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Petition Demands Due Process Rights for EPs

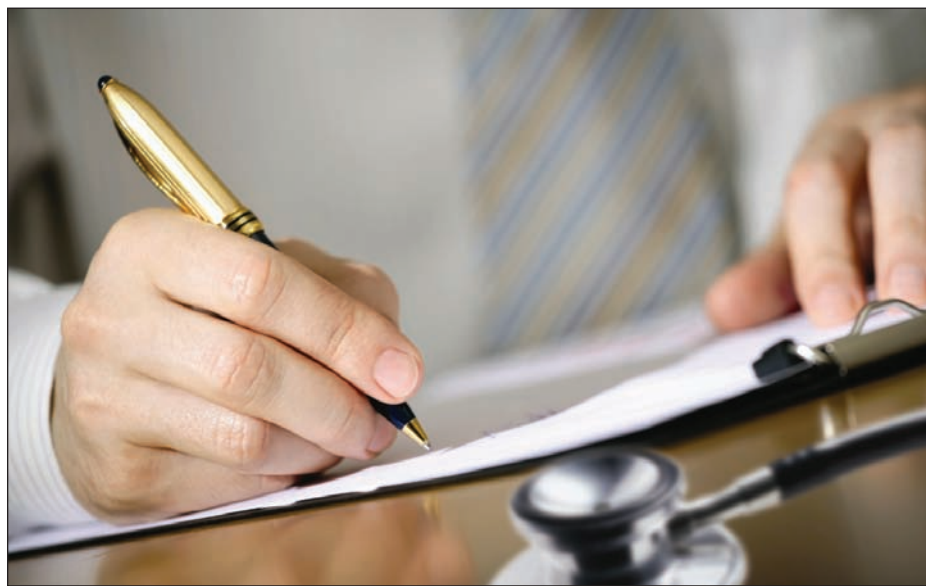
By Ruth SoRelle, MPH

A petition that supports the due process rights of emergency physicians represents the core issue of the American Academy of Emergency Medicine and deserves the support of all emergency physicians, said its originator.

"I can't tell you how many times my heart would sink and my stomach would get sick listening to emergency physicians who were terminated for raising quality of care issues," said Robert McNamara, MD, a founding president of AAEM who recently ended his service on the board. "They were complaining about things that compromise their ability to care for patients — inadequate nursing staff, inappropriate policies. They were told to keep quiet, or they would be terminated."

As Dr. McNamara's last initiative before ending his service on AAEM's Board of Directors, he drafted a petition to galvanize emergency physicians into fighting for what he called a long overdue fight. The petition, posted on www.aaem.org/dueprocess/petition/, reads:

"We, the undersigned emergency physicians of this country, believe that



due process is fundamental to our ethical mandate to care for our patients without being pressured by administrative or other external influences. We serve as direct advocates for our patients, many of whom go to emergency departments because they are vulnerable due to medical, social or financial issues outside of their control. In some cases, such advocacy may conflict with profit-driven or other non-patient-oriented forces.

Therefore, we strongly oppose the contractual trend that allows hospitals or contract holders to terminate physicians without a fair hearing, since this hinders our ability to act at all times in the best interest of our patients."

Dr. McNamara's name appears first on the long list of emergency physicians who have signed the petition, and he said he hopes that thousands will follow suit.

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Out of the Pharmacy, Into the ED

By Angela Munasque

If you're looking for Janine Shipley, PharmD, a pharmacist at Licking Memorial Hospital in Newark, OH, you won't find her in the pharmacy filling medication orders behind the counter. You'll find her on the floor in the emergency department working right beside the physicians and nurses.

Ms. Shipley is a rare breed. Only three to five percent of EDs in the nation have a pharmacist on staff, according to May-Lee Robertson, DO, the medical director of the emergency department at Licking Memorial. Dedicated to the ED since

February, Ms. Shipley has already proved to be an invaluable part of the team. She reconciles medications, consults with staff on treatment plans, and even completes paperwork to help patients adhere to therapies once they leave the ED.

So far, having a pharmacist in the ED is working well, but it's a program in its infancy, and there are kinks still to be ironed out. And for EDs who don't have a pharmacist but want one, even more challenges await them.

Patient Safety

It's easy to understand why an ED might

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SPECIAL REPORT

The Great Stroke Debate For more than a decade, the buzz in emergent stroke care has been fueled by three letters: tPA. But there's more to stroke care than thrombolytics. **13**

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