

Candidates for FCEP's Board of Directors

FOR TERM 2022-2025

Rajiv Bahl, MD MBA MS - [INCUMBENT](#)

Tom Bentley, MD, FACEP

Jesse Glueck, MD - [INCUMBENT](#)

Shayne Gue, MD, FACEP, FAAEM - [INCUMBENT](#)

Saundra Jackson, MD, FACEP - [INCUMBENT](#)

David Lebowitz, MD, FACEP

Caroline Molins, MD, FACEP

Diana Mora MD, FCEP, FPD-AEMUS

Zachary Terwilliger, MD

Josef Thundiyil, MD, MPH, FACEP

Christine Van Dillen, MD, FACEP

Answers by Candidate

IN ALPHABETICAL ORDER

Rajiv Bahl, MD, MBA, MS

(Incumbent)



1) **Please list your active involvement in FCEP's chapter committees or other activities.**

When I came to Florida after residency I immediately joined FCEP, first as a member and then progressed into the Leadership Academy to better understand the inner workings of the organizational structure.

As a graduate of the Academy, I then served as a board member and a chair of the Life After Residency Program - a program geared toward forward engagement of residents and helping upcoming graduates understand the landscape of life as an attending and FCEP member. I also advanced the outlook of the organization with the Healthcare Hero license plates which are currently available.

2) **Why would you would like to serve on FCEP's Board of Directors?**

FCEP is the organization that serves the emergency medicine community on multiple fronts and over my 4 years with the group, we have made tremendous strides. From within the organization, politically, and among the broader healthcare community FCEP has been able to advance many of the most important and pressing topics of emergency medicine physicians. I have been passionate about the time I have dedicated to this group and despite volunteering for the past 4 years, I feel like there is still work to be done and hope to continue on that front as an experienced board member.

3) **Over the next three years, please identify what you would deem most important for FCEP's priorities:**

Although the passions of emergency physicians vary between individuals, we unify on many topics. Some of the most pressing areas are those that surround scope of practice, advancements in physician voice within Tallahassee and Washington DC, and the forward engagement among residents and upcoming graduates. This is an organization that is run by its members and continuing to ensure that we are the voice of the members is of the utmost importance to me. Protecting our profession and growing our base comes at a pressing and much needed time for both our organization and our practice of medicine and I look forward to FCEP being part of that greater conversation and advancement.

Tom Bentley, MD, FACEP



1) Please list your active involvement in FCEP's chapter committees or other activities.

SBS Medical Student Forum Co-Chair, SBS 2018 working with Dr. Robyn Hoelle. As HCA Florida North Florida Hospital Emergency Medicine Residency Associate Program Director, I promoted resident and faculty attendance and have attended numerous SBS and EM Days. In my role as CFO of Gainesville Emergency Medical Associates since 2009 (which included the Board of Director terms of partners Gary Gillette, Robyn Hoelle and Dakota Lane) I became aware of FCEP's involvement and worth.

2) Why would you would like to serve on FCEP's Board of Directors?

Current practice environments for Emergency Medicine physicians are rapidly changing. From workforce issues to worsening politicization of health issues, I feel that physician participation is more important than ever. I am ready at this point in my career to be more involved and use my time to support the specialty.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

- ED RN staffing challenges / ED boarding
- EM provider supply and demand (both increased amount of residency programs as well as the scope of practice for PA/ARNPs)
- Contract Management Group involvement in the practice of EM and in EM Education
- Reimbursement Challenges (Private Insurance Company Down coding and Denials, Medicare/Medicaid reform, PIP)
- EM Physician Apathy / Burnout (Including lack of interest in EM physicians joining ACEP/FCEP)
- Public Health Advocacy (Overcoming a highly politicized environment in Florida)

Jesse Glueck, MD (Incumbent)



1) Please list your active involvement in FCEP's chapter committees or other activities.

I am a current member of the board of directors and have a special interest in pediatric EM, residency training and medical legislation.

2) Why would you would like to serve on FCEP's Board of Directors?

I believe we are entering a period of new challenges in Emergency Medicine. Particularly regarding the explosion of training programs in Florida. I would like to continue to push the board to address this challenge in order to prevent the devaluation of our training and ensure Florida continues to produce great clinicians and future leaders within our specialty.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

1. Ensure ACGME/RRC are ensuring that all training programs in the state are meeting standards of training and producing competent EM physicians.
2. Continue to ensure insurance companies are fulfilling their legal obligations regarding balance billing legislation.
3. Continue our work stressing the importance of advocacy to young trainees.
4. Encourage and support EM physicians willing to run for office in FL.

Shayne Gue, MD, FACEP, FAAEM (Incumbent)



1) Please list your active involvement in FCEP's chapter committees or other activities.

EMRAF President and FCEP BOD (2016 - 2017)

EMRAF Representative (2016 - 2018)

Co-Chair Symposium by the Sea Planning Committee (2017 - present)

Co-Chair Membership and Professional Development Committee (2018 - present)

2) Why would you would like to serve on FCEP's Board of Directors?

I seek to continue serving in this capacity to better EM for the future. In the many years I've been involved with FCEP, we have seen substantial change in the state and national level regarding our specialty. At home, we have collectively won many advocacy efforts, fighting off malicious bills that would harm our patients (Scope of Practice expansion, PIP reform, pharmacists diagnosing and treating emergent conditions, etc.). Now we face the Workforce Issue as well as the continued evils of PE and insurance companies focused more on a bottom-line than on patient care -- I welcome the opportunity to tackle these issues head on with this extraordinary group of leaders in our field.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

- Addressing the national workforce issue, with special focus to the rampant expansion of residency programs in Florida - calling on the ACGME-RRC to hold institutions to the highest standards and limit or completely prevent private equity stakeholders from opening new programs for all the wrong reasons.
- Addressing declining membership numbers; the rhetoric on social media has become extremely divisive; we need to collaborate together and work within ALL our specialty organizations to take on the true villains (private equity, insurance companies), not one another.
- Increasing educational offerings to our members through in-person and virtual platforms to ensure easy access to the most up-to-date practices.
- Doing a better job engaging our resident and early career physician members.

Saundra Jackson, MD, FACEP (Incumbent)



1) Please list your active involvement in FCEP's chapter committees or other activities.

FCEP Board of Directors
FCEP Governmental Affairs Co-Chair
FCEP EM Days Co-Chair
FCEP Councillor to ACEP

2) Why would you would like to serve on FCEP's BOD?

I have been directly involved with FCEP for 6 years and have served on the board of directors for the past 3 years. I have enjoyed my time and it has been an honor to work to promote and continue to strengthen our specialty.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

The Florida College of Emergency Physicians represents a dynamic and driven fellowship of emergency physicians throughout the state of Florida; whether it be through day-to-day interactions with patients, education of our medical students and allied health professionals, or through advocacy, the goal of the organization is to bridge the gap between law makers, physicians and patients in order to promote positive change and ultimately, improve the health and well-being of the patients that we serve.

Two key issues facing us, as physicians, as well as the people of Florida, are (1) the lack of resources to adequately serve our patients suffering from mental health and substance abuse issues and (2) workforce stability.

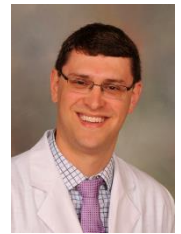
The paucity of mental health and substance abuse facilities that are accessible to our client base has led to overcrowding of EDs and an undue burden on these departments and by default, EM physicians, to act as a dam. COVID has exacerbated this both from an increase in patient volumes and a decrease in both residential and clinic access. We need to advocate as strongly as we can with the goal to increase state and local government funding for programs (including direct placement into medical assisted therapy from the ED) geared towards solving access issues for this population. Without strong and intentional effort devoted to this issue, the ED will become increasingly overcrowded with never ending psychiatric holds and a landing spot for people suffering from substance abuse disorders with no adequate options for help.

By this point in time, I am sure that you have heard of a projected emergency physician surplus and the potential impact this may have on our financial security. This issue is very important to FCEP and as a current board member, I have been active and engaged, as have my colleagues, in creating possible solutions to strengthen our foundation as an integral specialty in the eyes of the medical community, as well as in the eyes of the public. When patients are seen in the ED, they expect to be seen quickly and to be seen by a physician.

These specific issues have been major points of emphasis for FCEP during our trips to Tallahassee and Washington, D.C., and thus the push to advocate for the best possible care for our patients and to promote our value to the community. We were also able to make a direct impact in correcting the “glitch” in the pelvic examination consent law that significantly disrupted our workflow, as well as aided in correcting the consent for medical treatment of minors bill that would have resulted in potential criminal liability for rushing to the aid of a child on a sports field, a child involved in a traffic accident or beach drowning outside of a hospital.

I have been honored to serve you as a board member for the past 3 years. Thank you very much, both for your attention and for the opportunity to continue to serve you as a member of the FCEP BOD for a second term.

David Lebowitz, MD, FACEP



1) Please list your active involvement in FCEP's chapter committees or other activities.

Associate Professor of Emergency Medicine, University of Central Florida College of Medicine (UCF COM)

Emergency Medicine Residency Program Director, University of Central Florida/HCA Healthcare (Greater Orlando), 2019-Present

Co-Director, Medical Informatics Longitudinal Curricular Theme, UCF COM, 2016-Present

FCEP Academic Affairs Committee, 2017-Present

FCEP Symposium by the Sea Lecturer, 2016 & 2018

FCEP EMLRC Advanced Practice Providers Skills Camp Lecturer, 2016 & 2017

2) Why would you would like to serve on FCEP's Board of Directors?

As a Program Director, my goal is to ensure that our current and future physicians entering the workforce have the best education, tools and legislation in place for them to be not only successful, but also happy where they can flourish in their careers. In the past 2-3 years I've seen our fellow emergency physician colleagues face uncertainty and also increased system wide requirements that are making them more burnt out than ever. I am also fearful for our future as a specialty as I see less students interested in applying into emergency medicine. It's clear our system is broken and needs change. I believe FCEP is an organization instrumental in changing and improving the course for our specialty and I would be honored to be part of that movement.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

- **Workforce:** This is the single most important issue facing our specialty and should be FCEP's number one priority. FCEP should partner with ACEP and conquer this crisis aggressively; examining the role of Advance Practice Professionals in the ED, broadening the role of the emergency physician, and working with the ACGME RRC to help redefine the standards for emergency medicine residency education.
- **Malpractice Reform:** To ensure that our physicians can provide evidence-based care to our patients without constant fear of retribution in the form of lawsuits, FCEP needs to closely work with our legislature to fight for strong protection.
- **Work Smarter not Harder:** We've seen the impact that legislation such as the written pelvic consent and pediatric consent laws have had on our day to day lives as physicians. We should work with the legislature to always ensure our patients are protected but without causing unnecessary burdens and hurdles for our already over worked physicians.

Caroline Molins, MD, FACEP



1) Please list your active involvement in FCEP's chapter committees or other activities.

Over the past 10 years, I have actively been involved with many of FCEP's chapter activities, mainly in the academic front. I have presented at APP Skills Sessions, Symposium by the Sea and Life after Residency. I have been active on the educational committee specifically helping the SimWars sessions at SBS be successful at the direction of Dr. Adewale. Over the last two years, I have become more involved in the Pediatric Committee helping at the past SBS and this year helping at the Emerald Coast Symposium as an offshoot from our chapter.

2) Why would you would like to serve on FCEP's Board of Directors?

I would like to serve on the FCEP BOD so that I can be a voice for the academic aspects of our chapter and be a participant in making our state chapter a leader in medical education aspects. I also believe it is important to begin the relationship with medical students early so as they develop their careers they see how ACEP and FCEP have helped and mentored them along the way. I think it is crucial to show others particularly the young physicians (Newly out of residency) the importance of ACEP and our chapter and increase the membership.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

The top priorities in my opinion should be to unite the residency programs to help issues that they share, increase physician participation/membership in particular the young members (new grads) and continue to help be on the forefront of the workforce data so as to protect our specialty.

Diana Mora, MD, FACEP, FPD- AEMUS



1) Please list your active involvement in FCEP's chapter committees or other activities.

I have served in the FCEP SonoRace planning committee. I was a judge and also the round 1 leader for the first ever SonoRace.

I have also attended a few in person committee meetings in the past including the Education and Academic Affairs committee and the Program Directors meeting.

I would like to further my involvement by joining the BOD.

2) Why would you would like to serve on FCEP's Board of Directors?

I am passionate about ultrasound and resident education. I believe I can elevate the use and education of ultrasound in emergency medicine and help develop innovative ways to teach residents, students and emergency physicians.

I understand and relate to the new generation of emergency physicians; I am also an underrepresented minority in medicine and I believe I can serve as a voice to the new generation of emergency physicians and underrepresented minorities.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

- Workforce and compensation as it relates to the increasing number of EM graduates and the effects in physician compensation. A long these lines, also the expanding scope of practice for mid-levels.
- Resident education: with the growing number of residencies in Florida, FCEP should prioritize excellence in education to all residents and ensure graduates are getting adequate training.
- Increase engagement of younger or junior physicians in health advocacy and education in today's potential threats to our profession.

Zachary Terwilliger, MD



1) Please list your active involvement in FCEP's chapter committees or other activities.

FCEP Leadership Academy
FCEP Leadership Advocacy Conference
EM Days
FCEP Symposium by the Sea (previous)

2) Why would you would like to serve on FCEP's Board of Directors?

Serving on FCEP's BOD would be an opportunity to engage with like-minded individuals that could elevate my purpose as an emergency physician, and advocate on the behalf of our members. Our specialty is currently in the most dynamic stage it has ever experienced, and the ability to represent FCEP members would allow me to protect and maintain our specialty's best interest in an even greater capacity than ever before.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

1) Protecting our specialty from unfettered growth of new physicians, that does not correlate demand with capacity, nor ensure adequate training measures.

2) Supporting the notion, that physicians are paramount to each individual patient care opportunity as the leader of the care team, just as they are with the general success of health care itself. Physicians, more than ever must extend beyond the bedside, and direct the current of decisions that affect the care of our communities. To take medicine back.

3) To take a firm stance against the uninhibited growth of nurse practitioners, which has little to no standard for licensure, practice, or supervised practice.

Josef Thundiyil, MD, MPH, FACEP



1) Please list your active involvement in FCEP's chapter committees or other activities.

I have been the co-Chair of FCEP Education Committee for 7 years. In that role, I have helped with the FCEP Board Review Course. I have been the lead on several iterations of the EMS Matching Grants Emerging Street Drugs Series. I have developed and taught the Opioid CME program for FCEP to allow members to obtain compliance with evolving Florida CME requirements. I have been part of the planning committee for most FCEP educational endeavors including the recent Life After Residency Program. I have been a liaison with local government in my role as chair of the County Opioid Task Force and member of the State Opioid Task Force.

2) Why would you would like to serve on FCEP's Board of Directors?

I have dedicated many years of service to FCEP in the form of helping improve educational content. I see the educational component of FCEP as a key driver of ongoing membership and expansion. I would like to help guide FCEP in a positive direction with collaboration from multiple entities in the state of Florida. I see my role as Residency Program Director at Orlando Health and affiliation with Orange County as means to enhance the vision of FCEP in the realms of advocacy, education, and professional development.

3) Over the next three years, please identify what you would deem most important for FCEP's priorities:

1. It is vital for FCEP to continue providing value to its members in the form of relevant education. We need to continue to enhance the educational opportunities in key areas of demand. In the process, the organization needs to be cognizant of the opportunities to engage current and graduating residents as future leaders in our specialty.
2. FCEP will need to have a role in advocating for the specialty of Emergency Medicine. This will include charting a course forward in light of impending workforce concerns.
3. FCEP must continue to advocate for legislation that continue to support our specialty and the patients we treat.

Christine Van Dillen, MD, FACEP



- 1) **Please list your active involvement in FCEP's chapter committees or other activities.**

Co-chair of ems-trauma committee since 2012.

- 2) **Why would you would like to serve on FCEP's Board of Directors?**

I feel as an emergency physician, EMS medical director, associate program director of an EM residency I would be able to provide a dynamic perspective of ongoing concerns present in our field.

- 3) **Over the next three years, please identify what you would deem most important for FCEP's priorities:**

Nursing shortage and increase in residency programs leading to overabundance of EM physicians.

Answers by Question

IN ALPHABETICAL ORDER

1) Please list your active involvement in FCEP's chapter committees or other activities.

BAHL: "When I came to Florida after residency I immediately joined FCEP, first as a member and then progressed into the Leadership Academy to better understand the inner workings of the organizational structure. As a graduate of the Academy, I then served as a board member and a chair of the Life After Residency Program - a program geared toward forward engagement of residents and helping upcoming graduates understand the landscape of life as an attending and FCEP member. I also advanced the outlook of the organization with the Healthcare Hero license plates which are currently available."

BENTLEY: "SBS Medical Student Forum Co-Chair, SBS 2018 working with Dr. Robyn Hoelle. As HCA Florida North Florida Hospital Emergency Medicine Residency Associate Program Director, I promoted resident and faculty attendance and have attended numerous SBS and EM Days. In my role as CFO of Gainesville Emergency Medical Associates since 2009 (which included the Board of Director terms of partners Gary Gillette, Robyn Hoelle and Dakota Lane) I became aware of FCEP's involvement and worth."

GLUECK: "I am a current member of the board of directors and have a special interest in pediatric EM, residency training and medical legislation."

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LEBOWITZ: "Associate Professor of Emergency Medicine, University of Central Florida College of Medicine (UCF COM); Emergency Medicine Residency Program Director, University of Central Florida/HCA Healthcare (Greater Orlando), 2019-Present; Co-Director, Medical Informatics Longitudinal Curricular Theme, UCF COM, 2016-Present; FCEP Academic Affairs Committee, 2017-Present; FCEP Symposium by the Sea Lecturer, 2016 & 2018; FCEP EMLRC Advanced Practice Providers Skills Camp Lecturer, 2016 & 2017"

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VAN DILLEN: “Co-chair of ems-trauma committee since 2012.

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BAHL: "FCEP is the organization that serves the emergency medicine community on multiple fronts and over my 4 years with the group, we have made tremendous strides. From within the organization, politically, and among the broader healthcare community FCEP has been able to advance many of the most important and pressing topics of emergency medicine physicians. I have been passionate about the time I have dedicated to this group and despite volunteering for the past 4 years, I feel like there is still work to be done and hope to continue on that front as an experienced board member."

BENTLEY: "Current practice environments for Emergency Medicine physicians are rapidly changing. From work force issues to worsening politicization of health issues, I feel that physician participation is more important than ever. I am ready at this point in my career to be more involved and use my time to support the specialty."

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3. Work Smarter not Harder: We've seen the impact that legislation such as the written pelvic consent and pediatric consent laws have had on our day to day lives as physicians. We should work with the legislature to always ensure our patients are protected but without causing unnecessary burdens and hurdles for our already over worked physicians.

MOLINS: "The top priorities in my opinion should be to unite the residency programs to help issues that they share, increase physician participation/membership in particular the young members (new grads) and continue to help be on the forefront of the workforce data so as to protect our specialty."

MORA: "1. Workforce and compensation as it relates to the increasing number of EM graduates and the effects in physician compensation. Along these lines, also the expanding scope of practice for mid-levels.

2. Resident education: with the growing number of residencies in Florida, FCEP should prioritize excellence in education to all residents and ensure graduates are getting adequate training.

3. Increase engagement of younger or junior physicians in health advocacy and education in today's potential threats to our profession."

TERWILLIGER: "1) Protecting our specialty from unfettered growth of new physicians, that does not correlate demand with capacity, nor ensure adequate training measures.

2) Supporting the notion, that physicians are paramount to each individual patient care opportunity as the leader of the care team, just as they are with the general success of health care itself. Physicians, more than ever must extend beyond the bedside, and direct the current of decisions that affect the care of our communities. To take medicine back.

3) To take a firm stance against the uninhibited growth of nurse practitioners, which has little to no standard for licensure, practice, or supervised practice."

THUNDIYIL: "1. It is vital for FCEP to continue providing value to its members in the form of relevant education. We need to continue to enhance the educational opportunities in key areas of demand. In the process, the organization needs to be cognizant of the opportunities to engage current and graduating residents as future leaders in our specialty.

2. FCEP will need to have a role in advocating for the specialty of Emergency Medicine. This will include charting a course forward in light of impending workforce concerns.

3. FCEP must continue to advocate for legislation that continue to support our specialty and the patients we treat."

VAN DILLEN: "Nursing shortage and increase in residency programs leading to overabundance of EM physicians."