



## **The Future of Emergency Medicine: What Will We Look Like in the New Millennium?**

Health care is changing dramatically and rapidly. Emergency medicine must play an integral role in shaping the future of health care system. Learn what changes are likely to occur and what impact they may have on emergency medicine.

- Describe changes likely to occur in health care in the next five years and their influence on emergency medicine.
- Identify how to prepare for these changes in health care.
- Discuss the impact these changes will have on patient care.
- Describe what emergency medicine may look like in the future.

WE-120  
Wednesday, October 13, 1999  
8:00 AM - 8:55 AM  
Room # N227  
Las Vegas Convention Center

### **FACULTY**

John C Moorhead, MD, FACEP

Professor, Department of Emergency  
Medicine, Oregon Health Sciences  
University; Chair, ACEP Workforce  
Task Force; ACEP President

The Future of Emergency Medicine:  
What Will We Look Like in the New Millennium?

John C Moorhead MD. MS. FACEP

I. Course Description

1. The end of the millennium finds the specialty of emergency medicine in transition.

II. Objectives

- I. At the end of the course the participant will be able to :
  - a. understand many of the changes likely to occur in health care and their influence on emergency medicine.
  - b. identify how to prepare for these changes in health care.
  - c. understand how these changes will affect patient care.
  - d. have a perspective on what emergency medicine may look like in the future.

111. Course Outline

A. "Transitions" in Emergency Medicine

1. 1999 .....	2000
20-Yr Specialty	New Millenium
29-Yr Residencies	

2. Gradual Change . . . . . Rapid Change

B. Residents' Transitions

1. Career . . . . . Specialty

2. Emergency Clinicians                      Emergency Physician,

C. Health System Change

- 1. Cost Control ..... Choice/Quality
- 2. Benefits
  - MD/Hospital ..... MD/Hospital/Drug
- 3. Market-Driven ..... Consumer-Driven

D. EM Workforce Transitions

- 1. Doctors ..... ..Physicia n Extenders
- 3. Undersupply ..... Regional Oversupply
- 4. Male ..... Representative
- 5. Caucasian ..... Diversified
- 6. Older ..... Younger
- 7. Independent Contractors ..... Employees
- 8. Board Certified ..... ABEM/AOBEM Certified
- 9. Urban ..... Non-urban
- 10. Reimbursement-driven ..... Lifestyle-driven

E. Group Organization

- 1. Staffing ..... Management Services (MSO)

F. Reimbursement

- 1. Increases . . . . . Maintain Safety Net  
Services  
EMS

G. Advocacy

- 1. Access . . . . . Universal Coverage  
Prudent Layperson On-call coverage  
EMTALA

H. EM Practice

- 1. "Emergencies" . . . . . All Unscheduled  
Care
- 2. Low Tech . . . . . High Tech
- 3. Overcrowding . . . . . Customer Service  
Documentation  
Fraud & Abuse  
ED Certification
- 4. Individual Practice . . . . . Public Health  
Surveillance  
Domestic Violence
- 5. Burnout . . . . . Wellness
- 6. Credentialling  
Hospital/Group . . . . . Government

I. Academic Medical Centers

- 1. Financial Advantage . . . . . Financial Disadvantage
- 2. Teaching-Focus . . . . . Practice-Focus
- 3. Resident-Driven Care . . . . . Faculty-Driven Care
- 4. Low Education Debt . . . . . High Debt Load
- 5. Resident Moonlighting . . . . . Limited Opportunities/Pay
- 6. Fellowships  
    Full-time . . . . . Part-time

J. Communication

- 1. Print . . . . . On-line
- 2. Episodic . . . . . Continuous/Ongoing

K. Mentoring

- 1. Outside EM . . . . . EM Specialty
- 2. Resident Orientated . . . . . Practicing Physician Orientated

L. ACEP

1. Centralized ..... Decentralized

2. National ..... Chapter

3. President Focused ..... Board Focused

M. EM Organizations

1. Divisive ..... Unity

2. Isolation ..... Collaboration

3. Member Benefits ..... Collective  
Bargaining

N. EM Future

1. Positive ..... Cautiously Positive

## Reference List

1. Coile, RC. 1998. "Top 10 Trends for the Future of Emergency Medicine". **Health Trends**. 10(11): 1-1 1. Sept.
2. Perina, D. et al. 1998. "Future Direction of Emergency Medicine: Implications for Academics and Resident Training". **Medicine's Front Line**. ACEP; Dallas Texas.
3. Cys, J. 1999. "Winter Ailments Putting a Strain on Hospitals". **AHA News**. February 15.
4. Bess J. 1999. "America's Safety Net: Public Hospitals Emerged from Humble, and Harrowing, Beginnings". **AHA News**. June 15.
5. Asplund J. 1997. "Experts Wonder if Increase in ER Visits is a Long-term Trend". **AHA News**. Sept. 29.
6. Levinson D. 1999. "Ers Should Add Social-Services Centers, Doc Says". **AHA News**. Mar 8.
7. Bankhead C. 1997. "Re-Engineering the ED Reduces Waits and Increases Patient Satisfaction". **EMN**. Dec.
8. Blumenthal, David. 1999. "Health Care Reform at The Close of the 20<sup>th</sup> Century". **NEJM**. 340(24): 1916-1920. July.
9. Nourjah, Parivash. 1999. "National Hospital Ambulatory Medical Care Summary: 1997 Emergency Department Summary". **Advanced Data**. 304. May.

### To Contact Dr. Moorhead:

1. John C Moorhead MD MS FACEP  
4138 S.W. Hamilton Ter.  
Portland, Oregon 9720 1
2. Phone: 503-227-5130
3. E-mail: [jmoorhead@acep.org](mailto:jmoorhead@acep.org)