



## Emergency Medicine Fellowship Program, 2018-2019

### Executive Summary

The demand for emergency physician services will exceed the supply for the foreseeable future, especially in small cities and rural areas. Emergency Medicine residency programs will not overcome the supply deficit. Consequently, alternative pathways for training emergency physicians are needed.

Our organization is committed to serving all of our patients with compassionate, high-value emergency care. In order to promote that objective, we have established five EM Fellowship Programs to train physicians, who have completed Family Medicine, Internal Medicine, Pediatrics, Medicine/Pediatrics or other residency programs, to provide effective and efficient emergency medical care and to become independent emergency department physicians in community hospitals.

Our main training sites are located in Alabama (Decatur, Cullman, and Alabaster) and Louisiana (Monroe). Each site has secondary training hospitals to provide a variety of clinical experiences. A total of 24 fellowship positions are available for the 2018-2019 year. One application prepares the candidate for consideration at all programs.

### Our Training Sites

**Cullman Regional Medical Center** Cullman, Alabama

CRMC is a 45,000 visit, moderate-acuity ED serving a diverse patient population. Supplemental rotations occur at Highlands Medical Center (Scottsboro, AL) to provide additional small-town community hospital experiences.  
*5 fellows per year*

**Decatur Morgan Hospital – Decatur Campus** Decatur, Alabama

Decatur is a 40,000 visit, moderate-acuity ED serving a diverse urban and rural patient population. Supplemental rotations occur at Decatur Morgan Hospital – Parkway Campus (Decatur, AL) and Athens-Limestone Hospital (Athens, AL) to provide additional suburban community hospital experiences.  
*8 fellows per year*

**Princeton Baptist Medical Center** Birmingham, Alabama

PBMC is a 45,000 visit, high-acuity urban ED serving a diverse patient population. Supplemental rotations occur at Shelby Baptist Medical Center (Alabaster, AL) to provide additional community hospital experiences.  
*3 fellows per year*

**Shelby Baptist Medical Center** Alabaster, Alabama

SBMC is a 45,000 visit, moderate-acuity ED serving a diverse suburban and rural patient population. Supplemental rotations occur at Princeton Baptist Medical Center (Birmingham, AL) to provide additional urban hospital experiences.  
*3 fellows per year*

## St Francis Medical Center

Located in Monroe, Louisiana

SFMC is a 50,000 visit, moderate acuity urban ED serving a diverse patient population with a wide variety of emergency medical needs.

*4 fellows per year*

### Overview of Fellowship Activities

- Fellows will complete a one-year program of rigorous didactic learning, self-study, and mentored, direct patient care at moderate-to-high volume emergency departments.
- At monthly 4-hour didactic sessions, fellows and selected expert faculty will conduct a systematic survey of all of emergency medicine, based on the required text, *Tintinalli's Emergency Medicine*, foundational journal articles from the emergency medicine literature, case records, ECGs and imaging samples.
- During the didactic session, a group meal and discussion will focus on the ethical, social, and financial aspects of emergency medical care.
- Longitudinal experiences will occur throughout the year, as scheduled for individual fellows or small groups, to provide advanced skills in airway management, trauma, bedside ultrasound and Xray/CT interpretation, pediatric emergency medicine, EMS, EM administration, and the business of medicine.
  1. Anesthesia airway, ventilation and vascular access training occurs in a series of days in the OR with the anesthesiologists in the first months of the program.
  2. Trauma training occurs on an ad hoc basis in the ED, during dedicated didactic sessions and, outside the ED, in a formal ATLS class at the beginning of the fellowship and at high-fidelity simulation exercises throughout the year. In addition to trauma patients seen in the normal course of ED work, each fellow will be assigned one Trauma day per month during which the fellow will be responsible for every trauma patient, major and minor, on their respective specialty days.
  3. Pediatric training occurs on an ad hoc basis in the ED and, outside the ED occurs in a formal PALS class at the beginning of the fellowship and at high-fidelity simulation exercises throughout the year. Pediatric code exercises are presented by Children's Hospital of Alabama attending and nursing staff on a quarterly basis in training sites, most recently at Cullman ED March 14, 2017. Fellows will also participate in an Advanced Pediatric Life Support (APLS) retreat during the fellow year. In addition to pediatric patients seen in the normal course of ED work, each fellow will be assigned two Pediatric days per month during which the fellow will be responsible for every pediatric patient in the department on their respective specialty days. Finally, Neil Schamban, MD FACEP, a board-certified pediatric emergency medicine graduate of the Boston Children's pediatric emergency medicine fellowship program will serve as Pediatric EM champion within IMM, in addition to his duties as our regional President.
  4. Critical care training is readily available in adequate numbers during ED clinical shifts and no outside training is needed. Fellows will always be directed to the highest acuity patients during their clinical shifts. In addition, our EM Fellowship leadership team has determined that inpatient ICU rotations would not provide adequate training in the hyper-acute critical care that is essential in emergency medicine.

5. Orthopedic training is readily available in adequate numbers during ED clinical shifts and no outside training is needed.
  6. Ultrasound training is conducted during an all-day course early in the program, presented by EM Ultrasound fellowship-trained faculty, with periodic updates. Opportunities for ultrasound experience in clinical care are readily available in adequate numbers during ED clinical shifts.
  7. Radiology training is readily available in adequate numbers during ED clinical shifts and structured radiology teaching is included in the didactic program.
  8. Ophthalmology training is readily available in adequate numbers during ED clinical shifts and structured ophthalmology teaching is included in the didactic program. Eye Foundation in Birmingham will provide a skills lab with slit lamp early in fellow year.
  9. ENT training is readily available in adequate numbers during ED clinical shifts and structured ENT teaching is included in the didactic program. A Princeton ENT will provide an ENT skill lab early in fellow year.
  10. EM administration will be covered through structured literature review and periodic administrative rotations during which fellows will attend to administrative functions in addition to clinical responsibilities. Selected activities will include quality and performance management, participation during hospital committee meetings, helping with scheduling, and more.
  11. Professionalism and the business of medicine will be emphasized from the first orientation day with presentations addressing key concepts of medical ethics, customer service, inter-professional communication, and leadership. These concepts will be modeled by faculty during clinical work and reinforced throughout the year in various formats.
  12. Fellows will prepare one written case report every month September-June in the format required by the ABPS board certification process.
- All fellows will complete the fellowship with current certifications in On-line Medical Direction for EMS, ATLS, ACLS, and PALS, and go through training for the BCEM written and oral exam, so that they may pursue EM board certification as soon as the fellowship is completed.
  - Each fellow will complete 12 one-month clinical rotations at a variety of emergency department sites in Alabama. Each clinical rotation will consist of about 120 hours of mentored clinical work, emphasizing the acquisition of cognitive and technical skills in the delivery of emergency care, and characterized by progressive increases in responsibility throughout the year.
  - Each fellow will receive quarterly progress evaluations from the fellowship director, and will evaluate the faculty and program quarterly as well.
  - After successful completion of the fellowship program, the fellow will receive a certificate of accomplishment and be eligible to pursue certification in Emergency Medicine by the American Board of Physician Specialists (<http://www.abpsus.org/>).

## Fellow Selection Criteria

- Completed, or in good standing and scheduled to complete by July 1, 2018, an AOA or ACGME-accredited residency in Family Medicine, Internal Medicine, Pediatrics, or Internal Medicine/Pediatrics. Other specialty training will be considered on a case-by-case basis.
- Licensed to practice medicine in the state where training will occur before start of fellowship.
- ACLS and PALS certified.
- Able to obtain hospital credentials to practice at all training sites.
- Meet qualifications for Medicare, Medicaid, Blue Cross/Blue Shield of Alabama and other third-party payers.
- Eligible to work in the United States during the fellowship period.
- Provide a strong record of academic, clinical, and other personal achievements.
- Demonstrated commitment to clinical emergency medicine.

## Pay and Benefits

Salary, health insurance, health savings account contribution, and allowance for continuing education, licenses, and professional fees will produce a total compensation package about \$75,000. A specific employment agreement will be generated for consideration at the time of offer of a fellowship.

In addition, the fellow will be covered by the Island Medical Management professional liability insurance policy for fellowship clinical activities, on an occurrence basis with no tail coverage needed.

## Key Dates

### **Application Period | August 1, 2017 – December 31, 2017**

Early application is recommended since interview offers are made on a rolling basis. Applications outside of this period may be considered in special circumstances. Please email Dr. Heins to discuss at [aheins@immh.com](mailto:aheins@immh.com).

### **Interviews | September 15, 2017 – January 15, 2018**

Prompt acceptance and scheduling of interviews is recommended since employment offers are made on a rolling basis.

### **Offers | Rolling**

Offers to join the program will be made on a rolling basis after application review and interview until the classes at each fellowship site are full with a total of 15 fellows for the 2018-2019 academic year. Offers should be accepted or rejected within 10 days of receipt.

### **Program Starts | Monday, August 13, 2018**

For additional information, please contact the EM Fellowship Director, Alan Heins MD, MPH, FACEP, at [aheins@immh.com](mailto:aheins@immh.com).