The 2013 ASER Annual Meeting and 25th Anniversary Celebration in Boston last October was a resounding success, and I am grateful to all of the ASER officers and members and the attendees who are responsible for that success. The Hyatt Cambridge provided the ideal venue for our meeting, allowing us to overlook the Charles River and Boston, where the society was conceived by our Founders 25 years ago. I hope that you were able to join us for the meeting, which gave us the chance to honor the many achievements of the Society and its members and reflect on the tremendous progress that has been made in development of Emergency Radiology as an important subspecialty of Radiology.

As we move into the next quarter century of our history, there continues to be much work to be done. Emergency Radiologists are increasingly valued as vital members of the health care team in hospitals, ambulatory centers, and emergency departments. The body of knowledge that is required to practice in the emergency setting is substantial and growing. Fortunately, we have seen many new Emergency Radiology fellowship programs become established in the past year, increasing our ability to provide dedicated subspecialty service to a greater number of facilities and patients. The ASER Education Committee has been working hard to increase and improve the educational products offered by the Society to its members. The Core Curriculum Project has published many new cases that are available through the website. A new textbook on emergency imaging, written and edited by ASER members, is nearing completion and will be available for purchase later this year. The new ACR Education Center course in Emergency Radiology has been very popular during its inaugural year, thanks to the contributions of outstanding teachers in ASER. Our journal, Emergency Radiology, has grown in size, quality, and circulation. Journal submissions are numerous and are of excellent quality, and citations of the articles published are increasing.

ASER members have become involved in multiple collaborative projects and programs. For the first time, ASER is serving as a collaborating society for the development of Practice Guidelines of the ACR. The first collaborative guideline that included ASER was the Practice Guideline for Performance of Pediatric CT, approved at the ACR meeting in April. I hope that we will continue to be sought for our expertise in development of such guidelines and that members will give generously of their time for such projects. ASER has agreed to be a co-sponsor of a Consensus Conference on Evidence-based Imaging in Emergency Departments, being organized by the Society of Academic Emergency Medicine in spring of 2015. Several ASER members will be speaking and leading breakout sessions at this important conference.

New committees have been created to allow more of our members to become actively involved in ASER. The International Committee was formed to provide an opportunity for members from around the world to share ideas with each other and with Emergency Radiology societies that are being established in many parts of the world, to work with ASER to promote Emergency Radiology as a subspecialty in all continents. A new online forum is available, to facilitate communication between members. The Teleradiology/Nighttime Coverage committee has been formed to discuss the challenges of ASER members who practice in such areas and to become a resource for other members. I want to thank all of the ASER members who volunteered to serve on committees; we will do our best to try to connect you with a committee that matches your interests and skills.

The ASER 2014 Annual Meeting and Course is rapidly approaching. The meeting will be held in the fascinating and beautiful city of Portland, Oregon, at The Nines Hotel. The venue and city have a very different atmosphere compared to Boston, but the meeting and course will provide the same outstanding educational programs that you have come to expect from ASER. The popular Trauma Head-to-Toe Course will present state of the art information about trauma imaging and interventions. Social events include winery and brewery tours and Siemens Medical Solutions USA will be hosting a Satellite Symposium and Reception as well. As always, we will try to provide many opportunities for attendees to meet, discuss issues, share solutions, and enjoy the company of others who are committed to the care of patients in emergency departments.

I look forward to seeing all of you in Portland.

STEPHEN HATEM, MD
PAST PRESIDENT

“Any discussion of the evolution of emergency radiology to its current level of recognized status would be deficient if the role and influence of the American Society of Emergency Radiology were omitted. The practice of emergency radiology and the Society have grown as one.”

--John H. Harris, Jr., M.D., D.Sc.2

So starts the ASER history recently published in celebration of the Society’s Silver Anniversary. Authors Bob Novelline, M.D., a Founding Father, and Steve Hatem, M.D., the Immediate Past President, themselves bookend 25 years of Society growth. More than just a discussion of the Society itself, the history helps trace the arc of the practice of emergency radiology and its struggle for acceptance as its own radiology specialty. Dr. Harris’s quote kicks off the article with an eloquent statement of perhaps ASER’s crowning achievement to date: the specialty and Society are thought of as one.

At a manageable 17 pages, the history offers a concise review of key events of the past quarter century, culled from Society publications, meeting minutes, and interviews with and anecdotes from past and present ASER members. I encourage you to read it as a reminder of how far emergency radiology has come as a specialty, and as a roadmap for how and where the specialty wants to end up. This has never been more important than now, at least in the United States, with the radical changes health care is undergoing. As proven time and again over the past quarter century, ASER is up for the challenge.

Please contact the ASER office for the complete Looking Back, Moving Forward: 1988-2013, The First 25 Years of The American Society of Emergency Radiology article, written by Stephen Hatem, MD.


The ASER 25th Anniversary Scientific Meeting and Postgraduate Course, held record high attendance of 417 professional registrants, 149 spouses/guests, and 11 exhibitor representatives. There was a strong international representation at the meeting, with 40 of the attendees practicing from outside of the US.

To celebrate the 25th Anniversary of the Annual Meeting, the program included a Founders’ session on each day. The scientific portion of the program included 16 papers, 143 electronic posters, and 16 “Cases-of-the-Day.” The meeting offered two Self-Assessment Modules, “Neuroradiology Emergencies Trauma” and “Trauma Head-to-Toe: Torso Trauma”. These SAMs were qualified by the American Board of Radiology in meeting the criteria for self-assessment toward the purpose of fulfilling requirements in the ABR Maintenance of Certification Program.

The course consisted of presentations from 74 faculty members, 63 of whom are ASER members. From the opening session until the closing session, attendance was great, with many of the attendees participating in the question and answer period at the end of each session. The ASER truly thanks its corporate supporters and exhibitors for their invaluable support.

Special thanks to Dr. Carson and Dr. Bernstein for their contributions in designing the ASER logo.

The Society owes the following meeting organization for a job well done.

<table>
<thead>
<tr>
<th>ASER President</th>
<th>Susan John, MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Director</td>
<td>Douglas S. Katz, MD, FACR</td>
</tr>
<tr>
<td>Scientific Program Coordinator</td>
<td>Thomas Ptak, MD, PhD, MPH</td>
</tr>
<tr>
<td>Cases of the Day Coordinator</td>
<td>Andrew Gelbman, DO, PhD</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Committee Members</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephan Anderson, MD</td>
<td>Manikum Kumaravel, MD</td>
</tr>
<tr>
<td>Ferco Berger, MD</td>
<td>Stephen Ledbetter, MD</td>
</tr>
<tr>
<td>Mark Bernstein, MD</td>
<td>Charles Lutterton, MD</td>
</tr>
<tr>
<td>Andrew Gelbman, DO</td>
<td>Felipe Munera, MD</td>
</tr>
<tr>
<td>Joel Gross, MD</td>
<td>Robert Novelline, MD</td>
</tr>
<tr>
<td>Martin Gunn, MB ChB</td>
<td>Tom Ptak, MD</td>
</tr>
<tr>
<td>Stephen Hatem, MD</td>
<td>Jorge Soto, MD</td>
</tr>
<tr>
<td>Susan John, MD</td>
<td>Anthony Wilson, MB ChB</td>
</tr>
<tr>
<td>Kate Klein, MD</td>
<td>Joseph Yu, MD</td>
</tr>
<tr>
<td>Wayne Kubal, MD</td>
<td>Ronald Zagoria, MDR</td>
</tr>
</tbody>
</table>

Special thanks to Robert Novelline, MD for organizing the tour. 52 ASER attendees had the opportunity tour the facility. Picture taken at the Ether Dome at the hospital.
At the **Awards Ceremony**, the ASER recognized the hard work and dedication of Founding and Charter Members, Past Presidents, Gold Medalists, and Fellow Honorees.

**New ASER Fellows:**

*Joseph S. Yu, MD*
Ohio State University (left)

*Ronald J. Zagoria, MD, FACR*
University of California, San Francisco (right).

**Founding Members**
Gordon C. Carson, MD

John H. Harris, Jr., MD, ScD

Alan Klein, MD

James J. McCort, MD

Stuart E. Mirvis, MD, FACR

Charles F. Mueller, MD

Robert A. Novelline, MD, FACR

**Charter Members**
John V. Crues, MD

William A. Finger, MD

Denise G.K. Gray, MD

Phyllis J. Komrath, MD

James Lawrason, MD

Henry Lerner, MD

James T. Rhea, MD, FACR

Salvatore J.A. Sclafani, MD

Barbara N. Weissman, MD

Gertraud Wollischlaeger, MD

**2013 MEETING AWARD RECIPIENTS**

**Founders’ Lecturer**
Paul J. Chang, MD, FSIIIM
Alasdair K. Conn, MD
F.A. Mann, MD
Stuart E. Mirvis, MD, FACR
Robert A. Novelline, MD, FACR
Diego B. Nuñez, MD, MPH
O. Clark West, MD, FACR

**1st Place Award**
Joseph S. Yu, MD
Ronald J. Zagoria, MD, FACR

**Founding and Charter Members, Past Presidents, Gold Medalists, and Fellow Honorees.**

**1st Place Paper Award**
Jeremy Wortman, MD

**2nd Place Paper Award**
Elizabeth George, MBBS

**3rd Place Paper Award**
Anjali Agrawal, MD

**1st Place Poster Award**
Douglas S. Katz, MD, FACR

**2nd Place Poster Award**
Yasumo Shinjo, MD

**3rd Place Poster Award**
Susanna Spence, MD

**Certificates of Merit**

Douglas S. Katz, MD, FACR

Sirote Wongwaisayawan, MD

**Harris Award**
Jeremy Wortman, MD

**Novelline Award**
Yasumo Shinjo, MD

**Case of the Day**
Gustav Blomquist, MD

**Past Gold Medalists**

<table>
<thead>
<tr>
<th>Year</th>
<th>Recipient</th>
<th>Year</th>
<th>Recipient</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>Stephen F. Hatem, MD</td>
<td>2010</td>
<td>Carlos J. Svir, MD</td>
</tr>
<tr>
<td>2011</td>
<td>Anthony J. Wilson, MB ChB</td>
<td>2008</td>
<td>O. Clark West, MD, FACR</td>
</tr>
<tr>
<td>2010</td>
<td>Leonard E. Swischuk, MD, FACR</td>
<td>2006</td>
<td>Robert Novelline, MD</td>
</tr>
<tr>
<td>2009</td>
<td>O. Clark West, MD, FACR</td>
<td>2004</td>
<td>John H. Harris, Jr., MD, ScD</td>
</tr>
<tr>
<td>2008</td>
<td>Carlos J. Svir, MD</td>
<td>2002</td>
<td>Diego B. Nuñez, MD</td>
</tr>
<tr>
<td>2007</td>
<td>Lee F. Rogers, MD, FACR</td>
<td>2001</td>
<td>Susan D. John, MD, FACR</td>
</tr>
<tr>
<td>2006</td>
<td>Stanford M. Goldman, MD, FACR</td>
<td>2000</td>
<td>Stephen F. Hatem, MD</td>
</tr>
<tr>
<td>2005</td>
<td>F. A. Mann, MD</td>
<td>1999</td>
<td>Robert A. Novelline, MD, FACR</td>
</tr>
<tr>
<td>2004</td>
<td>Diego B. Nuñez, MD, MPH</td>
<td>1998</td>
<td>Robert Novelline, MD</td>
</tr>
<tr>
<td>2003</td>
<td>Stuart E. Mirvis, MD, FACR</td>
<td>1997</td>
<td>Anthony J. Wilson, MD, FACR</td>
</tr>
<tr>
<td>2002</td>
<td>James T. Rhea, MD, FACR</td>
<td>1996</td>
<td>O. Clark West, MD, FACR</td>
</tr>
<tr>
<td>2001</td>
<td>Stephen R. Baker, MD</td>
<td>1995</td>
<td>John H. Harris, Jr., MD, ScD</td>
</tr>
<tr>
<td>1995-96</td>
<td>Charles F. Mueller, MD</td>
<td>1994-95</td>
<td>Theodore E. Keats, MD</td>
</tr>
<tr>
<td>1993-94</td>
<td>Robert A. Novelline, MD, FACR</td>
<td>1993-94</td>
<td>Daniel R. Gavoty, MD</td>
</tr>
<tr>
<td>1992-93</td>
<td>John H. Harris, Jr., MD, ScD</td>
<td>1991-92</td>
<td>Robert A. Novelline, MD, FACR</td>
</tr>
<tr>
<td>1988-91</td>
<td>Theodore E. Keats, MD</td>
<td>1988-91</td>
<td>John H. Harris, Jr., MD, ScD</td>
</tr>
</tbody>
</table>

**Current and Past ASER Presidents**

Stephen F. Hatem, MD

Anthony J. Wilson, MB ChB

O. Clark West, MD, FACR

Carlos J. Svir, MD

Stanford M. Goldman, MD, FACR

Salvatore J. A. Sclafani, MD

Quentin N. Anderson, MD

Michael Zucker, MD

James T. Rhea, MD, FACR

Stephen R. Baker, MD

Diego B. Nuñez, MD, MPH

F. A. Mann, MD

Daniel R. Gavoty, MD

Robert A. Novelline, MD, FACR

John H. Harris, Jr., MD, ScD
As always, we are looking for people eager to help us make ASER stronger, and welcome additional members to our subcommittees. We currently have the following subcommittees: Core Curriculum (Chair, Ken Linnau), Resident Education (Chair, Joe Yu), Fellow Education (Chair, Manickam “Nicks” Kumaravel), Web and Social Media (Chair, Tim Myers), Educational Development Tools (Chair, Susanna Spence). The last two subcommittees mentioned above have only three members each and could particularly use some young doctors ‘in the know’ to get involved. So, if you have strong social media skills, ideas about how to improve our website or are good at creating interactive multimedia teaching tools, these are a great way to be part of the machinery that makes ASER run.

The Core Curriculum Illustration Project has three section head vacancies: Chest, Male GU, and OB/GYN. Anybody interested should contact me or Ken Linnau. We’d like to welcome Dr. Jonathan Loewen as new section head for the Pediatric section of the CCIP, and thank Dr. Verghese George for his past service covering the OB/GYN section. Since our last meeting in Boston, case submissions have picked up substantially, but we still need more help. We are always interested in anyone, committee member or not, to submit cases online at aser.mypacs.net. There has been a recent change in the MyPACS software format intended to improve it substantially. It has a new look and advanced functionality, which will help us develop online quizzes and CME (a goal for the future). Please visit the cases on ASER.mypacs.net. If you aren’t registered, the validation code is “erad”.

The Resident Education Subcommittee has been idle for the last 6 months awaiting the completion of the ASER backed textbook authored by ASER members Stu Mirvis, Wayne Kubal, K. Shanmuganathan, Jorge Soto, and Joseph Yu entitled Problem Solving in Emergency Radiology which is scheduled to launch, hopefully, at the time of our annual meeting in Portland, OR. The immediate goal is to correlate the current top 20 diagnosis lists from members of our committee and correlate them with their location in the textbooks and then to decide whether to roll out study guidelines or create new ones to facilitate the future formation of a proficiency examination. We also plan to investigate the utilization of ASER resources to create a more robust education repository to engage more radiologists into interacting with our webpage and to entice them to join our society. This will be done in conjunction with the Educational Development Tools subcommittee, which is chaired by Dr. Spence.

We have 10 hyperlinks for emergency radiology fellowship positions on http://www.erad.org and periodically check them to make sure they are all working properly. At the time of writing this article, only two of the links are broken and we expect to have them both corrected by the time of publication. Do you know of any other fellowship programs in Emergency Radiology? If so, please let us know too, so we can get them listed on our website (ronald.m.bilow@uth.tmc.edu). If you are considering or in the process of starting an emergency radiology fellowship program, please contact us for help, as this is another function of the subcommittee. We know of one program, LA-USC, in the process of creating a new fellowship, and have been communicating with them to some degree. The Fellowship Education subcommittee is still working on guidelines for educational content. This will not be a mandate, but more a recommendation that the proposed concepts are included in emergency radiology fellowship training. This is expected to include things like management of mass casualty situations from a radiological standpoint and managing patient throughput in emergency imaging services, in addition to other topics. This subcommittee is also reaching out to residents through such avenues as RSNA, where a QR code was placed on their notice board last Fall. Lastly, the fellowship education committee also plans to ask all existing programs to require their fellows participate in the CCIP case illustrations by submitting at least two cases during the course of their training.

Our Social Media impact has grown from 229 twitter followers last year to 340 followers, currently (when I wrote this), and from likes on our Facebook page last year to 97 likes currently. Tim’s got his hands full and needs your help! If you have inklings to get on Twitter and Facebook regularly, please consider signing up with this committee to help keep the tweets and Facebook posts rolling. Look for me (Ron) or Tim at ASER this Fall in Portland, or shoot me an email (ronald.m.bilow@uth.tmc.edu). Even if you’re not inclined to sign up, please ‘like’ us on Facebook (type out American Society of Emergency Radiology in the search bar) and ‘follow’ us on Twitter (@ASER_Erad)!

Our newest subcommittee, Educational Development Tools, is working on creating interactive online teaching modules for www.erad.org. Dr. Susanna Spence, subcommittee Chair, is working on the AAST grading system for liver injuries, and Dr. Suzanne Chong is working on the AAST grading system for kidney injuries (hmmm...if your name is Susan, Susie, Suzanne, Susanna or some other form of the name, this may be the perfect committee for you). Ok, all kidding aside, there’s plenty of work to be done, and there may even be some funding in the future to hire professional multimedia specialists if that’s not exactly your thing, but you still want to participate.

Hope to see everyone in Portland 😊
Chairman of the ACR board of Chancellors Report by Paul H. Ellenbogen, MD, FACR. Dr. Ellenbogen began his report by tracing the career and contributions of outgoing CEO Harvey L. Neiman, MD, FACR. Under Neiman’s guidance, the ACR established the JACR®, the Education Center, the Radiology Leadership Institute, the Neiman Health Policy Institute, the Imaging 3.0™ campaign, and many more important initiatives. Ellenbogen then welcomed William T. Thorwarth Jr., MD, FACR, the College’s new CEO. Thorwarth has served the College in a variety of roles, including president, chair of the ACR Commission on Economics, and chair of the AMA CPT® Editorial Panel.

Ellenbogen then outlined some of the major achievements of the past year:

- The JACR commemorated its 10-year anniversary.
- The Imaging 3.0 campaign gained widespread support throughout the specialty.
- The first Global Summit on Radiological Quality and Safety was held.
- Lung cancer screening won the support of the U.S. Preventive Services Task Force.
- The 5th edition of BI-RADS® was released.
- Congress enacted the sustainable growth-rate patch with provisions for imaging clinical-decision support.

CEO Report: by William T. Thorwarth, Jr. MD, FACR

Thorwarth highlighted the efforts of the College’s economics and government relations staff to protect radiologists’ reimbursements. Legislation was recently modified to include the following provisions: averting the anticipated 24 percent sustainable growth rate reimbursement reduction to all physicians, stipulating the use of appropriate use criteria developed by national medical societies, calling for CMS to justify the professional component multiple procedure payment reduction, and limiting the maximum CMS payment reduction for any service in a given year.

“The ACR Commission on Quality and Safety continues to lead in an ever demanding world of health-care accountability,” said Thorwarth. The ACR has submitted a nomination to CMS for its National Radiology Data Registry™ to be approved as a qualified clinical data registry (QCDR) for satisfying Physician Quality Reporting System program requirements.

Convocation and Honors

AMCLC leaders honored 2014 fellows, honorary fellows, and gold medalists. This year 118 fellows assembled to be honored for their achievements. In addition to recognizing new fellows, AMCLC recognized this year’s honorary fellows, Michel Claudon, MD, of Nancy, France, and Gabriel P. Krestin, MD, PhD, of Rotterdam, Netherlands. At the convocation, the College also presented its most prestigious award, the ACR Gold Medal. This year’s recipients were N. Reed Dunnick, MD, FACR, of Ann Arbor, Mich., Carol M. Rumack, MD, FACR, of Aurora, Colo., and James H. Thrall, MD, FACR, of Boston.

RFS and YPS Reports

As part of Monday’s AMCLC programming, leaders representing the Resident and Fellow Section (RFS), the ABR, the Young and Early Career Physician Section (YPS), clinical research, and the Neiman Health Policy Institute (HPI) reported on activities, accomplishments, challenges, and plans for the future. RFS (Resident Fellow Section) Chair Jonathan A. Flug, MD, MBA, began by highlighting RFS activities at AMCLC, including special sections, debates, and the ACR-RSNA-ARRS Reception. He also called attention to the RFS online poster session, available here. The RFS aims to increase collaboration both within the College and with other radiology societies.

Next, Charles W. Bowkley III, MD, YPS (Young Physician Section) chair, delivered his report outlining the current initiatives of this newer section, established in 2012. YPS members practice in a unique set of circumstances, said Bowkley. As they enter practice, most are learning to balance their personal and professional lives. They are navigating a changing health-care system, paying off debt, and building a career. Although approximately 12,676 radiologists in the United States qualify as young and early career physicians, current membership in the YPS stands at 6,625.

ABR Report

James P. Borgstede, MD, FACR, American Board of Radiology president, updated the College on changes to the ABR Maintenance of Certification (MOC) program. He discussed the transformational changes in medicine specific to radiology, including:

- Greater patient expectations regarding direct results communication
- Growing apprehension regarding the safe and effective use of radiation and imaging tests
- Questions from patients and referring physicians on the accuracy, speed, and safety of an imaging examination and its appropriate interpretation

One way to respond to these challenges, said Borgstede, is through continuous education. “ABR certification exemplifies quality and maintenance of quality through certification and MOC,” he said. “Studies show a link between MOC and improved clinical performance and outcomes.” The ABR is introducing new computer-based qualifying and certifying exams in diagnostic radiology. After 80 years of use, the oral examination will end in 2014. In addition, said Borgstede,
“MOC, required for all diplomates certified since 2002, has transformed to continuous certification.” Borgstede also touched on practice quality improvement projects. “Through MOC Part 4 practice quality improvement projects, ABR diplomates demonstrate their value by improving outcomes through accurate and timely interpretations and a commitment to radiation and other safety measures,” he said.

**Eric Cantor Speech:** The College honored U.S. House Majority Leader Eric Cantor (R-Va.) with a Congressional Health-Care Achievement Award. Cantor played an important role in the passage of several ACR-backed provisions. (Read more about them here. During his brief remarks, Cantor complimented the ACR for its "engagement in democracy ... Being the voice of reason." He said most federal lawmakers support SGR repeal. "But we are not there yet," he added. He backed an incremental approach to health-care reform, such as the recently passed Gabriella Miller Act, which redirects $123 million in federal funds to pediatric medical research at NIH.

**Moreton Lecture: Michael E. Porter**
Monday afternoon, Michael E. Porter, Bishop William Lawrence University Professor at Harvard Business School in Boston, presented his much-anticipated Moreton Lecture, "Value-Based Health-Care Delivery." The lecture focused on the challenges to radiology, its goals, and what Porter called the principles of delivering high value.

**Economics Program:** Tuesday morning AMCLC participants learned about the efforts of the College’s economics team. Led by Geraldine B. McGinty, MD, MBA, FACR, the session focused on the tenets of Imaging 3.0™: how to ensure and demonstrate the value of radiology to all stakeholders from patients to payers. Such topics as the team’s efforts within the RUC, HOPPS, and with CMS and other payers, were discussed within the Imaging 3.0 framework. Raymond K. Tu, MD, FACR; Christopher G. Ullrich, MD, FACR; Daniel Picus, MD, FACR, FSIR, RCC; James V. Rawson, MD, FACR; Mark O. Bernardy, MD, FACR; and Robert K. Zeman, MD, FACR, rounded out the session with coverage of local and national payment structures and clinical decision support, including ACR Select. All of the speaker presentations and additional background material and resources are available in the ACR's Imaging 3.0 toolkit.

**Helen Darling Presentation: Moment of Opportunity:** At Tuesday's lunch presentation, Helen Darling, president of the National Business Group on Health, shared the challenges in this era of health care reform from a different perspective: that of employers. One common goal shared by the business and physician communities, noted Darling, is to "deliver high quality, safe, science-driven health care at a sustainable, affordable cost." How employers go about doing this, however, can vary depending on the organization.

**Resolution Involving the ASER**
Members for the ASER participated in the preparation of Resolution #3 which was accepted and passed. (ACR–ASER–SCBT–MR–SPR Practice Guideline for the Performance of Pediatric CSC 30 Computed Tomography (CT))

**ACR Education Center**
The next ASER sponsored course on “Emergency Imaging for the General Radiologist” is scheduled from August 8-10, 2014

---

**EMERGENCY RADIOLOGY**

**RONALD J. ZAGORIA, MD, EDITOR-IN-CHIEF**

Emergency Radiology, the official journal of the American Society of Emergency Radiology (ASER) is prospering. During the past year submissions have been excellent in both quantity and quality. New features in the journal support ASER's educational mission. This year educational cases from ASER's Core Curriculum and illustrative cases from The Brigham and Women’s Hospital with surgical correlation have been published regularly, in addition to the scientific content in each issue. Dr. Leonard Swischuk has continued his excellent column on trauma issues unique to children that is featured in each issue. These articles, written by one of the leading experts in pediatric radiology, highlight information specific to pediatric trauma.

Emergency Radiology also published an article highlighting the history of ASER to help celebrate its first 25 years. The Editorial Board and ASER’s Executive Committee are evaluating a proposal to publish peer-reviewed articles from trainees in each issue with the intent of highlighting the young talent in our field. This feature, called the “Rising Stars” section in the journal was conceived and is being administered by Faisal Khosa, an ASER member.

I have enrolled many new expert reviewers and we have a great team for the journal. For those of you who are reviewers, I thank you for the work you do for our journal. It is essential for success. Even with our high submission rate, we maintained a rapid process for reviewing submitted manuscripts.

For this year, I welcome ASER members to volunteer to become reviewers for Emergency Radiology.

Through the help of our reviewers, Editorial Board, and authors, the journal is prospering.

I am very proud of the quality of the journal and of the strong alliance with ASER. If you have suggestions or comments please feel free to contact me at the University of California, San Francisco. My email address is Ron.Zagoria@UCSF.edu.
MEMBERSHIP UPDATE
SRAVANTHI REDDY, MD, CHAIR, MEMBERSHIP COMMITTEE

2014 Membership Dues
Notices to pay membership dues have been sent; and if you have not already paid your 2014 dues, please remember to do so. Dues can be submitted via email, fax, mail or online. To obtain a copy of your invoice, please visit the ASER homepage, www.erad.org, and click on the gold icon for “My Membership Account” on the left hand side; this will direct you to the Members Online payment site.

Welcome New Members
Since the last newsletter, the Membership Committee has had an influx of 243 new Society members including 83 Active, 1 Active Military, 2 Associate and 157 Members-in-Training. To view the complete list, click here, and join us in extending a warm welcome to the Society’s newest members.

The Society is grateful to the many of you who have actively promoted ASER in your lectures, to your partners, residents and clinical colleagues; and we encourage you all to keep up the good work. The Society is only as strong and active as its membership. Happily, we are thriving, but, as always, looking for more ways to promote the Society as the voice of, and driving force behind, Emergency Radiology. Please forward any suggestions for improving member services or for new recruitment to me, Sravanthi Reddy at sravanthi.reddy@usc.edu.

How to Join the ASER
Radiologists, scientists, imaging technologists, physician assistants in radiology, practice assistants in radiology, or non-radiological physicians with an interest in Emergency Radiology whose credentials are acceptable to the Membership Committee, and who are interested in promoting the goals of the American Society of Emergency Radiology are invited to complete the application form. New applications are reviewed on a monthly basis by the Membership Committee. Upon approval, notification of official acceptance will be sent. To download a printable membership application, please click on the following link, ASER Membership Application. For additional information regarding ASER membership, please visit the ASER website at www.erad.org.

Military Discount
If you qualify for Active or Associate membership within the ASER and are in full-time training duty in one of the US Military, then you are eligible for a membership discount. These branches include: Army, Navy, Coast Guard, Air Force, USMC, Reserve/National Guard.

All Members-in-Training Receive FREE Membership in the ASER. The Executive Committee and the Membership Committee of the American Society of Emergency Radiology are pleased to inform you that residents, fellows and medical students can join the ASER for FREE! Members-in-training will receive free online access to the Society journal, Emergency Radiology, and can subscribe to the printed version at a discounted rate of $55/year. They will also be able to attend the Annual Meeting of the Society at a discounted rate. Members-in-training are encouraged to submit an abstract for consideration of presentation at the annual meeting of the Society.

Please encourage your residents, fellows and medical students to join today!

CONTACT ASER...
If you have questions regarding your membership or need to update your contact information, please contact the ASER Office:

www.erad.org
aser@meetingmanagers.com
Phone: 713-965-0566
My long-time fellow emergency radiologist, annual ASER awards dinner companion and friend, David Lee, wrote a piece for the Community Radiology Corner in the ASER Newsletter published in 2011. I re-read David’s reflections the other day and thought about what has remained the same and what has changed for those of us providing Emergency Radiology services to facilities in the community.

Like David and many of my Emergency Radiology colleagues in community/private practice settings, I work a strangely enviable schedule: 7 nights on/14 nights off. There are various permutations of night schedules out there: 7 on/7 off; 14 on/14 off; 14 on/28 off. After 15 years, I have found the 7 nights on/14 nights off schedule manageable. The burnout commonly associated with night workers seems to be tempered by regularity and sufficient downtime.

It has been a distinct advantage to be able to manipulate my sleep schedule so that I don’t miss parent-teacher conferences, field trips, music performances or soccer games. I can generally deal with the routine demands of life during regular business hours and often ski mid-week powder days. So far, I have managed to flip back and forth between days and nights without becoming too chronically sleep-deprived, still struggle with maintaining a reasonable fitness routine while working and remain convinced that the whole enterprise won’t ultimately shorten my life.

On all those busy, busy nights I am fortunate to work as a member of a team alongside one of a group of dedicated emergency radiologists. For nearly all of us around the country, the emergency departments we serve continue to treat everyone needing everything from complex trauma care to the most mundane routine medical care, and the most demanding times seem to be during the evenings and nights.

Along with my Emergency Radiology teammates, it’s the emergency physicians, trauma and other surgical subspecialists and growing numbers of intensivists and hospitalists who are my closest colleagues. As emergency radiologists, we continuously wrestle with providing appropriate, timely services of the highest quality despite budgetary and staffing constraints, using the fewest resources and the least radiation while achieving the highest possible diagnostic accuracy at any hour. And I believe that we and our non-radiology colleagues have developed a healthy respect for one another’s skills, expertise and unique contribution to the entire process.

What’s new? In the Northwest, where I practice, and in many other locations around the country, we are bigger. We are partnering, merging, developing joint ventures, integrating systems, providing IT services. We are refining and marketing ourselves to stay relevant in the game. We are making efforts to provide decision-making support to cut radiology costs for the hospitals we serve so someone will not come in and do that for us.

These efforts are by no means exclusive to emergency radiologists, but because we have established multi-institutional relationships through teleradiology over the past decade or more, because there are very few specialties who do not utilize our services and because we deal constantly with the overuse of medical resources in generally underserved/underinsured populations, I believe our experience and knowledge make us uniquely qualified to assist in moving radiology successfully into the new health care arena.