

PACEP NEWS

SUMMER 2025



Elizabeth Barrall Werley, MD, FACEP
PACEP President 2025-2026

EXECUTIVE PRIVILEGE

"Summer, summer, summertime Time to sit back and unwind"*

By Elizabeth Barrall Werley, MD, FACEP

When I think of summer, this song inevitably pops up in my head—and what a summer it's been so far! We've seen stretches of beautiful weather punctuated by unseasonably cool spells, intense heat waves, and frequent storms. That unpredictability feels a lot like life in emergency medicine: brief lulls followed by sudden bursts of high volume and acuity. But summer also offers a chance for many of us to take some much-needed downtime — a well-earned break to unwind from the fast-paced world of emergency medicine. While PACEP's major events are more visible in the spring and fall, rest assured — we've remained hard at work this summer. Here are just a few behind-the-scenes highlights of what we've been doing on your behalf.

ACEP engagED: I hope you're getting familiar with the new and improved ACEP engagED platform, launched in June and available on both the website and mobile app. I may be a bit biased — as a member of the ACEP Membership Committee, I had the chance to be a part of this project — but I truly believe it's a great opportunity for our chapter. Our chapter page now offers easy access to all our members, making it easier than ever to connect. We encourage you to join discussions, respond to polls, share announcements, or even start your own threads. We're working on building out the events calendar. Because the platform is password-protected through your ACEP login, we can now also securely share resources and documents just for you, our members.

Scientific Assembly: Preparations are already underway for next year's Scientific Assembly, with the Call for Speakers launched in July. Program Chair Dr. Jason Burkett and Vice Chair Dr. Chelsea Kon are leading the charge to deliver another impactful conference filled with meaningful content and opportunities to connect. This year's theme, *Our Community: EM Practice in PA*, is especially meaningful to me, having made the transition from community practice to academics years ago. This Scientific Assembly will offer something for all of our members. We encourage you to get involved — whether by earning CME as an attendee, lecturing, or submitting a CPC case, case discussion, research poster, or clinical image.

ACEP Council: As many of you know, ACEP Council and Scientific Assembly are earlier than usual this year, which added pressure to get a great deal done in a short time.



This Scientific Assembly will offer something for all of our members. We encourage you to get involved — whether by earning CME as an attendee, lecturing, or submitting a CPC case, case discussion, research poster, or clinical image.

* *Summertime*,
DJ Jazzy Jeff and the Fresh Prince, 1991

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An Emergency Medicine Career At WellSpan Health

Supportive Community and Team Focus:

WellSpan Health is demonstrating its commitment to Carlisle, Newberry and Shrewsbury, Pennsylvania through the opening of a Neighborhood Hospitals. This site will feature a state-of-the-art fully licensed Emergency Department. The expansion goes beyond just building new facilities; it's about enhancing community health by ensuring immediate care is readily available.

At WellSpan Health, our community of 23,000 employees, including more than 2,300 physicians and advanced practice providers, shares a common vision and mission. We're cultivating medicine's next generation of innovators and leaders as we transform the health of the communities we serve in Central Pennsylvania and Northern Maryland.

Vision for Emergency Care:

- Passion in emergency medicine is essential for this new innovative project
- We are seeking Board Eligible/Certified Emergency physicians to join our teams
- Enjoy quality of life! (six 24-hour shifts / twelve 12-hour shifts)
- Supported by a proactive team dedicated to your success

Our Total Rewards package includes:

- Physician-Designed Compensation Model
- Competitive Signing Bonus and Increased Educational Loan Repayment
- Six weeks scheduled time off (STO)
- Retirement savings plan
- \$4,500 CME Allowance
- Comprehensive health benefits with spending and savings account options
- Employer paid benefits that include relocation expenses, malpractice coverage including tail and dedicated help for caregivers via Wellthy.

Locations include:

- Carlisle, PA
- Newberry, PA
- Shrewsbury, PA

A place to call home:

You'll feel at home in our sophisticated medical community in the heart of Central Pennsylvania. The WellSpan service area offers picturesque countryside, engaging historical attractions, excellent schools and low cost of living-all within reach of Philadelphia, Baltimore and Washington, D.C.

Connect Confidentially:

Elyse Chadderdon, Physician Recruiter
echadderdon@wellspan.org
570-522-2739

JoinWellSpan.org/EMCareers



2025–2026 PACEP Board of Directors

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Vice President	Holly Stankewicz, DO, FACEP
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Zeenah Mansour, MD (Geisinger)
Julia Moore, DO (WellSpan)

Leadership Fellow

Zinta Zapp, MD, FACEP

Executive Director

Brenda Dill

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Board Liaison	Alexandra Amaducci, DO, FACEP

Wellness/Young Physicians

Co-Chair	Michelle Appel, MD
Co-Chair	Jennifer Spinozzi, MD, FACEP
Board Liaison	Meaghan Reid, DO, FACEP

► We need your voice! [Join a committee](#), today!

Future PACEP Scientific Assemblies at Kalahari Resorts & Conventions, Pocono Manor, PA

2026: April 30–May 2

2027: May 6–8

2028: May 4–6

**SAVE
THE
DATES**



WELCOME NEW PACEP MEMBERS

Halstead Abney
Kristen Adorno
Noelle Ahmed
Shihab Ahmed
Matthew Christopher Ainsley
Murtaza Akhter
Ayman Sujayet Alam
Alyssa C. Alloy
David Aloisio
Darius Argentinis
Callie Arnold
Ali Assad
Madalyn Quinn Bartels
Sarah Blakley
Glenn Bower
Justine Faye Busby
Rachel Butler
Danielle Buzzacco
Kyrie Luck Cassin
Isabela Caulkins
Jaspreet Chahal
Nneka Chukwueke
Ian Collier
Joseph Patrick Corcoran
Serena Shay Dalsimer
Adena Ashanti David
Garrison Davis
Parker Ross Davis
Joel Stephen De Rosa
Anthony T. Dean
Michael Anthony DeCarli
Timothy William DelPiero
Amanda J. Deutsch
Jacob Dewey
Mario W. Deyulis
Abhay S. Dhillon
Mia DiFrancesco
Nicholas Donaldson
Michael Dubinski
Jaskiran Dulai
Samaa T. El-Kolalli
Coty Raymond Emerich
Salahi Engin

Pegeen W. Eslami
Matthew Estrellado
Holly Everett
Yetunde Fabiyi
Julianna Victoria Fairchild
Felicia Finnegan
Ashley Fischer
Peter Scott Foradora
Ryan Ford
Dustin Fowkes
Lisa M. Friedland
Kelsey Fuchs
Mary E. Gallo
David Garyantes
Aria Ghahramani
Shawna Gloe
Alejandro Gomez
Liza Monica Gomez
Peter Grella
Edward Guo
Abraham Ha
Daniel Haas
John J. Haber
Terrence Habiyaremye
Victoria Harrison
Robert Hartman
Logan Hellinger
Claire Helmick
Kiersten Hepp
Gabriel Herman
Christopher Hernandez
Cole Alden Herrin
Madelyn Hicks
Tiffany Ho
Clinton J. Hobson
Samuel Robert Hornberger
Sarah Grace Hunderup
Steven Anthony Celleros Iglesias
Caroline M. Illuzzi
Kyle Mark Irzyk
Nicole Jaycox
Joseph Jessee
Trevor Chief Johnson

Ahsan Masood Khan
Joshua Kiddish
Chelsea Elizabeth Kon
Katherine Kornilow
Vishal Krishnan
Leah Krzemien
Annette Monica Krzyzanski
Nicole Lashiker
Jason William Leonardo
Carl Levy
Scott Hunter Livingston
Jonathan Thomas Luciani
Helen Rubing Luo
Lindsay MacConaghy
Zachary J. Mackey
Joshua Daniel Madera
Marcus Magley
Nickolas Malize
Joy McLaughlin
Ashley Meghan McLenithan
Cameron Mertz
Jeffrey Andrew Miles
Ang Miller
Stephanie Miller
Alexa Mae Mills
Zainab Aslam Mirza
Madison Morgan
Brendan E. Morgans
Julia Mrowiec
Franciscus Jacobus Muller
Evan Nelson
Andrew John Ophus
Javed Zahed Osmani
Elise Ann Oswald
Thomas Parker
Rachel Patterson
Laura Peller
Scott Plasner
Gabrielle Ramirez Rivera
Joseph Robert Randazzo
Dylan Brandon Resnick
Madison Lynn Robinson
Josh Michael Rovner

Michael Rowland
Laura Sohren Ruggiero
Julia R. Schiff
Jessica Ann Schumann
Jacobus Schutte
Celeste Schwartz
Jacob Schwell
Tyler William Seal
Sara Selinsky
Kylee Shivok
Alex Siegel
Anmol Singh
Sean Patrick Smith
Daniel Snediker
Jesly Solaman
Jay F. Spangler
Joseph Stefanski
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Shawn Michael Stuart
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Irbert Vega
Ravina Verma
Alvin Wang
Ian Wieczorek
Scott Williams
Benjamin Winkler
Rachel Worcester
Ratan Pal Yadav
Joseph Zwillenberg

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Kudos to our Immediate Past President, Dr. Jennifer Savino, for her leadership in organizing and guiding our delegation through what I'm confident will be another successful year for Pennsylvania! Our delegation drafted nine resolutions, in addition to five memorial resolutions. We ultimately withdrew four — considered wins, as their goals are now being directly addressed by ACEP committees or leadership without the risk of being amended or voted down at Council. Of the remaining five, we secured multiple co-sponsorships from other state chapters and ACEP Sections. PACEP is also co-sponsoring another chapter's resolution. We're also proud to share that our former Executive Director, Jan Reisinger, will receive the Diane K. Bollman Chapter Advocate Award, to be awarded during the Council meeting.

From drafting resolutions and gathering co-sponsors to participating in Reference Committee meetings and developing asynchronous testimony, I'm incredibly proud of the work our delegation has done — and I'm confident they will represent PACEP well at Council.

Pennsylvania Department of Health: Did you know PACEP has been working directly with the Pennsylvania Department of Health and other healthcare organizations to address ED overcrowding? Beginning in June 2024, PACEP joined forces with the Pennsylvania Medical Society (PAMED) and the Hospital and Healthsystem Association of Pennsylvania (HAP) as part of a DOH-led initiative to investigate and improve ED overcrowding. PACEP had full representation on every working group, with either Dr. Jennifer Savino or myself attending every meeting and other PACEP leaders strategically assigned to working groups. Two of our members served as group leads — Dr. Chris Berry led the EMS/Prehospital group, and Dr. Blake Bailey led the Transfer to External Facilities group. This summer, the full task force reconvened to compile recommendations, which will be sent to Governor Shapiro in the coming months. The Department of Health has expressed sincere appreciation for PACEP's active involvement, and we hope this collaboration opens the door for continued partnership in the future.

CRNP Scope of Practice: As many know, a bill was introduced in 2019–2020 to establish a Certified Registered Nurse Practitioner (CRNP) Pilot Program in Pennsylvania. Since our last newsletter, there has been renewed interest in the program — with proposed changes that further reduce restrictions and expand CRNP scope of practice. PACEP responded swiftly by submitting a letter of opposition to Chairmen Burns and Emrick of the House Professional Licensure Committee, highlighting the potential impact on patient care and emergency

departments statewide. We remain committed to opposing legislation that threatens the quality and safety of patient care. If this or similar bills gain momentum, please watch for a call to action from PACEP to contact your local legislators.

PACEP Reaffirms EMTALA: The Emergency Medical Treatment and Labor Act (EMTALA) came into focus in June following CMS's June 3, 2025 decision to rescind the July 2022 EMTALA guidance, with a subsequent clarification issued on June 13. We hope you saw PACEP's response, which we shared on our chapter's page on ACEP's engagED platform. If you haven't seen it yet, please log into engagED to review our full statement. As we stated in our letter:



In Pennsylvania, where legal landscapes around reproductive care may shift, we urge policymakers to ensure that state law does not conflict with the federal protections enshrined in EMTALA. Emergency physicians must be able to practice without ambiguity, assured that stabilizing care is legally protected and institutionally supported.

BOARD OF DIRECTORS

June 2025

EMTALA

The PACEP comm...

Following the June 3, 2025, decision by the Centers for Medicare & Medicaid Services (CMS) to rescind the July 2022 guidance on the Emergency Medical Treatment and Labor Act (EMTALA), and subsequent clarification issued on June 13, we wish to emphasize that EMTALA remains the law of the land. Its protections are unchanged and unequivocal: emergency departments must provide appropriate stabilizing care to any patient in need, including those experiencing complications from pregnancy such as ectopic pregnancies, miscarriages, or hypertensive disorders.

As the Pennsylvania state chapter of the American College of Emergency Physicians (ACEP), PACEP echoes ACEP's June 4 statement affirming the enduring obligations and ethical responsibilities of emergency physicians. These responsibilities transcend political shifts and are grounded in the principle that no patient in crisis should be denied time-sensitive, life-saving care.

We also applaud CMS for clearly acknowledging that prior conflicting federal guidance had generated legal ambiguity. Their current clarification rightly centers patient safety and reinforces the clinical judgment of emergency physicians made in conjunction with their patients, without fear of reprisal or legal confusion.

"We chose medicine to care for others—and we chose emergency medicine to provide that care 24/7/365, often during the most critical and vulnerable moments of our patients' lives. Decades ago, EMTALA affirmed a core principle: that every individual deserves access to emergency care, regardless of circumstance. My colleagues and I remain unwavering in our commitment to every patient who seeks care in our emergency departments across the state, including those experiencing complications of pregnancy. We will continue to assess, stabilize, and treat these patients to the fullest extent of our training, and ensure timely handoff to our specialty colleagues for definitive care." — Elizabeth Barrall Worley, MD, FACP, PACEP President

In Pennsylvania, where legal landscapes around reproductive care may shift, we urge policymakers to ensure that state law does not conflict with the federal protections enshrined in EMTALA. Emergency physicians must be able to practice without ambiguity, with the assurance that stabilizing care will be legally protected and institutionally supported.

About PACEP

PACEP is the voice of emergency medicine in Pennsylvania. Our mission is to promote the highest quality emergency care and to protect the rights of physicians and patients through advocacy, education, and leadership. For more information, visit www.pacep.net or contact us at exec@pacep.net.

Take Home Medications Bill: When you discharge a patient from your ED overnight, on weekends, or holidays, do you know if they can access a pharmacy to fill their prescriptions? Can your patients take home the inhaler used to treat them in the ED, or similar medications that come in multi-dose dispensers? In my practice in Central PA, only two pharmacies in the area are open 24/7 — assuming patients have transportation to even get there. In more rural areas, options may be even more limited.



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Harrisburg, PA 17102

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June 20, 2025

To:
Representative Benjamin Sanchez
311 Iris Office Building
Harrisburg, PA 17120-2153

Chair Dan Frankel
House Health Committee
152 Main Capitol Building
Harrisburg, PA 17120-2022

Chair Kathy Rapp
House Health Committee
312 Main Capitol Building
Harrisburg, PA 17120-2065

RE: PACEP Supports the June 17 Amendment to HB 446 PN 424 and the Underlying Bill

Dear Representative Sanchez, and Chair Frankel and Rapp,

The Pennsylvania College of Emergency Physicians (PACEP) commends the General Assembly and sponsors of House Bill 446 for their continued commitment to improving patient access to necessary medications post-discharge. We are particularly appreciative of the bill's expansion of eligible medications to include commonly administered topical treatments and emergency inhalers among others, which emergency physicians have long dispensed or recommended for at-home use. As frontline providers, emergency physicians are uniquely educated and trained to initiate effective and timely treatment. Enabling patients to take home medications that were initiated during emergency care — particularly when those medications are short in course and essential for ongoing treatment — is a logical, patient-centered and cost-sensitive extension of our care. We also support the waiver of pharmacy counseling requirements when the medication is administered in an emergency department, and prescriber counseling is directly provided. Emergency physicians are well-equipped to provide this counseling to ensure patient safety.

Request for Controlled Substance Exception — 12-Hour Supply

While we strongly support the provisions currently contained in the amendment, we respectfully request consideration of a limited and clearly defined exception to the prohibition on take-home controlled substances.

As one example, many patients present to EDs with acute pain from injuries such as broken bones. Often, these patients arrive during off-hours when pharmacies are not open. To provide proper care, it is medically necessary and appropriate to provide ongoing but short-term pain management medication to those patients as a bridge until they can fill a prescription during pharmacy business hours.

certain Schedule IV

instances:

visit

otherwise impractical.

2.

mitigate risks associated

distribution of

large instructions, and

care transitions

and controlled substance

specifically for patients

Frankel and Rapp, on

legislators to discuss critical issues facing emergency physicians across Pennsylvania. Your participation is vital to making this event a success. If you're interested in joining us, please respond to the poll on our PACEP page in ACEP's engaged to help us with planning. We hope this event will engage members across the state and strengthen our role as the voice of emergency medicine in the Commonwealth. Stay tuned for more details, including official sign-ups!

Coffee Talks: Our Coffee Talks with legislative leaders will resume this fall. These sessions, moderated by your PACEP leaders, offer a unique bipartisan forum to discuss issues relevant to emergency medicine. Grab a cup of coffee and join us at 9am on Monday, September 15 when we sit down with the executive directors of the House Health Committee.

If there's a specific legislator you'd like to hear from — or a topic you'd like us to cover — please let us know. We're always looking for ways to make these conversations more impactful and relevant to you.

PEP-PAC: We can't do this advocacy work without your support! We recently discovered issues with our PayPal donation link for PEP-PAC, which may have made it harder for members to contribute — I truly hope we didn't miss out on your support because of this! To streamline the process and reduce transaction fees, we transitioned our fundraising to the Givebutter platform. Every donation — big or small — makes a difference. From medical students and residents, to junior faculty and seasoned physicians, we encourage you to [donate](#), and consider setting up a monthly contribution to help sustain our efforts year-round. As you've seen throughout this update, PACEP has been hard at work on behalf of our members. Your support helps make that possible, and for that, we thank you. ■



PACEP has been working behind the scenes to address this issue. Initially raised by the Pennsylvania Academy of Ophthalmology to reduce medical waste, costs, and improve access, they approached us and we recognized this challenge directly impacts emergency care during off-hours when we're often the sole point of contact. Since that first meeting, PACEP leaders have engaged with stakeholders — including lawmakers and healthcare organizations — and some of our recommended changes have been incorporated into the proposed legislation, HB 446, expanding the list of facility-provided medications. We will continue monitoring this bill and may advocate to expand approved medications in the future, ensuring patients receive continued and necessary care at home after ED discharge, before pharmacies open.

Proactive championing legislation and/or regulations: In addition to shaping existing bills, PACEP wants to be proactive and explore new legislative opportunities. Our leaders and Governmental Affairs committee have been working closely with our lobbying team to identify issues critical to emergency medicine. We're in the early stages, but momentum is building, and we're optimistic this initiative will gain traction. We believe every patient deserves access to high-quality, physician-led care, and we want to champion change that supports this belief. Stay tuned for updates and opportunities to support this effort.

Harrisburg Hill Day: Mark your calendars for October 28, 2025 — PACEP is going to the Hill in Harrisburg! We're partnering with our lobbyists at Bigley & Blikle to secure meetings with

PACEP Advocacy Update

By Bigley and Blikle, LLC



Jonathan P. Bigley
Partner, Bigley & Blikle



STATE BUDGET UPDATE

The Commonwealth's long, hot summer continues with no state budget enacted. The General Assembly remained in voting session until mid-July, and then returned to Harrisburg in mid-August, but a final budget accord was not reached. On July 14, the majority House Democrats pared down Governor Josh Shapiro's \$54 billion proposal to approximately \$49.9 billion and passed HB 1330 on a mostly party line vote of 105-97. In an effort to jumpstart negotiations and to send a strong message on fiscal restraint, the majority Senate Republicans stripped all but \$12 million for rape crisis centers from HB 1330's provisions and reported the bill from Senate Appropriations Committee by a 16-6 margin on July 16. Senate Majority Leader Joe Pittman reconvened the Senate nearly a month later and on August 12, passed on a party line vote SB 160, a nearly \$46 billion spending plan that is exactly the same as the Fiscal Year 2024-2025 state budget. The gap separating the Republicans and Democrats seems now set at approximately \$4 billion. In the dog days of summer, no one in Harrisburg believes cooler heads will prevail and resolve this budget impasse. While most state services continue and state employees receive their pay while no state budget is adopted, Commonwealth contractors, school districts, and others will begin to feel the financial pinch by September.



Senate Majority Leader Joe Pittman

NURSE SCOPE OF PRACTICE

Despite a late spring stakeholders' process that promised to lead to legislative action by June 30, the effort collapsed when the nursing organizations walked away from the table. PACEP worked with others in the House of Medicine to advance limitations on APP independent practice and other patient safeguards. The process was initiated by House Professional Licensure Committee Chair Frank Burns (D, Cambria). In June, Chair Burns made it clear to all stakeholders that he would advance legislation if a compromise was reached. Instead of working with the House of Medicine to reach a deal, the nursing organizations opted to leave the negotiating table and conduct a media advocacy campaign during the summer months to improve their legislative standing. Whether that effort was successful is yet to be seen. Chair Burns is clearly unhappy the stakeholders' process did not produce agreed to legislation and may not be willing to be pushed anymore on the issue.



Chairman Frank Burns

PATIENT PRESCRIPTION MEDICINE TAKE HOME LEGISLATION

Sponsored by Montgomery County Democratic State Representative Ben Sanchez, HB 446 PN 2021 allows patients to be discharged with the unused portion of these medications when

needed for ongoing care. On June 25, the House Health Committee amended and moved the bill forward on a 26-0 vote. PACEP's leadership participated in the stakeholders' process that led to the amendment. Unfortunately, concerns regarding further amendatory language stalled progress during the summer session. The bill may receive House Final Passage in the fall session. To view HB 446, please use the following link: [HB446PN2021.cfm](#)



*Representative
Ben Sanchez*

FOR PROFIT OR PRIVATE EQUITY HEALTHCARE FACILITY MERGERS AND ACQUISITIONS

HB 1460 PN 1871, was proposed by Governor Josh Shapiro in his February budget address and introduced by Representative Lisa Borowski (D, Delaware) on May 13. The bill is intended to protect communities from hospital closures and the attendant loss of healthcare access to residents and dislocation of healthcare employees as

happened in the cities of Chester and Sharon. The bill provides the Office of Attorney General (OAG) with review and approval powers over healthcare facility mergers and acquisitions by for profit or private equity entities. HB 1460, however, casts its net far beyond acute care general hospitals, specialty hospitals and ambulatory surgical facilities (ASFs), as well as psychiatric hospitals, rehabilitation hospitals, long-term care nursing facilities, cancer treatment centers using radiation therapy on an ambulatory basis, inpatient drug and alcohol treatment facilities, and hospice facilities. This expansive facility type immediately drew fire from various interests proposed to be subject to OAG review and approval. Through the efforts of the House of Medicine organizations, physician practices were removed by the House Health Committee on June 3 and HB 1460 was approved by the House by a 121-82 tally on June 10. The bill may receive Senate action during the fall session. To view HB 1460, please use the following link: [HB1460PN1871](#)



*Representative
Lisa Borowski*

PENNSYLVANIA SUPERIOR COURT UPHOLDS MEDICAL LIABILITY VENUE AGREEMENT

In a pivotal decision, the Pennsylvania Superior Court upheld a Bucks County trial court ruling that a medical services agreement venue selection clause between a physician and a patient is valid and enforceable. This could prevent venue shopping through contracts – a win for physicians! Be sure to consult your practice's counsel for more information.

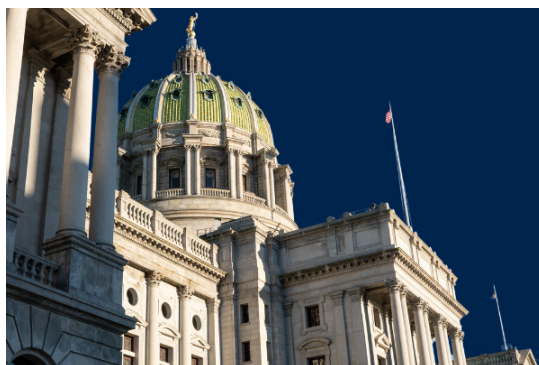
For more information on this ruling, [see this article](#) from a well-respected medical liability defense firm.

PHYSICIAN-LED EDS PREVIEW

In the fall session, PACEP's Government Affairs Committee will advance legislation to ensure physician-led Emergency Departments. The legislative proposal will require physicians to be available on-site for every ED in Pennsylvania. PACEP's lobbying team is using ACEP model legislation to craft a Pennsylvania specific bill. ■

2025 SESSION DAYS

Senate	House
Sept 8, 9, 10	Sept 22, 23, 24, 29, 30
Oct 20, 21, 22, 27, 28, 29	Oct 1, 6, 7, 8, 27, 28, 29
Nov 17, 18, 19	Nov 17, 18, 19
Dec 8, 9, 10	Dec 8, 9, 10, 15, 16, 17



PACEP
DAY ON THE HILL
TUESDAY, OCTOBER 28, 2025
PENNSYLVANIA STATE CAPITOL, HARRISBURG

REGISTER NOW

PEP-PAC Update: PEP-PAC Advocacy Receives an Upgrade!

By Michael Boyd, MD



Michael Boyd, MD
PEP-PAC Chair

PACEP continues to make great strides in our advocacy efforts. Our influence continues to grow, and legislators, regulatory agencies and other healthcare organizations look to our leadership and our input to improve patient care in Pennsylvania. In just the last year, PACEP, with the support of PEP-PAC, has:

- ✓ Provided critical input on legislation that enables patients to take home unused portions of medications from their acute stay;
- ✓ Opposed nurse practitioner independent practice;
- ✓ Opposed bills mandating strict inpatient nurse rations that would have exacerbated ED boarding;
- ✓ Reinforced our support of EMTALA;
- ✓ Participated as a strong leader on the Department of Health's ED Overcrowding Taskforce;
- ✓ Participated in efforts to improve mental health care and reduce ED psychiatric boarding;
- ✓ Eliminated non-compete contracts for physicians;

- ✓ Provided feedback concerning the role of private equity in healthcare;
- ✓ Voiced concern regarding Medicaid cuts and its impact on the ED healthcare safety net;
- ✓ Presented solutions to "venue shopping" and medical liability reform; and
- ✓ Confirmed our first Harrisburg Hill Day for October 28, 2025.

PEP-PAC allows us to educate legislators on issues vital to Emergency Physicians and our patients, and contributions to PEP-PAC are vital to our work. To provide a more modern and donor-friendly experience, we have transitioned our online contribution platform to Givebutter. Effective now, all contributions will be processed through this upgraded system. We ask you try out the new platform and make a contribution to PEP-PAC: <https://givebutter.com/peppac>

Even better, consider setting up a monthly recurring contribution. Your ongoing monthly contribution – whether \$10, \$25, \$50, \$75 or more – makes a difference in shaping emergency medicine and patient care in Pennsylvania.

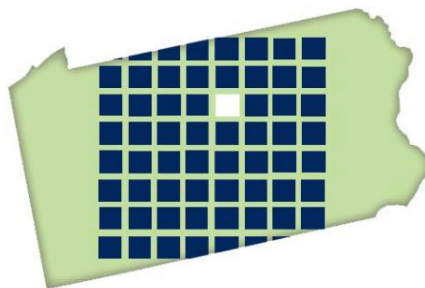
We are excited to make this transition and we're grateful to have you with us every step of the way. Together, let's power the future of emergency medicine advocacy in the Commonwealth!

If you have any questions or concerns, please do not hesitate to reach out. ■

DONATE NOW



Share



Support PEP-PAC!

Your voice matters! By contributing to the Pennsylvania Emergency Physicians' Political Action Committee (PEP-PAC), you keep emergency medicine at the table where key decisions are made. Lawmakers are shaping policies that affect your patients and your practice - often without understanding the impact. Be part of the conversation that shapes the future of emergency medicine - contribute now to support PEP-PAC.

Organized by Pennsylvania Emergency Physicians PAC
exec@pacep.net

✓ Choose amount

One-time **Monthly** Yearly

\$250 \$100 \$50

\$25 \$15 \$10

\$ Other USD

☐ Add note/comment

Continue

PACEP ACCOMPLISHMENTS

(05/10/25 – 07/30/25)

ADVOCACY

- Confirmed PACEP Day on the Hill for Tuesday, October 28, 2025
- Planned Fall Coffee Talk event for Monday, September 15, 2025
- Submitted second report for LCB grant on prevention of underage drinking
- Modernized [PEP-PAC contribution platform](#)
- Issued statement reaffirming EMTALA in June
- Submitted legislative comments on the CRNP Pilot Program bill and facility-provided medications bill

EDUCATION

- Processed credits and issued CME certificates for PACEP25 attendees
- Kicked off PACEP26 Scientific Assembly planning
- Launched the [PACEP26 Call for Speakers](#)
- Participated in the MSC quarterly ENGAGE series panel discussion

ENGAGEMENT

- Collaborated with ACEP on successful Residency Visits at Geisinger and Einstein
- Presented keynote address at PA Emergency Nurses Association Horizons Conference
- MSC launched their monthly Journal Club series for 2025/26
- Facilitated orientation and goal-setting discussions with all committees for 2025/26
- Launched PACEP's chapter portal in ACEP's new [engagED platform](#)
- Reconvened DOH ED Overcrowding Taskforce meetings
- Continued growth of PACEP social media

GOVERNANCE

- Submitted 9 resolutions and 5 memorial resolutions for ACEP Council
- Co-sponsored one additional resolution (Louisiana)
- Obtained co-sponsorship of our resolutions from numerous state chapters (TX, NM, LA, VT) and ACEP sections (EMS Pre-hospital Care, Medical Directors, Quality Improvement and Patient Safety, Rural Emergency Medicine, EM Workforce)
- Prior Executive Director Jan Reisinger named the 2025 recipient of the Diane K. Bollman Chapter Advocate Award, to be presented at ACEP Council
- Hosted ACEP candidates interviews in collaboration with the New Jersey and Ohio chapters
- Completed PACEP's Annual Chapter Report and Compliance Questionnaire for ACEP

Changing Emergency Health Care *for the Better*

UPMC in Central Pa. is seeking a dedicated and highly skilled Emergency Medicine physician to join our team at our thriving community hospitals throughout the region. This position offers the opportunity to practice in a supportive, patient-focused environment while delivering high-quality emergency care to a diverse patient population. Teaching opportunities are available at some of our locations.

As a key member of our Emergency Department, you will be responsible for evaluating and treating patients with a wide range of acute and life-threatening conditions. We offer a collaborative and collegial atmosphere where physicians can focus on clinical excellence and provide compassionate care to the community.

Contact us to learn more:
physicianrecruitment@UPMC.edu

UPMC
LIFE CHANGING MEDICINE

A How-to Guide to Successfully Double Dip and Maximize your Time and Resources

By **Monisha Bindra, DO, MPH, FACEP, FAAEM** and **Holly Stankewicz, DO, FACEP, FAAEM**



**Monisha Bindra, DO, MPH,
FACEP, FAAEM**
PACEP Board Member

Our involvement in PACEP began as members of committees (Education and Wellness/Young Professionals). We both knew each other from mutual friends during our time in residency at Lehigh Valley Hospital and St. Luke's Hospital in Bethlehem. However, our personal friendship grew as our involvement increased within PACEP. We both became more involved with our efforts at organizing Residency Day events and the inaugural Olympics at the PACEP Scientific Assembly.

As leaders within residency programs, Monisha is one of the Assistant Program Directors at Reading Hospital Tower Health and Holly is the Program Director at St. Luke's Bethlehem, we realized that we had similar goals of engaging with medical students and teaching emergency medicine residents to become amazing physicians. Those goals aligned with

expanding programs within the organization and networking with other like-minded physicians across the state.

The ACGME has academic guidelines that need to be met annually for core faculty within residency programs and updated in webads. While the workshops we created for the annual Resident Day events and for the Olympics counted as collaboration and innovative work, we also received credit for the local conferences that we organized. We also procured the work that came naturally to us within PACEP and took it to the next level (the regional and national stage) by writing about these events in our quarterly newsletter, presenting our work with a joint lecture at CORD EM this past spring on 'A How to Guide to Successfully Double Dip and Maximize your Time and Resources', and we



Holly Stankewicz, DO, FACEP, FAAEM
PACEP Vice President



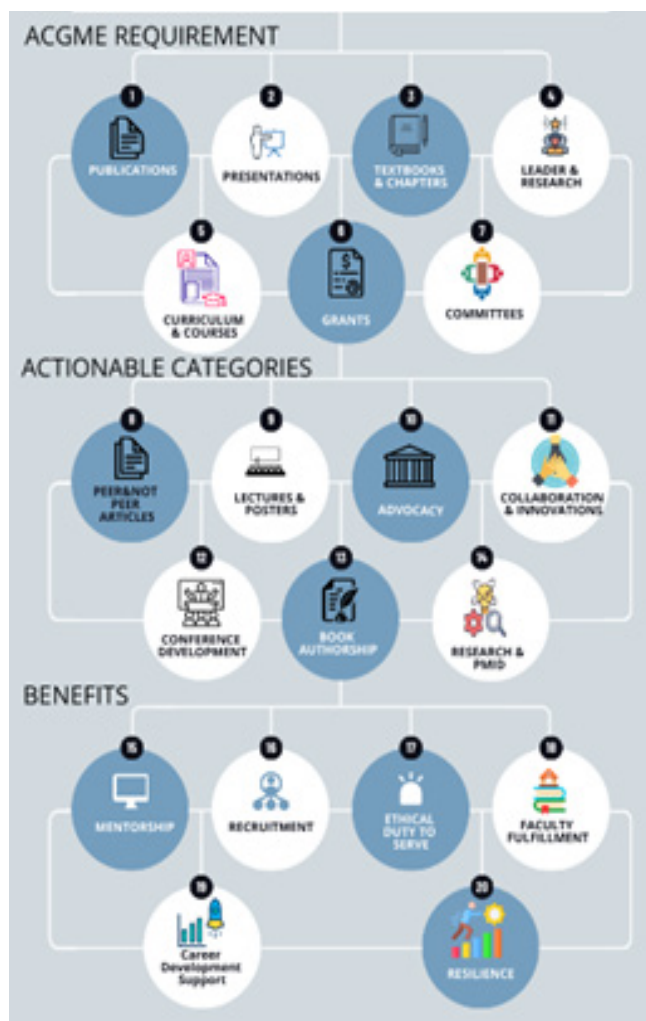
look forward to sharing about our statewide residency collaborative efforts at SA Olympics with a poster on the 'Development of a Novel Resident Educational Agenda for a Chapter Scientific Assembly' accepted at ACEP SA 2025.

While we have generated many items that count towards scholarly activity requirements for residency leadership by the ACGME, we have really grown

our passion of advocacy, mentorship to medical students and residents, and support of each other. Similarly, our roles within PACEP have matured with Holly currently serving as Vice President and Monisha as a Board Member and liaison to the Medical Student Council. These opportunities have allowed us to each step out of our individual comfort zones and in doing so have fulfilled our careers in ways

we never imagined and have become great friends along the way.

If you are interested in joining a committee and taking your membership to the next level, we invite and look forward to meeting you and having you join our efforts. Please reach out anytime – monisha.bindra@towerhealth.org and holly.stankewicz@sluhn.org. ■



UPCOMING EVENTS

9/5 – 9/6/2025

ACEP Council
Salt Lake City, UT

9/7 – 9/10/2025

ACEP25 Scientific Assembly
Salt Lake City, UT

9/15/2025

PACEP Legislative Coffee Talk
Virtual

10/8/2025

Central PA Residents Day
PSU Hershey

10/8/2025

PACEP Board of Directors
Hershey

October 2025

PACEP Town Hall
Virtual

10/28/2025

PACEP Day on the Hill
Harrisburg

11/19/2025

PACEP Board of Directors
Harrisburg

1/18 – 1/23/2026

ACEP Accelerate
San Diego, CA

1/21/2026

PACEP Board of Directors
Virtual

3/18/2026

PACEP Board of Directors
Harrisburg

4/26 – 4/28/2026

**ACEP Leadership & Advocacy
Conference (LAC)**
Washington, DC

4/29/2026

PACEP Board of Directors
Kalahari Resorts, Pocono Manor

4/30 – 5/2/2026

PACEP26 Scientific Assembly
Kalahari Resorts, Pocono Manor

Groundwork: Lessons Before Med School

By Jacob Frank BS, EMT, Anna Meyer BS, EMT-P, and Jacob Elmore BS



Jacob Frank, LECOM OMS-III



Anna Meyer, LECOM OMS-III

Before we ever touched a stethoscope in medical school, the three of us were already working in emergency care, just in different uniforms. Anna Meyer, a third-year from Pittsburgh, has been serving as a paramedic and firefighter for years. Jacob Frank, also a third-year, started as an EMT in the Lehigh Valley and continues to work shifts when he can. Jacob Elmore, a second-year, came into medicine through the military, with time in the Marine Corps and ongoing service in the U.S. Air Force. For each of us, emergency medicine isn't just a specialty we discovered during our medical training, it's the next step in a path we've already been walking.

Coming into medical school with a prehospital or military background offers an unusual perspective. We've all been in situations where you don't have imaging, labs, or a full team

to back you up. You learn to make decisions with limited information and little margin for error. There's no time to freeze; you assess, prioritize, and act. That kind of training makes its way into everything we do as students. We listen a little differently during lectures on trauma protocols because we've seen them play out in real time. We think a little more critically during simulations because we've had to improvise when gear fails or scenes shift unexpectedly.

Still, the transition hasn't always been easy. Learning how to explain what we've done instinctively for years, how to tie it to physiology, pathophysiology, and academic frameworks can be surprisingly hard. It's one thing to apply a tourniquet or troubleshoot an airway under pressure. It's another to break down the cellular mechanisms



Jacob Elmore, LECOM OMS-II

behind hypovolemic shock on an exam. But that process has made us better learners and, we hope, better physicians.

What draws us to emergency medicine now is the same thing that drew us to EMS and military service in the first place: the need to think fast, work as a team, and help people when they're most vulnerable. The emergency department feels like familiar ground. It moves quickly. It demands flexibility. It rewards calm under pressure. But it also connects us with the broader healthcare system and gives us the tools to take what we learned in the field and elevate it.

We all carry pieces of our past into this work. Anna Meyer brings the firehouse grit and paramedic instincts that make her comfortable leading a code or navigating high-acuity scenes. Jacob

Frank brings years of patient contact in the Lehigh Valley, where every call reinforced that no two emergencies—and no two people—are exactly alike. Jacob Elmore draws from military medicine, where triage decisions and trauma care come with unique pressures requiring quick action, decisive judgement, and situational awareness.

To preclinical students with similar backgrounds: your experience is more valuable than you think. Don't downplay it. You've already learned how to think on your feet, communicate under stress, and respond when someone needs help now, not in five minutes. That kind of training will serve you well, whether you're in the trauma bay or fielding a difficult question on rounds.

And to those new to EMS or the world of emergency care: seek it out. Ride along with a local crew. Shadow in

the ED. Talk to the nurses, techs, and medics who see patients long before they get IVs and lab draws. Emergency medicine is built on collaboration, and understanding what happens outside the hospital walls can make you a stronger, more compassionate clinician inside them.

For the three of us, EM isn't just another rotation; it's where all the threads come together. It's fast, messy, and sometimes unpredictable; but for people like us, it feels like home. ■



Looking to meet new people, expand your skill set and make a difference? Join a PACEP committee today! [Click here to sign up!](#)

Time is your most valuable asset. With locum tenens, you're not trapped watching the sand fall—you decide how it flows.

- Neil Yoder DO, FACEP, FAAEM
Owner, President, CEO

WPA+
Medicine Staffing
www.wpamedstaffing.com



ACEP Board Updates

By Chadd K. Kraus, DO, DrPH, CPE, FACEP



Chadd K. Kraus, DO, DrPH, CPE, FACEP
ACEP Board of Directors
PACEP Past President

PACEP Colleagues,

I'm excited to share some updates from the ACEP Board of Directors and the College with you.

UPDATES FROM THE JUNE 2025 BOARD MEETING, DALLAS, TEXAS

The ACEP Board met in Dallas on June 25 and 26, 2025. Below is a summary of actions and discussions from that meeting.

NEW EXECUTIVE DIRECTOR

Michael Fraser, PhD, MS, CAE joins ACEP as its new Executive Director beginning on November 1, 2025. Mike brings decades of association executive experience to ACEP. He comes to ACEP from the College of American Pathologists (CAP) where he served as Chief Executive Officer (CEO) and prior to

that he was the CEO of the Association of State and Territorial Health Officials (ASTHO). He also has a connection to Pennsylvania, having previously served as executive vice president and CEO of the Pennsylvania Medical Society.

WHAT'S NEXT...

The ACEP Board meets in September 2025 during ACEP25 in Salt Lake City, Utah. I look forward to seeing many of you in Salt Lake City at ACEP25!

Your continued PACEP and ACEP membership and engagement are appreciated!

As always, please reach out with questions, comments, or other feedback to me at ckraus@acep.org. Your input matters and the Board is listening to you!

Thank you for the opportunity to represent you on the ACEP Board. ■

Actions on Policy Statements & Clinical Policies

Title	Type	Action
Audiovisual Recording in the Emergency Department	Revised	Approved (with revisions)
Collective Bargaining, Work Stoppages, and Slowdowns	Revised	Approved
Emergency Physician Stewardship of Finite Resources	Revised	Approved
Emergency Physician Shift Work	Revised	Referred to committee ¹
Prehospital Tranexamic Acid in Trauma Patients (Joint Position Statement and Resource Document with NAEMSP, ACEP, ACS-COT)	Revised	Approved
Resident Training for Practice in Non-Urban/Underserved Areas	Reaffirm	Approved
Role of the State Physician EMS Medical Director	Revised	Approved
Safe Discharge from the ED	Revised	Approved
Scholarly Sabbatical Leave for Emergency Medicine Faculty	Reaffirm	Approved
Specialty Consult Time and Documentation Expectations	New	Approved (with revisions)

¹ Referred to committee to incorporate work on shift work in aging physician populations into a comprehensive policy statement.

Additional Consent Agenda Actions

Ratification of Fellow Applications approved by Chair of the Board	Approved
Model Chapter Bylaws Revisions	Approved

2026 MIPS QCDR Self-Nomination – Approval of Quality Measures

The Board approved 30 quality measures to submit to CMS through the 2026 Self-Nomination application.

ED Accreditation – Blue Ribbon Recognition Framework

The ED Accreditation Program (EDAP) surfaced a need for standards for employers as well as EDs. Blue Ribbon identifies positive work environments based on ACEP's values and policies. The Board approved the framework and empowered EDAP's Board of Governors to continue refining specifics.

FACEP Program Expansion

The Board agreed to co-sponsor Bylaws resolutions with the Membership and International Committees to create Distinguished [FACEP(D)] and International [FACEP(I)] fellows.

FY 2025-2026 Budget

The Board approved FY 25-26 budget, capital expenditure budget, and Bonus Award Program for staff. FY 24-25 budget modifications were also approved for EMPI and YPTC.

Advocacy Update

Reconciliation	Continuing to oppose provisions on Medicaid, student loan forgiveness.
Boarding	- ACEP boarding bill introduced in Senate. Seeking additional cosponsors. - Positive meetings with CMS, hopeful work will continue despite AHRQ restructure.
Physician Autonomy	"Workforce Mobility Act" reintroduced in Senate, prohibiting noncompete agreements.
Due Process	Bill ACEP helped develop reintroduced in both House and Senate.
Well-Being	Dr. Haddock participated in GOP House Call on the Mall, member-level Congressional meetings supporting reauthorization of Dr. Lorna Breen Act.
Surprise Billing	Good engagement; some systems improvements already, hopefully more to come.
Reproductive Health	Secretary Kennedy reiterated EMTALA in letters to providers and E&C hearing.
Vaccines	Signed two AMA-led letters for evidence-based vaccine policy, restoration of ACIP.
NIH Funding	Joined amicus brief urging court not to reduce funding for vital research.
State Advocacy Wins	- OR SB 951 became law; prohibits interference from corporations, shareholders, staff in physician decision-making. Provided model language, letter of support for hearings. - SC HB 4067 became law; requires at least one physician be physically present onsite when hospital ED is open. Helped write legislation, answer questions during process.
AMA House of Delegates	Emergency Medicine is now represented on all AMA councils.

PACEP Education Committee Update

By Jason R. Burkett, DO, FACEP



Jason Burkett, DO, FACEP
PACEP Education Committee Chair

The Education Committee continues to grow in energy and scope as we look ahead to an exciting year of programming, engagement, and innovation. During our June 17th meeting, we reviewed the committee's purpose and reaffirmed our commitment to developing inclusive, high-impact educational content for emergency physicians across Pennsylvania. To better manage our growing scope, we are launching subcommittees to help divide the work and broaden opportunities for involvement beyond the Scientific Assembly. We are excited to engage members both old and new in this effort and PACEP members can look forward to more robust social media educational content, seeing the accomplishments of our members on display, and increased integration with our Medical Student Council and residency programs across the state. We welcome all who are interested in getting more involved!

Near the conclusion of our June meeting we were joined by Mark Olaf, DO who introduced the MD911 curriculum at GCSOM—a health systems science experience designed to provide medical students exposure to hospital operations and the broader social determinants of health that impact ED care. Highlights of this curriculum are available on PACEP's social media channels and contact information is available for anyone who may be interested in instituting or broadening the scope of this type of curriculum at their own institutions.

Planning is well underway for the 2026 Scientific Assembly (April 30–May 2, 2026). The Board of Directors approved this year's theme, "Our Community: EM Practice in PA." This concept highlights the diversity of emergency medicine practice across Pennsylvania, including rural and non-academic settings. We aim to create a program that resonates with all EM physicians. A call for speakers is currently out and we encourage you and your colleagues to consider this speaking opportunity! We're also exploring ways to boost community physician attendance—particularly in light of challenges around CME funding—by promoting DO-specific credits and patient safety content relevant for license renewal in 2026. In addition to this, we are in the preliminary phase of planning to include mock oral board sessions to run concurrently with other programming at SA. We hope to make available these preparatory sessions for attendees

to learn about and simulate the new ABEM Certifying Examination style.

Recruitment and outreach are key priorities for the Education Committee moving forward. We hosted PACEP's Annual Residency Fair on August 21 (held via Zoom) and are working to broaden our reach by connecting with groups such as LMSA, SNMA, and AMSA. If you teach or work with medical students across Pennsylvania, please tell them about PACEP and invite them to get involved.

Thank you to all our members for your ongoing contributions. The Education Committee meets in even months on the third Tuesday at 8:00 am. We welcome your involvement—email exec@pacep.net for the Zoom link. ■

▶ IMPORTANT DATES:

MSC Monthly Journal Club

Monthly on the 1st Monday at 7:00 PM (social media for links)

MSC Statewide Lecture Series

Monthly at 7:00 PM

PACEP MSC ENGAGE

Speaking Series

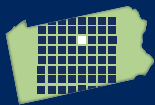
Quarterly at 7:00 PM

Central PA Residents Day

October 8, 2025 at Penn State Hershey Medical Center

PACEP Scientific Assembly

April 30 to May 2, 2026 at Kalahari Resort, Pocono Manor, PA



PENNSYLVANIA COLLEGE
of EMERGENCY PHYSICIANS

ADVANCING EMERGENCY CARE

PACEP26

SCIENTIFIC ASSEMBLY

Apr 30–May 2, 2026

Call for Speakers

The Pennsylvania College of Emergency Physicians (PACEP) Education Committee is accepting submissions for speakers and sessions for our 2026 Scientific Assembly! The conference will be held at Kalahari Resorts & Convention Center, Pocono Manor from April 30-May 2, 2026.

This year's theme is **"Our Community: EM Practice in PA"**. This concept highlights the diversity of emergency medicine practice across Pennsylvania, including rural and non-academic settings. We aim to create a program that resonates with all EM physicians, and to create a welcoming environment to come together in fellowship to catch-up, network and recharge. [Click here](#) to view a list of topic ideas that have been generated around this year's theme - other topics and ideas are also welcomed!

We are looking to provide thirty 30-minute lectures. All ideas are welcome and past applicants and presenters are encouraged to apply. This is also a great opportunity to earn scholarly activity and gain exposure so share this information with your colleagues! [Submit your session idea\(s\) today](#) - the deadline is August 31, 2025.

Last year was another record-breaking year, with over 300 emergency medicine professionals gathering to hear national and state faculty share their knowledge and expertise in presenting clinical updates and cutting-edge issues in emergency medicine care.

Submit your proposal, today! Multiple proposals may be submitted. Expressing interest does not guarantee acceptance. Preference is given to members of PACEP.

Potential speakers will be notified by the PACEP26 Scientific Assembly Program Chair, Jason Burkett, DO, FACEP by **October 15, 2025**.

NOTE: While we cannot cover honorarium or travel expenses for your session, we do cover registration to attend the Scientific Assembly.



WHAT WE'RE LOOKING FOR:

- Passionate, confident and engaging speakers. Know someone who you think would make a great speaker? Invite them to submit a proposal!
- Sessions that run the gamut from teaching the fundamentals of emergency medicine to advanced subject areas. Attendees are at various stages in their careers, so a broad spectrum of sessions are needed.

WHAT WE ARE NOT LOOKING FOR:

Promotional or sales-driven sessions for products or services.

DEADLINE:

Proposals due August 31, 2025

SUBMIT YOUR PROPOSAL:

<https://forms.gle/nfSE2EScktoc8emv9>

What is the Diagnosis?

A special thank you to Alexandra Amaducci, DO for organizing this year's CPC competition during the PACEP25 Scientific Assembly. Congratulations to this year's second place winners – Luke Persin, DO from Geisinger Emergency Medicine Residency for submitting the case and being the resident presenter, and Alexander Yang, MD at Jefferson Einstein for being the attending discussant.



CPC CASE STUDY THE CASE

68-year-old female presented to the ED with shortness of breath. She reported feeling ill for one month. Patient reported increased cough and sputum production and multiple episodes of coughing up large segments of 'thick mucus covered in blood.' No known exposures.

Past Medical History: Type 2 DM, hypertension, cirrhosis, hyperlipidemia, recurrent pneumonia

No known drug allergies

Social History: former "light" smoker

Vital Signs: HR 78 bpm, RR 16 breaths per minute, SpO2 99%, BP 130/86 mmHg, Temp 99.8 deg F

Physical Exam:

General: NAD, well developed, well nourished

HEENT: normocephalic, atraumatic, no facial trauma

Neck: supple

Heart: regular rate and rhythm, no edema

Lungs: respiratory effort normal, speaks in full sentences, no tripod position, no accessory muscle use, lungs CTA

Abdomen: soft, nontender, nondistended

Skin: warm, pink, dry; no rashes

Neuro: speech is clear and appropriate, normal consciousness. Gait and coordination are normal. 5/5 strength in all extremities

Psych: normal mood and affect

Pertinent Labs:

- CBC: slight leukocytosis
- CMP: WNL
- RVP: negative

Pertinent Imaging:

- Chest xray: multifocal pneumonia
- CT Chest: bilateral ground glass opacities and pulmonary edema

What test will make the diagnosis?

What is the final diagnosis?

see conclusion on page 23

Summer Catch!

By Michelle Appel, MD



Michelle Appel, MD
PACEP Wellness Committee Co-Chair



Barramundi, also called Asian Sea Bass, is a fish known for its sweet, mild taste and flaky texture. It has several health benefits, such as lean protein and Omega-3 fatty acids. "I first tried barramundi through a box meal subscription service," says Wellness Committee co-chair Michelle Appel, MD. "I've been able to cook it several different ways and my favorite is with a crispy skin! I am definitely looking for more recipes and ways to try this delicious fish."

Here's a simple recipe to try barramundi for yourself!

<https://www.thebetterfish.com/recipe/sauteed-barramundi-with-lemon-butter-sauce/>



PennState Health



Penn State Health Emergency Medicine

About Us: Penn State Health is a multi-hospital health system serving patients and communities across central Pennsylvania. We are the only medical facility in Pennsylvania to be accredited as a Level I pediatric trauma center and Level I adult trauma center. The system includes Penn State Health Milton S. Hershey Medical Center, Penn State Health Children's Hospital and Penn State Cancer Institute based in Hershey, Pa.; Penn State Health Hampden Medical Center in Enola, Pa.; Penn State Health Holy Spirit Medical Center in Camp Hill, Pa.; Penn State Health Lancaster Medical Center in Lancaster, Pa.; Penn State Health St. Joseph Medical Center in Reading, Pa.; Pennsylvania Psychiatric Institute, a specialty provider of inpatient and outpatient behavioral health services, in Harrisburg, Pa.; and 2,450+ physicians and direct care providers at 225 outpatient practices. Additionally, the system jointly operates various healthcare providers, including Penn State Health Rehabilitation Hospital, Hershey Outpatient Surgery Center and Hershey Endoscopy Center.

We foster a collaborative environment rich with diversity, share a passion for patient care, and have a space for those who share our spark of innovative research interests. Our health system is expanding and we have opportunities in both academic hospital as well community hospital settings.

Benefit highlights include:

- Competitive salary with sign-on bonus
- Comprehensive benefits and retirement package
- Relocation assistance & CME allowance
- Attractive neighborhoods in scenic central Pennsylvania



FOR MORE INFORMATION PLEASE CONTACT:

Heather Peffley, PHR CPRP
Penn State Health Lead Physician Recruiter
hpeffley@pennstatehealth.psu.edu

Penn State Health is fundamentally committed to the diversity of our faculty and staff. We believe diversity is unapologetically expressing itself through every person's perspectives and lived experiences. We are an equal opportunity and affirmative action employer. All qualified applicants will receive consideration for employment without regard to age, color, disability, gender identity or expression, marital status, national or ethnic origin, political affiliation, race, religion, sex (including pregnancy), sexual orientation, veteran status, and family medical or genetic information.



Congratulations to ACEP's newest Fellows from Pennsylvania!

- Syed Shayan Ali, MD, FACEP
- Amanda J. Deutsch, MD, FACEP
- Louis Morolla, DO, FACEP
- Pratik M. Parikh, DO, FACEP
- Kevin R. Roth, DO, FACEP



Are you ready to become a Fellow?

You'll need:

- Three continuous years of ACEP membership
- Board Certification in EM via the ABEM or AOBEM or Pediatric EM by ABP
- Three years of active involvement in EM (exclusive of residency training)
- Proven, active involvement in three or more areas of leadership

To learn more visit:

<https://www.acep.org/acep-membership/membership/join-acep/fellow-status>

If you are not a Fellow...

I would personally like to invite you to apply for fellow status in the American College of Emergency Physicians. If you've graduated from residency three years ago or more and you've been active in Emergency Medicine – it's time to consider being recognized as FACEP. Active involvement in the specialty at your hospital, involvement in three areas of leadership (such as membership on hospital committees, teaching, research, administrative, EMS, or PACEP), and board-certification is all you need to become a fellow of the College. Why bother you say? FACEP

shows your colleagues in Emergency Medicine, and more importantly, in other specialties that you interact with, that Emergency Medicine is more than just a job for you - it shows that you're a highly trained specialist with a skill set second to none. Apply by August 15 and you will be able to use the FACEP designation following your induction at the Convocation during ACEP's Scientific Assembly (SA) the last weekend of September. All newly elected FACEPs will also receive an official Fellow certificate after ACEP's Scientific Assembly.

APPLY NOW and take full advantage of your ACEP membership and receive the recognition you deserve!

A handwritten signature in black ink, reading "Jennifer L. Savino".

Jennifer L. Savino, DO, FACEP
Immediate Past President,
Pennsylvania College of
Emergency Physicians

The Conclusion:

CPC CASE STUDY

RESULTS

68-year-old female presented to the ED with shortness of breath. She reported feeling ill for one month. Patient reported increased cough and sputum production and multiple episodes of coughing up large segments of 'thick mucus covered in blood.' No known exposures.

CPC Case Results:

- Test to order: Bronchoscopy

The Final Diagnosis:

- Plastic Bronchitis

Patient Course & Relevance to EM

- Rare condition causing large bronchial casts to form in lung, leading to blockages and potentially life-threatening complications
- Mainly seen in children, associated with congenital heart malformations that were surgically corrected
- In adults, cases are mostly idiopathic but can be associated with abnormal lymph flow, genetics & workplace exposures
- The patient was treated with antibiotics and steroids and discharged after a 14 day hospitalization and followed up with pulmonology



PACEP HAS A STORE!

Get the latest in PACEP gear – Jackets and Vests embroidered with the PACEP Logo. Personalization is also available.

[VISIT STORE](#)



Dr. Rupprecht found a place that matched his mindset – innovation.

Top Eight Most Innovative Health Systems – *Becker's Hospital Review*, 2020

Nationally recognized by *Forbes*, *Fortune* and *TIME*

Best Employers for Healthy Lifestyles – *National Business Group on Health*, 2019

Only at Geisinger.

Opportunities for emergency medicine providers

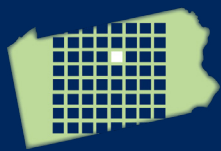
Central and northeastern Pennsylvania

For over a century, Geisinger has created easy access to healthcare for our friends and neighbors in Pennsylvania. Living and working here, you'll join one of our tight-knit communities and experience a quality of life you can't get elsewhere. You'll have opportunities to better your life and make a difference in the lives of your neighbors – at home and across the country.

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- Recruitment incentives and comprehensive benefits package including paid vacations and holidays, 403(b) and 457(b) retirement plans, competitive CME allowances, health/dental/vision and malpractice coverage with tail.
- Relocation assistance.

Interested candidates, please contact Miranda Grace,
Senior Provider Recruiter, at 717-899-0131 or mlgrace@geisinger.edu.



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