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President's Message Alexandra N. Thran, MD, FACEP

Hey there ACEP Vermonters,

We have fantastic jobs. Despite EVERYTHING, we have the best jobs in the world!!

The last shift I worked, a woman my age, walked into our little 6-bed emergency department, after being *bitten and mauled* by **blackbear**. It was the third documented case in Vermont of a bear attacking a human - since the **1930s!**

In my opinion, the first two people attacked deserved it. The first was a hunter who shot a bear, but who is **surprised**, when he leaned over and examined the bear, It turned out **not to be as dead** as and he thought it was and *the bear got up and attacked him*. **Totally understandable.**

The second attack was on the woman who had been feeding bears out her kitchen window. They had gotten so aggressive, that she had **bars installed over her kitchen windows**. Apparently, while holding a loaf of bread between the bars, the **bear bit her arm**. Again, **totally understandable**. The bear probably thought she was offering **pigs in a blanket**.

Please note there are no footnotes to this. It is all **hearsay** from the local **game warden**.

Our patient was attacked, unprovoked while walking through the woods with her dogs, a **terrier** and a **golden doodle**. My patient never saw any **cubs**, but it is certainly possible that the dogs found and harassed some hidden cubs, or the harassed bear *before it attacked*, but that will remain a **mystery**. Here's what she told me.

While walking down a steep hill, with a stonewall to her right, our patient heard the bear running towards her from her left. She told me that she knew, "**it wasn't going**

to stop,” and she turned to her right and stumbled over the stone wall, bruising both her knees.

First, from behind, **the bear bit her in the back of her left thigh**. We are ER docs. **Bites are us!** I've seen every size of dog, bite. I have treated bites of cats, rats, foxes, raccoons, cows, and horses, I've even treated a Copperhead bite. I've seen bites of *animals I've never heard of*, e.g. Nutria, also known as coypu or swamp rats, are large rodents that live in areas with lots of freshwater. Just last month I had a patient bat bite. **I have never seen jaws this size before**. The patient wasn't sure if she had scratched or bitten, but I am **very sure**.

After biting her thigh, the **bear then jumped on top of her, twice** from behind. When I called her two days later, she described it as “**it used me like a trampoline**.” When the bear jumped on her, it ripped through her clothing, scratching both flanks, inflicting **8-extremely long superficial lacerations**, four on each side from its enormous claws.

At this point, the **golden doodle** probably had stressed out enough to get poodle PTSD and had fled the scene, but the fearless **terrier** started barking at the black bear, distracting them, and possibly **saving our patient's life**.

You may conclude from this tale that you should never walk in the woods alone because you might get attacked by a bear. **This is the wrong conclusion**. Since 1930's, contact between Vermonters and bears is fairly common. **This is the only truly unprovoked attack in almost 100 years**. This proves how **rare it is to be attacked by a bear in the woods**.

My personal take away is: It's preferable to walk alone in the woods with the terrier, than a Labradoodle, if you are fortunate enough to have the choice beforehand. I am thinking of writing it up for a case report with **Daniel Wolfson** and Christina Harlow, a nurse practitioner in our department. Shout out to **Dan** for chatting with me and walking me through what happened. He also connected me with the state's bear biologist.

Dan also gets kudos for giving his lecture on out of hospital cardiac arrest, and his never ending work on EMS protocols.

U.S. Senators don't get to do treat bear bites.

Despite **losing in a landslide, I truly loved running for office**. The most difficult parts were the live, televised debates. They reminded of the oral boards, only with cameras, trumpets and lecterns. Debating and speech-writing are certainly new skill sets, but starting at the bottom, it's so easy to improve, because there's nowhere to go but up.

My fellow opponents, US Rep. **Peter Welch** and activist, **Isaac Evans-Frantz** and I, debated issues of substance and policy, everything from expanding SCOTUS to Saudi Arabia.

I am **proud** of the kind of campaign we ran. There was very little **mudslinging**. The worst thing said about me was, “she was the product of private school.” Haha. I am fortunate to have been a candidate when the **Dobbs** decision came down. I had an abortion as a freshman in college and never would have gone to medical school, if I had not had **bodily autonomy to decide when to have children**.

Running for office gave me a public forum at which to express my fury. Across our nation, the rights of women are being stripped from them. It is as if the government is standing between us and our patients at the bedside. This is **not shared-decision-making**. This is **interference** with the **physician patient relationship**. I

applaud ACEP leadership for taking a quick and firm response to the courts decision.

I am so **grateful** to Peter and Isaac for their friendship and all they taught me about being a candidate.

There are so many people to thank but especially to **ACEP President Gillian Schmitz**, and **ACEP leadership**, members, and to **NEMPAC**, for their fiscal and psychological support.

I am looking forward this year to **representing Vermont as a Councillor**, along with **Dr. Matt Siket** at ACEP's Council Meeting, proceeding [ACEP22](#) in San Francisco. **Dr. Siket** deserves **kudos** for giving several lectures at [ACEP22](#) in San Francisco. Matt, I can't wait to heckle you!

Please reach out to [me](#) or our [Chapter Executive Team](#), if you are planning on attending. We would love to get together with any other **Vermonters** in **San Francisco**.

As Chapter President, I hope to *reach out to each department individually*, and to meet with as many of you personally as possible. I am hoping to encourage our members to become politically engaged and lobby state senators and representatives on issues impacting healthcare in Vermont.

We are collaborating with the [Vermont Medical Society](#) on several initiatives. If you are not currently a member, I would encourage you to join. The Vermont Medical Society is the most influential medical society in our state. We are working with them on lobbying and having speakers at our annual meeting at Stowe, corresponding with the [emergency medicine course](#) hosted by the University of Vermont.

I hope this finds you all well. Please don't hesitate to [reach out](#) if there's anything I can do to help improve your professional lives. You can contact me on my cell phone at (401) 527-8224, or my personal [email](#).

Ciao for now!

Adriana's Corner Know Before you Go!

If you are planning to attend [ACEP22](#) in San Francisco. Find information about the COVID protocols [here](#). Your safety & health matters to us!

Welcome Members!

A special welcome to the new members of the Vermont Chapter and to those that renewed their membership. Please [reach out](#) if you would like to become involved at the chapter level, including leadership opportunities.

We are excited to have you!

Adam Cohen, MD, FACEP	Matthew S Siket, MD, FACEP
Clifford Andrew Reilly, Jr	Megan Eubank
Elisabeth A Moore, MD	Robert J Marsan, Jr, MD, FACEP
Elizabeth N Malik, MD	Sean Burns, MD
Joseph J Ravera, MD	Waldo Emerson Floyd, IV, MD
Julie T Vieth, MBChB, FACEP	William E Baker, MD, FACEP

FROM NATIONAL ACEP



ACEP Resources & Latest News

New Monkeypox Emergency Medicine Project Requests Case Images

ACEP has partnered with VisualDx to create the [Monkeypox Emergency Medicine Project](#). Together we are asking you to contribute your confirmed monkeypox case images to the initiative. Images will be deidentified and made freely accessible to ACEP members to better assist recognition, clinical care, and education. It will also be available within the VisualDx system. [Learn more.](#)

More Monkeypox Resources: We are regularly updating our [Monkeypox Field Guide](#) and providing weekly rundowns in the [Emerging Threats Communication Hub](#), an open discussion forum for all ACEP members.

Current Insurer Calculation of Qualified Payment Amount for Out-of-Network (OON) Care May Violate No Surprises Act

A new study indicates health insurers are trying to game the system again. [Learn more.](#)

Apply for ACEP's Reimbursement Leadership Development Program by Sept. 8.

ACEP is sponsoring three members to attend several key events in order to train the future leaders in EM reimbursement. Commitment is estimated at 25 days of travel during the 18-month program. [Learn more.](#)

Advocacy at Home: August Recess Toolkit

Elected officials are heading back to their districts for the month and our [Advocacy At Home: August Recess Toolkit](#) can help you set and prepare for local meetings with federal legislators or staff. This is a great time to share your stories that personalize our calls for policy changes. Find this toolkit and more helpful resources for speaking with media and legislators in [ACEP's Media Hub](#).

Get Your Bike Helmet Ready! Dr. and Lady Glaucomflecken are Speaking at ACEP22

Don't miss these social media sensations as they share their perspectives about the

physician, patient and family experience. Join us Oct. 1-4 in San Francisco for the [world's largest EM educational conference!](#)

ACEP22 Travel Discounts You Need to Know About

- Hotels: Seven ACEP22 hotels have [recently discounted rates](#) for you! If you already booked through OnPeak, your rates will be automatically lowered. If not, you can still book with these discounted rates.
- Airfare: ACEP + TripEasy = [savings up to 20% off flights](#)

Myth BustED: Patients' Rights in the Emergency Department

ACEP recently launched a “Myth BustED” video series to debunk common misconceptions and educate the public about emergency care. In our first video—[Patients' Rights in the Emergency Room](#)—Dr. Avir Mitra educates patients about laws like EMTALA and the Prudent Layperson Standard that protect access to emergency care. [Watch now to see how ACEP is encouraging patients to always seek care when they need it.](#)

New Bedside Tool for Patients Experiencing Cancer Immunotherapy-related Issues

ACEP has a new point-of-care tool, ImmunoTox, focused on caring for patients who are experiencing adverse events related to cancer immunotherapy. The pathway includes history/physical, testing, management, disposition and immunotherapy pearls. The tool also includes six PDFs for optional download. [Learn more.](#)

Introducing the EM Opioid Advisory Network

Receive clinical guidance, discover tools and resources, and get your questions answered through ACEP's EM Opioid Advisory Network. ACEP's new initiative connects emergency physicians combating the opioid crisis with expert advice on managing Opioid Use Disorder patients presenting in the ED, creating a protocol to initiate buprenorphine, and more. The expert panel is here to help ALL emergency health care professionals, free of charge. [Learn more.](#)

ACEP is seeking comments on a **draft clinical policy for patients with suspected appendicitis.** [Weigh in.](#)

Podcast: Have you checked out the [newest Frontline podcast](#) episode featuring EM physician and astronaut Dr. Thomas Marshburn?

Now Accepting ACEP23 Course Proposals

As we start our countdown to ACEP22 in San Francisco, we're already thinking about ACEP23 in Philadelphia! ACEP's Educational Meetings Subcommittee is now accepting course proposals for the 2023 Scientific Assembly. [Learn more.](#)

In Memoriam: [ACEP remembers emergency medicine pioneer Jim Roberts, MD, FACEP.](#) One of the first five board-certified emergency medicine physicians, Dr. Roberts became a household name in our specialty through his authorship of *Clinical Procedures in Emergency Medicine and Acute Care*, a prominent book that printed seven editions.

Upcoming ACEP Events and Deadlines

October 1-4: ACEP Scientific Assembly in San Francisco

October 17-22: [EM Basic Research Skills \(EMBRs\)](#)

November 11: Last day to submit [ACEP23 course proposals](#)

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