

**American College of Emergency Physicians
Section of Medical Humanities**

October 28, 2019
Denver, CO

MINUTES

Participating in all or part of the meeting were: Tiffany Chroma Anaebae, MD; Laurence Conley, MD, FACEP; Henry A. Curtis, MD, FACEP; Arthur Derse, MD, JD, FACEP; Seth C. Hawkins, MD, FACEP; Tae Kim, MD, FACEP; Edward Lew, MD, FACEP; Zayir Malik, MD; Catherine Marco, MD, FACEP; Nicholas J. Sausen, MD; David Sklar, MD, MD, FACEP; Robert C. Solomon, MD, FACEP; Jonathan Warren, MD.

Others participating: Lindsay Peters, ACEP Staff; Tracy Napper, ACEP staff liaison (by phone).

Agenda

1. Call to Order
2. Current Activities
 - A. Newsletter update
 - B. Writing Award for 2019 – Prose and Poetry
 - C. Visual Arts Award for 2019
 - D. Section grant update
 - E. Council update
 - F. Writing Award Eligibility
 - G. Initiatives for 2020
3. Adjourn

Major Points Discussed

1. The meeting was called to order by section chair Seth C. Hawkins, MD, FACEP. He welcomed everyone and asked everyone present to introduce themselves.
2. New Business
 - A. Ms. Napper gave an update on the newsletter. Dr. Paganussi is awaiting a Note from the Chair from Dr. Hawkins. Ms. Napper will send him the meeting minutes and annual report. The newsletter should be ready before the holidays.
 - B. Dr. Hawkins announced that the 2019 Writing Award, prose division, went to Catherine Marco, MD, for “Travels.” Dr. Solomon presented the award to Dr. Marco. Frank Edwards, MD, won the poetry division for “Nocturne.” He was unable to attend the meeting.
 - C. Dr. Jonathan Warren received the 2019 Visual Arts Award for his artwork, “A Guiding Light.” All 3 winning pieces will be published in the next newsletter.

- D. Dr. Hawkins gave an update on the section grant project, a book that collects all of the previous Writing Award and Visual Arts awards. The book is almost complete. We are finalizing decisions about price, trim size, where and how to sell, who should receive complimentary copies, and applying for an ISBN.

Dr. Hawkins asked the section members their opinion on how to manage books sales the book once it is ready to distribute. The grant received from ACEP set retail prices at \$20 for ACEP members and \$30 for non-members. One question would be what happens to the profits that are generated. He suggested using the book revenue to provide seed money for a second volume. Dr. Sklar mentioned that if each section member were given a free copy it could encourage more people to join and contribute to the section. Should the authors receive a free copy? Dr. Hawkins also mentioned the possibility of an online interface through ACEP.

Section members are reminded of the previous section grant project, “Medical Humanities at the Bedside.” The Web site is available to all ACEP members. Members are invited to use the program and provide comments. The site is located at <https://www.acep.org/humanities-at-the-bedside/>. More resources for the Resource tab are needed.

Art Derse mentioned that there would be an AAMC CFAS Tweet chat. He suggested that members might participate and use the hashtag #ACEPMedHum. Dr. Hawkins reported that this hashtag is already somewhat in use as a general tool referencing the Section’s work and suggested this become our unified hashtag. All were in agreement.

- E. Dr. Hawkins and Dr. Solomon reported on the proceedings of the ACEP Council meeting. They provided the ACEP election results and discussed other section-related news.

Dr. Solomon said that 54 resolutions were considered by the council and the number directly related to the Medical Humanities section was zero. Resolution #13 eliminated use of the word “provider.” Provider is a generic way to refer to health care workers that render care that’s roughly on the same plane and includes physicians, physician assistants, and nurse practitioners. We want to be known as physicians and not lumped together with those who spent less time on their education. The history of the term harkens back to the Nazi era when Nazis used the term to diminish the status of Jewish physicians in Germany.

An interesting discussion ensued about the practicality of the term and the real-world implications of avoiding the word “provider” including alternative terms and the issues when writing with a word limit. Members also addressed the confusion patients have when they realize the practitioner who saw them was not a physician. It was also noted that the ACEP Board of Directors still has to approve the change.

- F. Section members discussed the eligibility requirements for the future writing awards.

Dr. Hawkins explained the history of the medical humanities section awards: In 2007 the section first offered a writing award and the criteria was that the work be publishable. Later it was determined that visual arts and poetry should be their own category for a total of three awards. The section never specified who was eligible. Dr. Hawkins asked whether the section should be recognizing emergency medicine writers/artists on a variety of topics or should the topics be limited to emergency medicine and it's less important who did the work.

Ms. Peters mentioned that you can be a member of a section without being a member of ACEP if you are not eligible for membership (eg, NP, PA, EMS, etc).

One of the members sad that his submissions are a means of expressing himself and not necessarily EM related. Broadening the parameters is a good thing.

Dr. Hawkins also mentioned that the dated (yearly) window of eligibility may not serve the section well.

It was noted that it does not cost much to make the certificates if the section decides to expand the awards.

Dr. Hawkins asked if it matters if the submitters are not involved in emergency medicine. Dr. Sklar said that more submissions are better and asked why the section would limit the ability to submit. All that matters is if it's good.

It was agreed to continue this discussion by email after the meeting.

For goals for 2020, Dr. Hawkins laid out an agenda for encouraging the relevance of medical humanities to clinical practice. He pointed out that we have established ourselves well as the leaders in artistic expression, but have not yet asserted our important role as specialists in language and visual expression insofar as it impacts clinical care. The fact that Resoluion #13 was adopted by the Council and was entirely about word choice in clinical care, and that this resolution was considered important enough for a group of Councillors to propose and a majority to adopt, speaks to the reality that these issues are central to our role as caregivers and not fringe or semantic topics. Actual project topics included setting up a copyediting service for ACEP members or leaders; writing white papers on topics about communication such as language use and EMRs; serving as a resource to ACEP leaders for communications and videos; and further promoting the Humanities at the Bedside program. For the final thoughts Dr. Henry Curtis asked for more emphasis on VR, film making, illustrations, and paintings. This lead to a discussion about roles members with visual arts skills could play in emergency department design.

Dr. Hawkins said when promoting medical humanities through social media to please use

the hashtag: #ACEPMedHum

The meeting was adjourned.