."

"We are actively involved in multiple projects across East Africa. We facilitated the opening of a new "urgent care" center that sees about 70,000 visits per year and are now continuing into the second phase of the project that will allow for the education of Tanzanian interns and non-physician clinicians in acute care medicine. We are also involved with a large NIH funded grant doing ultrasound research in patients with cryptococcal meningitis and HIV in Kampala Uganda with Infectious Disease colleagues. Our fellowship's multidisciplinary connections certainly are a major unique strength."

Since the HCMC has an established program in Tanzania, Fellows interested in that part of the world are especially welcome. But Dr. Dunlop feels strongly that the Fellow should be passionate about the work. If not, that Fellow is unlikely to build a lasting connection with the project. Therefore, Dr. Dunlop concluded, "We would rather have a Fellow working in a different part of the world, than to have a disinterested Fellow!"

Along with the 3 basic components, the program encourages fellows to delve into areas of interest including EMS, Disaster, Ultrasound etc. He says that HCMC has world-renowned experts in several fields who have agreed to mentor the Fellows as much or as little as desired.

So far, all of the HCMC graduates have found suitable niches. One previous Fellow now heads up the Fellowship. A second Fellow was externally recruited and will start July 2013.

Johns Hopkins International Emergency Medicine and Public Health

Alexander Vu MD. (Avu3@jhmi.edu)

Fellowship Showcase at SAEM 2013

cont.

The Johns Hopkins International Emergency Medicine and Public Health Fellowship Program was presented by Dr Alexander Vu. This program has sites in many countries, including in Uganda, Columbia, India, Afghanistan, South Africa, and Ethiopia.

The aim of the Fellowship is to develop academic leaders in global health development, humanitarian assistance and research. International health work is an integral program of emergency medicine at Johns Hopkins. The Department of Emergency Medicine has formed a partnership with the Johns Hopkins Bloomberg School of Public Health (JHSPH) to work with the Center for Refugee and Disaster Response (Department of International Health), and the Center for Public Health and Human Rights (Department of Epidemiology) and the Center for Global Health.

Fellows and residents work within these centers to develop and apply hands-on skills in research, field epidemiology, and program management focused on humanitarian assistance, international health development, and emergency health development.

Academic expectations are several. Dr. Vu said, "We expect leadership, funding, research, publication and completion of a MPH in addition to participation in field work." He added, "Fellows are encouraged to step into national leadership positions. Several have."

Since funding is a pivotal component to a successful career in global health, Fellows are expected to write at least one grant before completing the Program. They are also expected to complete an MPH at the JHSPH, and to develop a strong research base. All fellows are required to have completed a least one peer review publication before program completion.

Field Work: The Johns Hopkins program has strong ties with the school of public health. This not only allows Fellows to participate in mentored projects from within the School of Public Health, but also,

the various Centers within the SPH offer collaborations with a wide range of networks outside of Hopkins as well.

Several fellows have worked with various on-going studies focused on refugee health. This has given them access to qualitative and quantitative research methodologies. Each Fellow's program is tailored to the Fellow's interests to facilitate field experiences with our various international NGO partners such as RLP, IRC, Mercy Corps, MedAir; and UN partners such as WHO and UNHCR.

Clinical Requirements: Fellows are also practicing emergency physicians. Dr Vu explained that the Fellows develop their clinical acumen in a "center of excellence" at the Johns Hopkins department of emergency medicine, where they learn from leaders in the field of Emergency Medicine.

Teaching: Fellows participate in resident education and are given teaching attending opportunities. The clinical aspect of the fellowship is structured so that fellows continue their professional development in both a community and urban setting.

University of Massachusetts Global Health and International Emergency Medicine Fellowship
Mark Bisanzo MD (mbisanzo@gmail.com)

Mariah McNamara MD, presented the U Mass program at SAEM. Dr. Mark Bisanzo wrote about the program, below.

The University of Massachusetts, Department of Emergency Medicine is excited to offer a fellowship in Global Health and International Emergency Medicine. The fellowship was founded in 2011 and focuses on training fellows in Emergency Care Systems and Education Development in low-income countries, with a strong emphasis on sustainability. The fellowship is partnered closely with the Global Emergency Care Collaborative (GECC). While still a young program, the U Mass program has the advantages of a strong project base which was developed over the past 8 years. It is hosted within an established Department of Emergency Medicine with a solid track record of excellence.

Fellowship Showcase at SAEM 2013

cont.

The Fellowship is a two-year format, with an option for a 1-year format for those who already hold an advanced degree. Emphasis is placed on developing clinical expertise, gaining practical field and research experience, mastering public health concepts, and strengthening skills as an educator. The main non-US site is located in Uganda and focuses on building a task-shifting program. The Fellow assists with physician - level training in emergency care, in order to develop a model of a sustainable emergency care system that can be replicated in other low-income countries.

Other sites with similar programs are in development. Fellows will gain experience in non-profit management, as well as program development and expansion. Active research interests and projects include defining the epidemiology of acute care in low-income countries, patient outcomes when acute care is provided by non-physician clinicians, the role of bedside ultrasound in resource poor settings, and injury patterns and trauma outcomes in rural areas of sub-Saharan Africa.

Dr. Bisanzo wrote that the U Mass ED offers significant grant-writing and research support for Fellows, and strongly supports its fellowship. The U Mass Medical School has also dedicated significant resources to Global Health, including developing an Office of Global Health. The Office of Global Health coordinates efforts from multiple departments throughout the University. The International Fellowship is working collaboratively with the Office of Global Health to integrate into other clinical sites abroad. The Department of Emergency Medicine has strong affiliations with Global Health, Toxicology, EMS, Disaster, Ultrasound and Research.

As part of the program, Fellows participate in developing and implementing educational curricula for residents, faculty, and medical students in other countries. The medical school has a Global Health tract in which medical students can elect to participate. The ED is actively involved in de-

veloping this track further, and are designing a specialty tract for the residents with strong interests in Global Health, as well designing and implementing a curriculum that will cover Global Health topics in which all emergency physicians need expertise (HIV and TB care, vaccine preventable diseases, fever in returned travelers etc.).

Fellows receive a competitive compensation package, including funding for an advanced degree (MPH, DTM&H etc.) and a CME/Travel stipend. MPH may be obtained at either U Mass or other regional programs.

Like the other programs listed, U Mass is participating in the IEM Fellowship Consortium, and the application is through the website. For further information or if you have any questions, please contact:

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GEMA Membership

Holly Gouin, MBA

Don't forget, your GEMA dues do not automatically renew. You need to let the SAEM office know you wish to continue your membership prior to your membership expiring. This will ensure there is no interruption in your ability to communicate with other GEMA members. If you are part of a Faculty Group or a Residency Group, ask your Administrator or Program Coordinator to renew your GEMA dues for you. This saves time and ensures you won't miss any of the latest news coming out to GEMA members.

2013 GEMA Dues as of 07/1/2013

Attending Physicians - \$100.00
Resident/Fellows - FREE
Medical Students - \$25.00



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