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### **President's Corner**

David Cheever, MD, MS

Greetings New Mexico ED Docs!

I hope that you all have survived the respiratory season and are doing well as we move through the end of winter and into spring. First, I want to thank all of you for the incredible work you do on the frontlines of health care in New Mexico. It is a privilege to work with all of you and I remain incredibly impressed with the talent, strength, and compassion of ED physicians throughout the state.

It was a pleasure to see many of you at the recent NM ACEP board meeting in January. The meeting was a great success. As always, it is reaffirming that despite working in very different practice environments and hospital systems there is much that connects ED docs throughout the state. As a reminder these meetings are open to all who are interested in joining! During the meeting we discussed a variety of different advocacy issues including ED Boarding, Reproductive Health, and Burnout among our specialty.

Additionally, at the meeting we agreed to sponsor Tony Salazar, Scott Mueller and a collection of residents and medical students to travel to Washington DC for ACEP's annual Leadership and Advocacy Conference. At this conference they will advocate for our ED physicians across the state to our national congressional leaders.

If you are interested in being more involved in these (or any other!) advocacy issues or additional ACEP activities, please reach out! You can either participate in the discussion board of our EngagED online portal or just [email us](#).

Additionally, all are welcome for our annual NM ACEP meeting on April 22nd. This will be an in-person event in Albuquerque and promises to be a great event. We will have resident presentations and a few guest speakers.

I remain very excited for this chapter as we move into the spring and look forward to working with you all over the next few months.

All the best,

David Cheever  
NM ACEP President

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## **My Sunshine**

Elizabeth Lynch, MD, PGY2

I've been thinking about my grandmother a lot lately. The daughter of Irish immigrants she went on to become a teacher and mother to 8 children, all roughly a year apart. In all the chaos and stress of raising 8 children and working full time, she was famous for spending 15 minutes a day sitting in a beach chair in her front yard in Connecticut, face to the sun. Eyes closed, smile tilted towards the rays warming her face, winter, summer, spring and fall. The sun seemed to heal her, fortify her. Recently, I've been missing the sun, aching for her warm embrace. These days I go to work in the dark, leave the hospital in the dark, lost in the vacuum of stabilizing the sickest, most vulnerable patients in the hospital. I forget time is passing until someone else shows up to take over the night watch in the ICU. It is easy to lose perspective these days, my mind overwhelmed by ECMO flow rates and why my patients lactate keeps climbing. I go home and walk my dog; the moon and stars are my company. I contemplate whether my patient is going to survive the night, dreading and eagerly waiting for the morning sign-out to see if their name is still on the list. I don't know the date or day of the week. Ensnared in my ICU tower, I forget about the sun. And then one day someone mentioned "the outside." Specifically, she said we should take our patient outside. He'd been living in the ICU for 66 days and had many more ahead of him.

It took 45 minutes of preparation to maneuver his vent, chest tubes and suction, wound vac's, IV poles and monitor out the door of his room and down the hall to the patio. He lasted 10 minutes, tears rolling down his face as the sun set somewhere behind us and we watched the golden light slide down the building across from us. He didn't say much, after a few minutes he asked to go back inside. He didn't ask to go back outside again.

If I only let myself exist in this void, I can pretend I'm not missing something, like time and life aren't passing by "outside." But then I go out to the patio with X, and I the feeling of the sun warming me from the inside out. It feels so good it almost hurts, gently reminding me that I missed my Mom's birthday again, forgot to call my sister yesterday, the sun illuminating the world outside. I wonder if X felt the same thing when he saw the world outside the ICU again. If it was just too much.

We turned some of our patients' beds this week. The patients who have been living in the ICU for months. Just 45 degrees, a small axis rotation, but enough to see a sliver of

natural light, the dawning of a new day, the dusk settling in at night. Maybe it will help, maybe it won't, maybe they will ask to be switched back, the thought of time and days passing them by just too overwhelming. My grandmother died in an ICU. I didn't get to see her before she died, but I think of her when I walk the halls of the ICU. I hope someone turned her towards the sun, I hope someone took her outside. I hope she knows I'll try to never take my moments in the sun for granted, for her, and those who never get to leave the ICU.

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## FROM NATIONAL ACEP



### ACEP Resources & Latest News

#### **Surprise Billing, Rattlesnakes and Negligence: ACEP Files Two New Amicus Briefs**

Earlier this week, ACEP and its other medical society partners filed two amicus briefs in our continual fight for the rights and protection of our members. The first case deals with surprise billing independent dispute resolution implementation, while the second involves a debate about hospital protocols for snake bites that has broader implications for physician liability. Courtroom advocacy is just one of the ways ACEP fights to protect the rights of its members. In fact, ACEP's legal actions have increased by more than 400 percent this year. [Read more about these cases and ACEP's official comments.](#)

#### **ACEP Responds to Medicare Advantage Proposed Regulations as CMS Attempts to Reign in Some Bad Health Plan Behavior**

[Learn more](#) about how ACEP has responded to CMS' recent efforts to crack down on this bad health insurer behavior and what we believe still needs to be done.

#### **Where We Have Been, Where We Are Now, and Where We Go Next - Black History Month Special**

A new episode of ACEP Frontline features special guests Dr. Ugo Ezenkwele, Dr. Adaira Landry and Dr. Alister Martin discussing health equity and pushing for positive change. [Listen in.](#)

#### **Innovative Telehealth Models Can Benefit Geriatric Emergency Care**

It's time for the fourth installment of this special blog series delving into the concept of value-based care in emergency medicine. This one examines the innovative

practice models that enable you to utilize your unique skill set outside the four walls of the ED — specifically how emergency telehealth services have been a helpful tool for geriatric patients. [Read More](#).

### **X-Waiver No Longer Required to Treat Opioid Use Disorder**

The X-waiver requirement is officially rescinded! On January 12, 2023, the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Drug Enforcement Administration (DEA) issued guidance on the removal of the X-waiver — an ACEP priority that was included in the Consolidated Appropriations Act, 2023. [Read More](#).

### **Tell Your Story, Help Change Things for the Better**

It's almost time for the 2023 Leadership & Advocacy Conference! Emergency physicians across the country will come together in Washington, DC, for this intimate educational and networking event where they receive leadership and lobbying instruction and get to meet with legislators to talk about the issues that affect EM physicians every day. You may think your individual voice can't move the needle. In reality, your firsthand stories and experiences make our key advocacy issues come to life for legislators. When they hear from you, it stops being an abstract problem and becomes a real, tangible issue they need to address. LAC training teaches you how to share your personal experiences in a way that makes a positive impact for your specialty. You'll come home empowered to keep advocating for change at every level, from your facility to your state and beyond. [Save \\$100 on LAC23 registration with promo code LEADERSHIP23](#).

### **Heart Month: New ACEP Clinical Policy Examines Acute Heart Failure Syndromes**

One of ACEP's newest clinical policies answers four critical questions for the management adult patients who present to the ED with suspected acute heart failure syndrome:

- Is the diagnostic accuracy of point-of-care lung ultrasound sufficient to direct clinical management?
- Is early administration of diuretics safe and effective?
- Is vasodilator therapy with high-dose nitroglycerin administration safe and effective?
- Is there a defined group that may be safely discharged home for outpatient follow-up?

[View this clinical policy](#).

### **Catch up on latest ACEP Frontline episodes:**

- [Having a Bloody Good Time with Dr. Megan Osborn](#)
- [ChatGPT and Healthcare with Dr. Harvey Castro](#)
- [ACS and Troponin Chat with Dr. Deborah Diercks](#)

## **Upcoming ACEP Events and Deadlines**

**March 15:** [Bias and Diagnostic Anchoring of the Behavioral Health/SUD Patient and How that Impacts Care](#)

**March 15:** Deadline to apply for [ACEP Board, Council Officer roles](#)

**March 28:** Deadline to sign up for the [E-QUAL Stroke Wave](#)

**March 31-April 3:** [ACEP's Advanced Pediatric EM Assembly](#)

**April 13-15:** [EM Basic Research Skills, Session II](#)

**April 15:** Nominations are due for [ACEP's Teaching Awards](#)

**April 17:** Deadline to apply for [new \\$150k EMF grant to support diagnostic excellence](#)

**April 30-May 2:** [ACEP Leadership & Advocacy Conference](#) (use promo code LEADERSHIP23 to save \$100 on registration!)

**May 3:** Deadline to submit your abstract for the [2023 Research Forum in Philly](#)

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