The American College of Physicians

Working for You and With You:
Improving the Lives of Internists and Their Patients

Robert McLean, M.D., MACP
ACP President, 2019-20

ACP Delaware Chapter February 8, 2020
The Path to ACP President

• CT Chapter Health & Public Policy Committee Chair 1995-2009
• CT Chapter Governor 2009-13
• ACP Board of Regents 2013-present
• ACP President, 2019-20

my day job: practicing internist & rheumatologist 1994-present
Northeast Medical Group of Yale New Haven Health
New Haven, CT
What Does ACP do?

• Education

• Clinical Practice Support

• Advocacy
159,000 Members Strong

Leveraging the collective voice of our community to create a better place for ourselves, our profession, and our patients through medical education, practice transformation, advocacy, and engagement.

How ACP Defines Internal Medicine
Internists apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

• Established in 1915
• A diverse global community of internists united by a commitment to excellence
• Includes internists, internal medicine subspecialists, residents and fellows in training, and medical students
ACP: A Global Community

• More than 16,000 ACP members reside outside the United States

• International chapters: Bangladesh, Brazil, Canada, Central America, Chile, Colombia, India, Japan, Mexico, Saudi Arabia, Southeast Asia, and Venezuela
ACP Member Trends

This data describes U.S. non-student members age 65 and younger. Source: 2019 ACP Member Survey
## ACP’s Priority Themes

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<th>INNOVATION</th>
<th>ENGAGEMENT AND INCLUSION</th>
<th>COMMUNICATION</th>
<th>IDENTITY</th>
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<tr>
<td>Use nimble, creative and unique approaches to identifying, responding to, and meeting member needs</td>
<td>Engage members in local, regional, and national College activities across their career, welcoming and hearing all voices, and demonstrating ACP’s relevance and connection to what’s important to them</td>
<td>Convey ACP’s broad mission, activities and value to members, the greater community of IM, and other stakeholders using leading-edge modalities, platforms and technologies</td>
<td>Create shared enthusiasm and pride about being an internist and ACP member</td>
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<td>• Develop a new vision for the future of health care policy</td>
<td>• Implement Task Force recommendations for enhancing ACP’s local presence</td>
<td>• Raise awareness of ACP’s regulatory and payment related efforts and resources</td>
<td>#physicannotprovider</td>
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<td>• Expand ACP’s Quality Connect programs into a learning collaborative guided by expert physician coaches</td>
<td>• Develop group and joint membership structures</td>
<td>• Utilize social media and other multi-media approaches</td>
<td>National Internal Medicine Day now on October 28</td>
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<td>• Evolve MKSAP into the premier essential individualized learning program for lifelong learning</td>
<td>• Publish new online peer-reviewed journal for case reports</td>
<td>• Create a dedicated communications channel for Resident/Fellow members</td>
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<td>• Publish a new online peer-reviewed journal for case reports and case series</td>
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Defining our identity: We are physicians, not ‘providers’

• We are internists and do NOT merely “provide” health care services to our patients in a transaction

• The term “provider” is a marketplace term and undermines the role of physicians treating patients in meaningful, caring relationships

TAKE THE PLEDGE

“I pledge not to use the word ‘provider’ when referring to physicians, and further to encourage my colleagues to do the same.”

Help spread the word:

#physiciannotprovider

ACP Board of Regents Chair, Doug DeLong, MD, and ACP President, Robert McLean, MD taking the pledge
National Internal Medicine Day - October 28th

- October 28th of each calendar year has been officially designated as *National Internal Medicine Day*
Show Your IM Pride

Let the world know that you’re proud be an internist. Use the #IMProud hashtag and tag ACP with @ACPInternists on social media.

acponline.org/IMProud
Educational Resources

• *Annals of Internal Medicine*

• *MKSAP 18 – now available*

• *Evidence-Based Clinical Guidelines*

• *Podcasts*

• *Meetings:*
  ❖ Chapter meetings annually
  ❖ National Meeting- Mastering Medicine Together
    April 23-25, 2020
    Los Angeles, CA
Evidence-Based Clinical Guidance

Over the past year, ACP published the following clinical recommendations:

- Screening for colorectal cancer in average-risk adults
- Screening for breast cancer in average-risk women
- Update of methods on development of clinical guidelines and guidance statements
- Managing conflicts of interests in clinical guidelines

ACP has been named to the new Cochrane U.S. Network that consists of some of the country’s leading institutions in the research and practice of evidence-based medicine
Podcasts by Internists, for Internists

Focusing on internal medicine-related topics, podcasts offer CME and MOC.

acponline.org/podcasts
Online Learning Center

A centralized gateway to more than 350 online learning activities

• NEW - Enhanced search and browsing functionality allows queries by product, format, or keyword

• Video-based learning

• Webinars

• Interactive cases

• Quizzes

• Podcasts

• CME and MOC eligible
ACP recognizes the important role of POCUS to improve diagnostic capabilities in internal medicine, and offers comprehensive ultrasound training for inpatient and outpatient medicine.

- New POCUS modules now available in ACP’s Online Learning Center: Modules include Obtaining Adequate Clinical Images for Interpretation, Lung Ultrasound, Deep Venous Thrombosis, Urinary System, Abdominal Free Fluid, and Focused Cardiac Imaging

acponline.org/POCUS
Encouraging High Value Care

• Initiatives aim to improve health, avoid harms, and eliminate wasteful practices.

• Resources include online interactive High Value Care Cases that show how to eliminate unnecessary health care costs and improve patient outcomes while earning free CME and ABIM MOC patient safety and medical knowledge points.

• New Cost of Care Conversations tools help physicians and patients understand the importance of talking about costs of health care.

acponline.org/HVC
Adult Immunization Resource Hub

- I Raise the Rates Initiative is a collaborative, data-driven campaign to support patients, physicians, health care teams, systems, and communities in raising adult immunization rates and reducing vaccine-preventable diseases.

- The program includes the latest vaccine recommendations, a practice assessment survey, patient education resources, and more.

acponline.org/immunization
ACP Publications: Online and In Print

Monthly Print Publications: *ACP Internist* and *ACP Hospitalist* provide news and in-depth analysis of issues for inpatient and outpatient internists

ACP Publications online: ACPInternist.org, ACPHospitalist.org

E-newsletters: *ACP Internist Weekly, ACP Hospitalist Weekly, ACP Advocate, ACP Diabetes Monthly, ACP Gastroenterology Monthly*

ACP Books: ACP specializes in publishing titles for internal medicine specialists and subspecialists, medical students, residents, and other health care professionals.
Redesigned in 2019, DynaMed is an advanced clinical decision support tool that combines current clinical evidence with guidance from leading experts in a user-friendly, personalized experience.

- Free benefit of ACP membership (through July 2020)
- **NEW** - Seamless access with ACP member log-on credentials
- Bulleted overviews and recommendations for more than 750 topics, 2,500 searchable images, and numerous calculators
- Track CME credits and MOC points
- Mobile apps available for Android and iOS
ACP JournalWise: Exclusive Member Benefit

ACP JournalWise searches and filters more than 120 top journals to deliver only the most relevant content to you.

- Free access for ACP members
- Personalize your alerts by selecting specialties and clinical topics you want to know about
- Choose the rating threshold and how often you want your alerts

journalwise.acponline.org
Annals Virtual Patients

Annals Virtual Patients is an innovative educational program that enables customized learning.

**Topics include:**
- Abdominal pain
- Anemia
- Obesity & Weight Management
- Hypercoagulable States
- Cellulitis & Soft Tissue Infection
- Food Allergy
- Opioid Use Disorder
- Travel Medicine
- Hepatitis C Virus
- Smoking Cessation
- Type 2 Diabetes
- Influenza

vp.acponline.org/virtualpatients
Getting it Right: Cases to Improve Diagnosis

Cases designed to encourage diagnostic decision-making:

• Understanding the Diagnostic Process
• Partnering with Patients and Families in the Diagnostic Decision-Making Process
• Physician and Patient Factors in Diagnostic Decision-Making
• Recognizing and Responding to Diagnostic Errors

acponline.org/olc
Resources for Lifelong Learning, Educators

ACP members enjoy free or substantially discounted resources to help them meet their educational goals:

**Board Basics 3 and Courses**
- Dozens of classic images, core content, and tips on how to take the ABIM exam
- MOC Exam Prep Courses and Internal Medicine Board Review Courses
- Live review courses and recordings

**Teaching Medicine Series**
- *Theory and Practice of Teaching Medicine, Teaching Methods, Teaching in the Hospital, Teaching in the Clinic, Teaching Clinical Reasoning, Mentoring in Academic Medicine,* and *Leadership in Medical Education*
- *Annals of Internal Medicine* teaching tools; Internal Medicine In-Service Training Examination for residents; ACP Board Prep Curriculum for residents; High Value Care Curriculum for trainees at all levels; IM Essentials for medical students
Working for You and With You: Transforming the Landscape of Health Care for the Better
ACP’s Physician Well-being and Professional Fulfillment Initiative

- Providing ACP members with high-quality information, resources, tools, and support to help their practices thrive in the growing value-based payment environment.

- Trained ACP Well-being Champions supporting their ACP chapter members, practices, and organizations in combating burnout.

- Offering online resources and educational courses at ACP’s Internal Medicine Meeting and chapter meetings to help ACP members manage issues related to well-being and satisfaction.

    acponline.org/physician-well-being
Promoting gender equity and eliminating the inequities in compensation and career advancement that physicians face is a longstanding goal of ACP.

- ACP has joined TIME’S UP Healthcare
- ACP is also a partner in the Women’s Wellness through Equity and Leadership Project
- Diversity and Inclusion Subcommittee recommends effective strategies to assure integration of diversity and inclusion across the College

acponline.org/advocacy/where-we-stand/women-in-medicine
Patients Before Paperwork Initiative

What is Patients before Paperwork?
ACP’s Patients Before Paperwork initiative’s goal is to reinvigorate the patient-physician relationship by reducing administrative complexities and eliminating unessential tasks that detract from patient care and contribute to physician burnout.

Policy Development
ACP policies provide a cohesive framework for identifying and evaluating administrative tasks, and offer detailed recommendations to analyze administrative tasks to determine whether they need to be challenged, revised, or eliminated entirely.

Tools You Can Use
Resources and tools help physicians put ACP’s policies into practice. They include resources that assess practice efficiencies and resources on physician well-being and professional satisfaction.

Collaborating with Stakeholders
ACP engages with key regulatory agencies and stakeholders to help streamline regulations imposed by insurers, federal regulators and other external entities to reduce administrative burdens for physicians.

Advocating for Internists
ACP has long identified reducing administrative complexities or burdens as a priority. ACP works to advocate for changes in our health care system that simplify excessive administrative burdens that put a strain on physicians and patient care.

acponline.org/patientsbeforepaperwork
Improving Physician Satisfaction and Patient Outcomes by Reducing Unnecessary Burdens

Unnecessary burdens lead to limited time with patients, too much paperwork, and work/life imbalance.

ACP addresses these issues by:

- Seeking improvement to systems and documentation requirements
- Identifying and prioritizing burdensome administrative tasks
- Assessing tasks for impact on outcomes
- Developing policy recommendations to enact change
- Engaging in ongoing outreach and stakeholder engagement
The changes in Medicare payments to physicians recognize the value of cognitive services in providing quality patient care. Improvements, which are effective in 2021, include:

- **Increased payments for primary and cognitive care**, due to higher physician work relative values for new and established office visit codes.

- **Reduced documentation requirements**, which will allow physicians to spend more time with patients and less on documentation.

- **Expanded and improved payment for care management services**. Appropriate payment for care management will make it possible for physicians to coordinate care with others on the patient's clinical care team, leading to better health outcomes.
Helping You Transform Your Practice

ACP provides high quality information, resources, tools, and support to help practices transform and flourish in the growing value-based payment environment

- **ACP Practice Advisor**: Online tool to help analyze and improve patient care, organization, and workflow
- **ACP Genesis Registry**: A multispecialty, CMS-approved qualified clinical data registry (QCDR) that supports quality improvement and meets QPP reporting requirements.

[acponline.org/practice-transformation]
Practice Resources

Coding Resources
Use ACP’s beginning and advanced coding resources for your coding questions. Our toolkits, forms, and videos help guide you through detailed coding regulations for:

• Advanced Care Planning
• Chronic Care Management
• Transitional Care Management Codes
• Preventive Care Coding

acponline.org/coding

Payment Resources
Educational resources help you to navigate potential payment hurdles when dealing with:

• Medicare
• Medicaid
• Private Payer Insurance Companies
• Alternative Payment Models
• Preventive Care Coding

acponline.org/practiceresources
ACP Advance


ACP Advance is a new quality improvement (QI) program to help physicians and organizations improve medical care. ACP Advance includes:

- QI curriculum and training program
- Physician-led coaching service
- Chronic care programs and resources

acponline.org/acpadvance
Working for You and With You: Addressing Issues of Importance
Ethical Guidance

• ACP released the Seventh Edition of ACP Ethics Manual with new and expanded sections this year

• **NEW** - Case study "'Doctor, Can’t You Just Phone a Prescription In?' and Other Ethical Challenges of Telemedicine Encounters“ released

• Position paper “Physician Impairment and Rehabilitation: Reintegration into Medical Practice” discusses the professional duties and principles for responding to physician impairment was released

• “Issues in Delivering Patient-Centered End-of-Life Care and Responding to a Request for Physician-Assisted Suicide” toolkit released

acponline.org/ethics
Addressing Performance Measures

Over the past year, the Performance Measurement Committee published performance measurement papers on:

- MIPS measures
- Preventive care

acponline.org/performance-measures
Advocacy

• Public Health Issues affecting our patients
  • Opioid Epidemic
  • Prescription Drug Pricing
  • Immigration Healthcare issues
  • Climate Change & Health
  • Firearms Safety
    • ACP Firearms Policy paper Oct 2018 sparked #ThisIsOurLane

• Legislative Oversight & Regulatory Agencies (CMS)
  • High level contact with CMS on regular basis
  • Frequent letters and statements directed to Congressional leaders
Advocating for lower prescription drug prices and important public health issues

ACP’s most recent position papers call for changes that would mitigate rising prescription drug costs.

The paper on public health plans offers recommendations to decrease out-of-pocket costs for patients, enhance the government's purchasing power, and address existing policies that add costs to the health care system.

A second paper has recommendations to improve transparency in the PBM industry and highlights the need for reliable, timely, and relevant information on prescription drug pricing for physicians and patients.
ACP Firearms Policy Sparks #ThisIsOurLane Movement

In response to ACP policy recommendations in 2018 on reducing firearm-related injuries and deaths published in *Annals*, the NRA tweeted physicians should “stay in their lane.” ACP and physicians were quick to respond...
Firearm-Related Injury and Death in the United States: A Call to Action From the Nation’s Leading Physician and Public Health Professional Organizations

Robert M. Califf, MD; Patricia Harris, MD; John Cullen, MD; Ronald V. Malar, MD; Kyle C. Yanda, MD; Bruce J. Schmeil, MD; and Georges C. Benjamin, MD

Shortly after the November 2016 publication of the American College of Physicians policy position paper on reducing firearm injury and death (11), the National Rifle Association tweeted:

"Some people should tell self-important anti-gun doctors to stay in their lane. Half of the articles in Annals of Internal Medicine are pushing for gun control. Most upsetting, however, the medical community seems to have consulted NO ONE but themselves."

Within hours, thousands of physicians responded, many using the Hashtags #ThisIsOurLane and #ThisIsMyLane, and shared the many reasons why firearm injury and death is most certainly in our lane. Across the United States, we have daily, firsthand experience with the devastating consequences of firearm-related injury, disability, and death. We witness the impacts these events not only on our patients, but also on their families and communities. As physicians, we have a special responsibility and obligation to our patients to speak out on prevention of firearm-related injuries and deaths, just as we have spoken out on other critical public health issues. As a country, we must all work together to develop meaningful solutions to prevent firearm-related injury and death.

BACKGROUND

In 2017, a total of 39,773 people died in the United States as a result of firearm-related injury (23,854 [59.9%] were suicides, 14,542 [36.5%] were homicides, 563 [1.4%] were the result of legal intervention, 446 [1.8%] were unintentional; discharge of a firearm, and 338 [0.8%] were of undetermined injury). The population-adjusted rates of these deaths among the highest worldwide and are by far the highest among high-income countries (11, 12). Firearm-related deaths now exceed motor vehicle-related deaths in the United States (13, 14). Furthermore, studies show that the number of firearm-related injuries is almost doubling in emergency departments, with a direct correlation to firearm-related injury and death.
Better Is Possible: The American College of Physicians Vision for the U.S. Health Care System

Better Is Possible: The American College of Physicians Vision for the U.S. Health Care System, published as a supplement in Annals of Internal Medicine, offers an interconnected, holistic, and comprehensive plan to remove obstacles to care that undermine the patient-physician relationship and harm our patients’ health.

Four papers are included in the supplement:

• A Call to Action from ACP
• Coverage and Cost of Care
• Reducing Barriers to Care and Addressing Social Determinants of Health
• Health Care Delivery and Payment System Reform
ACP Physician Leaders- Why ACP and Why Now

Through an editorial “The U.S. Health Care System Is Ill and Needs a Bold New Prescription” authored by Dr. Delong and me, published with Better Is Possible: The American College of Physicians Vision for the U.S. Health Care System, we provided a rationale for physicians needing to speak out to enact change:

• ACP’s Ethics Manual states that it is physicians' “collective responsibility to advocate for the health, human rights, and wellbeing of the public. . . . They should work toward ensuring access to health care for all persons”. The ACP takes this responsibility very seriously as reflected in its mission “to enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.”

• “Medicine is a social science and politics is nothing else but medicine on a large scale. Medicine as a social science, as the science of human beings, has the obligation to point out problems and to attempt their theoretical solution; the politician, the practical anthropologist, must find the means for their actual solution.” Physicians must engage in the political arena to optimize care for our patients. However, patient care is not a partisan issue.
ACP Asked:
What would a better health care system look like?

1. Why do so many Americans lack coverage for the care they need?
2. Why is U.S. health care so expensive and therefore unaffordable for many?
3. What barriers to health care, in addition to coverage and cost, do patients face?
4. How do delivery and physician payment systems affect costs, access, quality, and equity?
What is the American College of Physicians’ (ACP) Vision for a Better US Health Care System for All?

Comprehensive Reform of U.S. Health Care

Ensure coverage and affordability

Effective and efficient payment and delivery systems

Reduce barriers to care and address social factors impacting patients’ health
Better is Possible: Ensure Coverage for All

• ACP recommends transitioning to a system of universal coverage with lower administrative costs through either a single payer system, or a public choice option to be offered along with regulated private insurance.

➢ Required [essential] benefits should be established through a process that includes physician and patient engagement.
➢ All persons should be enrolled in a plan that covers essential benefits.
➢ Patient cost-sharing that creates barriers to evidence-based, high value and essential care should be eliminated, and for patients with certain defined chronic and catastrophic illnesses. If cost-sharing is required for some services, it should be income-adjusted.

• Both approaches could result in substantial administrative savings and reduced burdens on physicians and patients.
Single payer and public choice models both have advantages and disadvantages but are better than our current system

• Under a **single payer** plan:
  ➢ Everyone would have the same coverage through the public plan.
  ➢ Lower administrative costs, more equitable care.
  ➢ More disruptive: limited or no role for private insurance.

• Under a **public choice** model:
  ➢ Everyone would have coverage, either through public plan or regulated private insurance.
  ➢ Administrative savings as more people enrolled in a public plan but less than single payer.
  ➢ More equitable than current system but less than under single payer.
  ➢ More market regulation required.
  ➢ Less disruptive—individuals and employers could enroll in public plan, or keep private coverage.

• Shortages and longer waits for elective appointments *could* occur if either approach is *underfunded* or *payments are set too low*. But under our current system, millions already do not access to affordable care. **ACP advocates that payments be sufficient to ensure access, and be substantially increased for primary care.**

• ACP examined market-based approaches; **none would achieve our vision where everyone has coverage for and access to the care they need, at a cost they and the country can afford.**
Better is Possible: Lower costs and make care affordable

• ACP proposes that care be made affordable by:
  ➢ Eliminating deductible, co-pays for high value care and for patients with chronic illnesses
  ➢ Prioritizing spending and resources
  ➢ Lowering excessive prices and price variation
  ➢ Increasing price transparency
  ➢ Increasing adoption of global budgets and all-payer rate setting
  ➢ Reducing administrative costs
  ➢ Promoting high-value care
  ➢ Incorporating cost and comparative effectiveness into guidelines and coverage.
  ➢ Investing more in primary care
Working for You and With You: Collaborating with Others for Positive Change
ACP is pleased that ABIM is taking initial steps to develop a continuing certification option that will support lifelong learning by emphasizing education, feedback, and the convenience of being self-paced.

ABIM’s plans to develop a longitudinal assessment as an option in addition to their point-in-time examinations align with recommendations put forth by the American Board of Medical Specialties’ Continuing Board Certification: Vision for the Future Commission and with ACP’s comments submitted to the Commission.

ACP is committed to ongoing professional development and lifelong learning and to representing our members’ needs for continuing certification programs consistent with our professional accountability principles.

We look forward to supporting ABIM in developing options that emphasize learning, offer flexibility and choice, and that meet the needs of internal medicine specialists and subspecialists as well as the patients they serve.

For more detailed information, visit https://www.acponline.org/cme-moc/moc/learn-more-about-moc/acps-role-professional-accountability
Collaboration with Legislators and Influencers

ACP advocates for policy changes that will make a difference in the field of internal medicine through:

• Meetings on Capitol Hill
• Discussions with regulators, including CMS, to suggest changes that will reduce administrative tasks
• Communication and collaboration with other organizations
• Leadership Day in Washington
Collaboration with Physician Organizations

ACP collaborates with other physician organizations representing more than 560,000 physicians and medical students:

• American Academy of Family Physicians
• American Academy of Pediatrics
• American College of Obstetricians and Gynecologists
• American Osteopathic Association
• American Psychiatric Association

*Group of 6 Presidents, Sept 2019*
Working for You and With You: Involvement, Engagement, and Opportunities to Connect
Internal Medicine Meeting 2020: Mastering Medicine Together

Internal Medicine Meeting 2020

April 23-25, 2020
(Pre-Courses April 21-22, 2020)

Los Angeles Convention Center
Los Angeles, CA
Engagement Opportunities with National ACP

- **Fellowship**: Recognizes excellence in the practice of internal medicine and is achieved through professional accomplishments.

- **Support the Next Generation of IM**: Recommend internal medicine as a career to students, residents.

- **Member Forums**: ACP members can instantly engage with colleagues on clinical topics, education and training, and practice issues through online discussions.

- **ACP Member Engagement Program**: Enables members to contribute to College activities while providing meaningful opportunities to use current skills and knowledge and to gain new ones.
Join Advocates for Internal Medicine Network (AIMn)

• Grassroots advocacy network designed to help ACP members engage with federal lawmakers on policy issues important to internists

• AIMn members receive legislative updates and alerts as key policy issues unfold, including sample messages to members of Congress

• Enroll at cqrcengage.com/acplac
Enhance Your Professional Development

- **ACP Leadership Academy**
  - Formal leadership education courses
  - Free ACP webinar series
  - Certificate of Physician Leadership

- **Ethics manual and case studies**

- **Mentoring and networking at the chapter and national levels**

- **ACP Young Achievers Program**

- **Career Connection, a comprehensive listing of career opportunities for physicians**
ACP Startup Advisors Network

ACP’s new free Startup Advisors Network matches digital health startups with experienced ACP physicians.

Input and advice from physicians can help entrepreneurs:

• develop products that address clinician needs
• assist health care delivery
• improve patient outcomes

acponline.org/startup
Financial Services for ACP Members

• **Professional Liability Insurance for ACP Members**: ACP has partnered with Mercer Health & Benefits Administration LLC (Mercer Consumer) to offer risk management and customized insurance solutions.

• **ACP Group Insurance Program**: Mercer Consumer offers Group Insurance options for ACP members, including life insurance, accidental death and dismemberment, long-term care, disability income, auto insurance, and homeowners insurance.

• **Student Debt Refinancing Program**: ACP Members can refinance existing private and federal loans through SoFi and are eligible to receive a 0.125% rate discount upon refinancing their student and Parent PLUS loans through sofi.com/ACP.
Get Connected

For ways to connect and personalize your engagement with ACP, visit acponline.org. **MyACP**, a personalized web experience, makes it easier for members to access and discover pertinent ACP content and resources while visiting acponline.org.

Follow ACP on social media

facebook.com/acpinternists
facebook.com/annalsofim
facebook.com/ACPMKSAP
twitter.com/acpinternists
twitter.com/annalsofim
instagram.com/acpinternists
instagram.com/annalsofim
linkedin.com/groups/867307
youtube.com/imreport
My Concluding Advice (or Request... or Directive)

• Engage with your colleagues, socialize & build your network,
  • Make ACP your professional home
  • “Find your tribe”

• Advocate for yourself as internal medicine specialists
  • Physician not Provider

• Advocate for your patients for a better health care system
  • #ACPVision4HealthCare

• Stay informed
  • ACP Facebook page
  • Twitter: @ACPInternists, @rmmclean84

• Remind yourself of the privilege and joy of being a physician and taking care of patients
Thank you . . .

...for your continued support of ACP and your commitment to internal medicine.