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From the AAEM's President
reproduced from Common Sense

Pandora's Box

by Antoine Kazzi, MD, FAAEM

“We can go on like this – recreating and reflecting the existing images of each other, and reflecting these reflections – endlessly – as in a hall of mirrors. The result will be that all of us will be locked in endless agony in a hall of mirrors of our own creation and from which there is no exit.

Or we can begin by adopting one certain integrity – a certain generosity - in the use of language.

That is not too hard. It's the easiest of the hard things that must be done if we are ever to come to peace with one another, and so with ourselves.”

Adapted from a statement by Journalist Michael Elkins, In the *Jerusalem Post*, Nov 1983

Dear Colleagues and Friends,

I choose to begin this President's Message with words that stuck with me for over two decades. I wish to resurface them here for their relevance to what I predict will be judged in the future as one of the most turbulent times in the history of our specialty. The Florida Board Certification conflict is and will always be remembered one that defined the future of Emergency Medicine as a primary specialty, answering the core question: Will EM ever succeed in commanding the respect of other disciplines in the house of medicine?

Emergency Medicine is currently at one of its most critical junctions - facing the most serious challenge to its existence since it was first recognized by the House of Medicine (the AMA, the AOA, the ABMS, and the ACGME) as a separate primary discipline with its own body of knowledge, curriculum, accredited training and certification process.

In my last President Message, I alerted you to what happened in Florida under the radar screens of all EM leaders who are genuine in their commitment to EM residency training and board certification. In this Common Sense issue (CS), the Chair of the AAEM Florida Board Certification Taskforce Mark Foppe, DO, FAAEM, FACOEP, and AAEM Board member Howard Blumstein, MD, FAAEM (as our new CS Editor) discuss this matter and its implications. I apologize for repeating some of what was stated in the last issue or in their articles and have sectioned my message into a number of segments that address different angles of the matter.

1) Overview of what happened in Florida:

In 2002, the Florida Board of Medicine (FBM) voted to allow AAPS as a third certifying body in the state of Florida (ABMS and AOA being the other two). This gave the holders of its BCEM certificates ground to advertise themselves as Emergency Physicians with comparable qualifications to ABEM and AOBEM graduates. The Florida Osteopathic Board of Medicine did the same.

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This was all based on flawed 2001 testimony and a travesty hearing where EM stakeholders were not invited and major differences between AAPS and ABEM/AOBEM were omitted (such as the absence of a requirement for specialty-specific EM residency training in BCEM). EM was misrepresented and appalling conflicts of interests (among witnesses who were FBM board members) were omitted or disregarded in the process. AAPS lined up 14 witnesses (out of 19) who interestingly were nearly all BCEM-certificate holders of AAPS – indicating that the AAPS move in Florida was staged primarily by BCEM certificate holders. Only four witnesses clearly opposed the AAPS petition to the FBM. They represented Dermatology, ENT and Plastics. The only EM specialty organization who knew about any of this sent one representative who provided testimony that was sympathetic to the AAPS claim. AAEM, ACOEP, SAEM, AACEM, CORD, EMRA, and the ACEP Councilors and membership were not notified of any of these developments and this stayed under their radar screens until it was uncovered and forwarded by AAEM to the rest of EM community.

In 2003-2004, AAPS (BCEM) found powerful legislators to sponsor a bill that would have provided their certificate holders equal status with ABMS. Such a status would have given BCEM and AAPS legal ground to sue in any context where they perceived discrimination against their certificate holders. No one opposed this bill. The Florida Medical Association attempted to secure the input of specialty societies to determine if it should or should not oppose it. No one responded. No one worked with the FMA to oppose it. So, the FMA dropped their opposition. It passed the house (110-0!) and almost passed the senate was it not for a glitch that delayed it in one committee. It is expected to come back this year. AAEM, EMRA, ACOEP, CORD, AACEM, SAEM and the ACEP Council & members did not know about this until May 2004 when AAEM uncovered it and brought it up to all of the other EM organizations.

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