



# International Federation for Emergency Medicine

## TERMS OF REFERENCE

### Clinical Practice Committee

#### 1. FOUNDATION AND PURPOSE

The Committee was founded by the IFEM to collaborate with the work of the Specialty Implementation Committee, and the Core Curriculum & Education and to:

1. Provide educational and teaching material in EM clinical areas to the IFEM membership and to the IEM community.
2. To evaluate, amend and distribute existing educational and teaching material to the IFEM membership and to the IEM community.
3. To develop, design and distribute IFEM-sanctioned EM clinical practice educational and teaching material, to be provided to the IFEM membership and to the IEM community.

#### 2. MEMBERSHIP

- 2.1 Chair:** The Chair is nominated by the IFEM Executive and ratified by the Board. Term of office is two years, and is renewable.

**Members:** Members are nominated by either the Board or the Chair, and should be as representative of IFEM membership as possible. Maximum number of voting members shall not exceed 12. With the approval of the Chair, other IFEM member nations may sponsor observers to the committee in order to facilitate a more global perspective and gain committee experience. Committee work and sub-committee assignments are at the discretion of the Chair and may be assigned to both voting and non-voting members.

- 2.2 Appointment and Terms of Office:** All members are nominated for a period of no less than two (2) years; members may be reappointed at the end of their term.

#### 3. REPORTING

The Committee Chair reports directly to the IFEM Board and IFEM Executive and provides a summary of activity at each Board meeting. The Committee Chair will provide additional reports as requested by the Executive. All curriculum documents must be approved by the Board prior to dissemination.

## **4. FUNCTIONS**

The IFEM Clinical Practice Committee will accomplish its purposes (as listed above) in the following manner:

- 4.1 Collect lists, links and information about existing EM clinical practice material, and to post this and distribute this to the IFEM membership and to the IEM community.
  - 4.1.1 Particular attention will be made to examine existing content for “high priority” clinical practice modules (i.e. resuscitation, trauma, pediatrics, etc.)
- 4.2 Collect, vet and post content itself on-line for the IFEM membership and for the IEM community
- 4.3 Ultimately form new IFEM-sanctioned content based on Core Curriculum & Education Committee and Clinical Practice Committee recommendations and guidelines, to be posted and distributed to the IFEM membership and to the IEM community

## **5. MEETINGS**

### **5.1 Timing and Frequency**

The Committee will meet at least 3 times every two years, coinciding with the dates of the Board meetings. Additional meetings via teleconference or cyberconference will take place on an as-needed basis. Most communication will be electronic.

### **5.2 Quorum**

Quorum will be 50% of total membership.

### **5.3 Agenda Deadlines**

Agenda items will be submitted to the Secretariat at minimum of two weeks prior to a Committee meeting. The Chair or the Secretariat will ensure electronic distribution of addenda items to all members so that any additions may occur prior to a Committee meeting. The Chair will submit addenda items and committee reports for the IFEM Board at least thirty (30) days prior to the scheduled meeting dates.