



**2023  
ANNUAL  
REPORT**

# **SOCIETY OF CRITICAL CARE MEDICINE**

Society of  
Critical Care Medicine  
**The Intensive Care Professionals**



# TABLE OF CONTENTS

<b>About SCCM</b>	
SCCM'S Organizational Guiding Principles.....	4
Highlights of the Year .....	6
Message from the Leadership .....	7
2023 SCCM Executive Committee and Council .....	8
<b>Membership</b>	
Membership Update .....	10
The Future Critical Care Workforce .....	11
Connections are Critical.....	11
Getting the Message Out.....	14
<b>Multiprofessional Education</b>	
2023 Critical Care Congress.....	17
Award Winners .....	18
Local Impact.....	20
Fellows and Masters of the American College of Critical Care Medicine.....	21
Resources for the Multiprofessional Team.....	22
<b>Global Health</b>	
Humanitarian and Crisis Response Activities.....	23
<b>Hosted Training</b>	
Providing Vital Skills Training Worldwide .....	26
<b>Quality Improvement</b>	
ICU Liberation Campaign.....	27
Achieving Diagnostic Excellence in Sepsis and Septic Shock.....	28
Improving Communications About Patient Outcomes .....	28
Guidelines are a Keystone of Quality Improvement .....	29
<b>Discovery and Research</b>	
Discovery Timeline.....	30
Clinical Investigators Meetings.....	31
SCCM's Discovery Datathon Participants Look to the Future.....	32
Grant Recipients.....	33
Research Projects Propelling the Future of Critical Care .....	34
SCCM Journals.....	36
<b>Environmental, Social, and Governance.....</b>	<b>37</b>
<b>Donors</b>	
Thank You to Donors Who Support SCCM's Mission .....	38
Your Donations in Action.....	39
<b>FINANCIALS</b>	
Financial Statement .....	40





# SCCM'S MISSION

is to secure the highest-quality care for all critically ill and injured patients.

## ENVISIONED FUTURE

SCCM envisions a world in which all critically ill and injured persons receive care from a present integrated team of dedicated trained intensivists and critical care specialists. Multiprofessional teams use knowledge, technology, and compassion to provide timely, effective, safe, efficient, and equitable patient-centered care.

## DIVERSITY STATEMENT

SCCM values and seeks diversity and inclusive practices within the critical care profession and within the SCCM organization. SCCM promotes involvement, innovation, and expanded access to leadership opportunities that maximize engagement across diverse populations. SCCM will provide leadership and will commit time and resources to accomplish this objective, focusing particularly on increasing participation of underrepresented groups. Securing the highest-quality care for all critically ill and injured patients is our goal.



# SCCM'S ORGANIZATIONAL GUIDING PRINCIPLES

Promote a **healing, safe and effective critical care environment** for patients, their families and caregivers wherever critical care occurs across the healthcare continuum.

Promote the implementation of an integrated team of dedicated experts in the ICU for delivery of the **highest-quality, safest, most effective, and most cost-efficient critical care**.

Advocate to patients, the public, and policymakers that critical care is a **compassionate, patient-centered discipline**.

Advocate career pathways in both research and clinical critical care that will attract and retain a quality team of personnel dedicated to **improving the care of critically ill and injured patients**.

Provide the **finest education** for healthcare professionals, the public, and policymakers regarding optimal delivery of critical care.

Promote and support **quality research** into all aspects of critical illness and injury.

Promote **measurement of outcomes** and **processes to inform** and **improve patient care**.

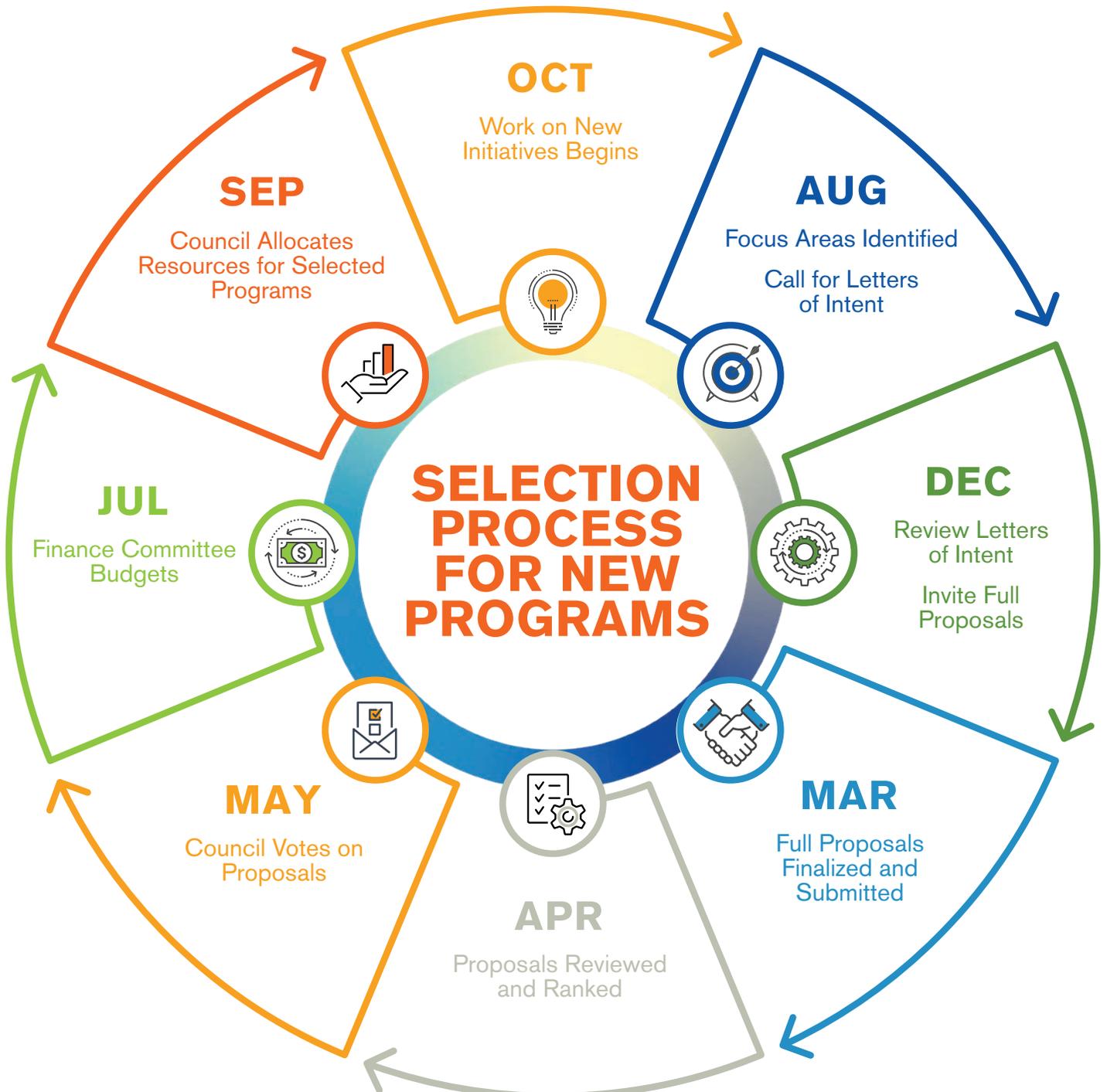
Promote **member participation** in quality improvement activities.

Foster **development** of critical care practitioners and leaders.



# ABOUT STRATEGIC PLANNING

SCCM members play a crucial role in cultivating new ideas and initiatives. Submitting a strategic planning proposal is one way to engage with SCCM and be a part of its mission to improve critical care. The process for submitting proposals has been revised to increase the probability of acceptance by ensuring that the submitted proposals are appropriately aligned with the strategies outlined by the SCCM Council and are completed with the assistance of staff and volunteer leadership. The process begins with the submission of a letter of intent for a proposal. Letters of intent may be submitted at any time. Learn more at [sccm.org/governance](https://sccm.org/governance).



# HIGHLIGHTS OF THE YEAR

The SCCM Annual Report provides an overview of activities from October 2022 to September 2023. It's been an exciting year full of new milestones and accomplishments.

## 2022

### OCTOBER

- SCCM replaced a lengthy guideline development cycle with a new process supported by additional resources. Using the new methodology, two to four short updates or new guidelines will be released annually with a limited number of Patient, Intervention, Comparison, Outcome (PICO) questions, making the publication of new guidelines and related toolkits more rapid and easily implemented by clinicians.
- The Rocky Mountain Chapter was launched to serve the Colorado area.

### NOVEMBER

- SCCM received its third Edwards Lifesciences Foundation grant to continue to support their Every Heartbeat Matters campaign by providing clinical education and training on critical care recovery of cardiac and high-risk surgery patients in underserved areas of the United States and around the world.

## 2023

### JANUARY

- In-person learning returned and Congress was held in San Francisco, California. The event included the debut of a new course: Fundamental Critical Care Support: Surgical.
- Famous TikTok-er Dr. Glaucomflecken was a highlight of the event, sharing a moving plenary session about patient survival.

## 2023

### FEBRUARY

- SCCM participated in a diplomatic trip to Africa to kick off the Africa Infrastructure Relief and Support (AIRS) project.

### MARCH

- SCCM remembered one of its earliest nurse members and its first executive director, Norma J. Shoemaker.

- SCCM provided more than 140 clinicians free, lifesaving ultrasound training in Ukraine following months of SCCM's organized humanitarian relief in the form of supplies, medications, and free education resources.

### MAY

- SCCM joined intensive care units worldwide in celebration of National Critical Care Awareness and Recognition Month.

## 2023

### JUNE

- Representatives of the 18 U.S. sites enrolled in the Assessment of Implementation of Methods in Sepsis and Respiratory Failure (AIMS) study met at SCCM headquarters to begin the study's collaborative/implementation phase. Sites were randomly selected to implement either the Surviving Sepsis Campaign Hour-1 Bundle or 3-Hour Bundle. The teams discussed barriers to and facilitators of implementing the bundles, reviewed algorithms that will guide care, and worked in groups to develop goals for next steps.

### JULY

- SCCM took new steps to transform sepsis care with its project, "Using Education and Technology for Rapid Cycle Sepsis Diagnosis: Building an Equitable and Quality-Based Diagnostic Excellence." The Council of Medical Specialties announced that it will award SCCM a grant to fund the project.

### AUGUST

- Discovery, the Critical Care Research Network, hosted its first Datathon in New York City. The event brought researchers and clinicians together to solve big issues facing critical care.
- SCCM hosted its Multiprofessional Critical Care Review course at its newly remodeled headquarters building for the first time.
- The Leadership, Empowerment, and Development (LEAD) Program held a successful regional networking event at the newly designed SCCM headquarters. The first event of its kind brought together professionals from the Midwest Chapter and others to socialize and learn more about career advancement.

### SEPTEMBER

- SCCM returned to Ukraine, training more than 300 clinicians in courses that combined elements of its Fundamental Critical Care Support: Surgical and ICU Liberation courses and held additional advanced ultrasound courses. Attendees learned about initial care, stabilization, and urgent disposition of critically ill surgical patients and key principles of early mobility and rehabilitation to streamline recovery after ICU care.
- Discovery hosted a successful virtual Clinical Investigators Meeting focused on New Health Information Technologies Implementation.

# MESSAGE FROM THE LEADERSHIP

As we look back at the 52 years since the Society of Critical Care Medicine's (SCCM) formation and move beyond the worst years of the COVID-19 pandemic, we are pleased to report that the Society is robust and doing more than ever to improve the care of critically ill and injured patients worldwide.

With that said, we are living through a time of historic challenge and opportunity. The world faces ongoing economic, social, and geopolitical volatility. We have entered a new age of technology with artificial intelligence that may fundamentally transform productivity and patient care. The number of clinicians working in our intensive care units (ICUs) has fallen as many, frustrated and exhausted, have left the field, resulting in an acute shortage of clinicians and increasing patients' vulnerability.

As you can see in this report, SCCM's programs are thriving overall. Our traditional major activities such as educational programs for trained critical care clinicians, which were heavily impacted during the pandemic, have begun to recover. The growth of newer activities, such as the Society's research and humanitarian programs that flourished during the pandemic, continue to grow during this period of transition.

The SCCM Council continues to invest in major expansion of our research and quality improvement endeavors. Not only have we increased direct funding for researchers, but Discovery, the Critical Care Research Network, has expanded into data science activities, including developing more critical care data scientists and using data science to solve problems in critical care. Meanwhile the amount of extramural grant funding for our research and quality improvement projects has continued to grow.

While SCCM has always been an international organization, our expansion into global health activities has been a major focus in recent years. No longer just offering membership and education to colleagues around the world, we have expanded our humanitarian activities as we work closely with those in war zones and build sustainable oxygen infrastructure in low-resourced hospitals where much of our training cannot be implemented when patients do not have access to this simple lifesaving therapy. SCCM has also expanded its Fundamentals training programs and, through funding partners, provides free training to those in low-resourced areas both in the United States and globally. The Society continues to bring needed pharmaceuticals, medical supplies, and equipment to hospitals most in need.

The COVID-19 pandemic brought many changes to the delivery of critical care. One long-lasting impact is persistent practitioner shortages throughout the global healthcare system. However, we are heartened to know that, in the United States, the number of programs offering physician training in critical care medicine has increased, with expansions from nontraditional fellowship pathways to specialties such as cardiology, nephrology, and infectious diseases, which will help increase the number of critical care physicians in the United States. Learn more about the state of the critical care workforce and resources available on [page 11](#).

Individuals and organizations frequently ask SCCM to get involved in social and geopolitical activity outside of our mission of improving care. SCCM is not a political organization and takes no sides in any conflict. SCCM is a global nonprofit public charity chartered to improve care of the critically ill and injured worldwide. We work to support all critical care clinicians and the patients they serve, no matter where they are located, regardless of politics. Our meetings, events, and training activities occur all over the world and throughout the United States. We bring our programs to where they will have the most impact, even if those areas are fraught with political conflict.

SCCM remains a consequential organization because it has adapted to many paradigm shifts, from education to research to humanitarian support. Today, we continue to adapt. Our mission to improve care of the critically ill and injured across the planet remains consistent and guides us in every decision we make. A global leader in healthcare, we are a force for good, helping unlock the best care possible for critically ill and injured patients in every country, community, and setting. The continued support of SCCM members, donors, sponsors, advertisers, and organizational partners is most appreciated. Our collective efforts have a major impact on the care of the critically ill and injured everywhere.

Sincerely,



**David J. Martin, CAE**  
CEO/Executive Vice-President



**Vinay M. Nadkarni, MD, FCCM**  
2023 SCCM President



**Sandra L. Kane-Gill, PharmD, MSc, FCCP, FCCM**  
SCCM Past President

# SCCM EXECUTIVE COMMITTEE AND COUNCIL



President  
Vinay M. Nadkarni, MD, FCCM



President-Elect  
Lauren R. Sorce, PhD, RN,  
CPNP-AC/PC, FCCM



Past President  
Sandra L. Kane-Gill, PharmD, MSc,  
FCCP, FCCM



Secretary  
Jose L. Pascual, MD, PhD, FRCS(C),  
FACS, FCCM



Treasurer  
Cherylee W.J. Chang, MD, FACP, FCCM

## COUNCIL MEMBERS



Sheila A. Alexander, BSN, PhD,  
RN, FCCM



Donna Lee Armaignac, APRN, CCNS,  
CCRN-K



Marie R. Baldisseri, MD, MPH, FCCM



Jeffrey F. Barletta, BS, PharmD,  
FCCM



Jose L. Diaz-Gomez, MD, MAS,  
FASE, FCCM



Amy L. Dzierba, PharmD, BCCCP,  
FCCP, FCCM



**Laura E. Evans, MD, MS, FCCM**



**Anthony T. Gerlach, PharmD, FCCM**



**Kyle J. Gunnerson, MD, FCCM**



**Thomas A. Nakagawa, MD, FAAP, FCCM**



**Pauline K. Park, MD, FCCM**



**Jose Javier Provencio, MD, FCCM**



**Gloria M. Rodriguez-Vega, MD, MCCM**



**Asha N. Shenoi, MD, FCCM**



**Samuel A. Tisherman, MD, FCCM**

## **HONORARY COUNCIL MEMBERS**

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**Maureen A. Madden, DNP, RN, CCRN, CPNP-AC, FCCM**



**Mark E. Nunnally, MD, FCCM**



**Daniel Wu, DO, FACOS, FACS, FCCM**

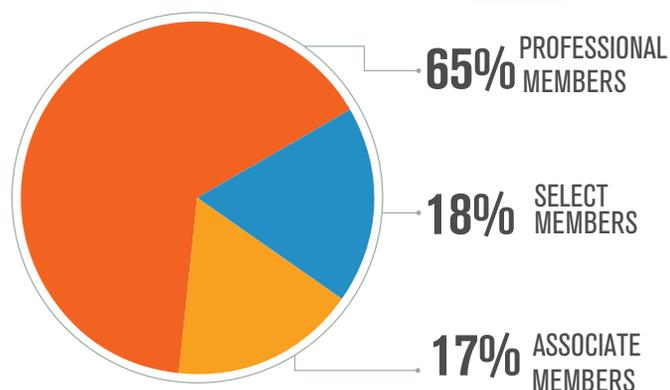
# MEMBERSHIP



**17,000+**  
MEMBERS WORLDWIDE

Members represent more than 80 countries worldwide.

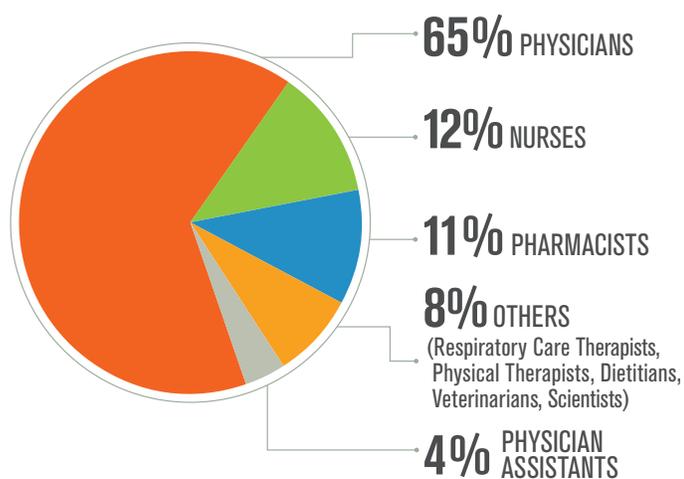
## Members by Type



### What Are Member Types?

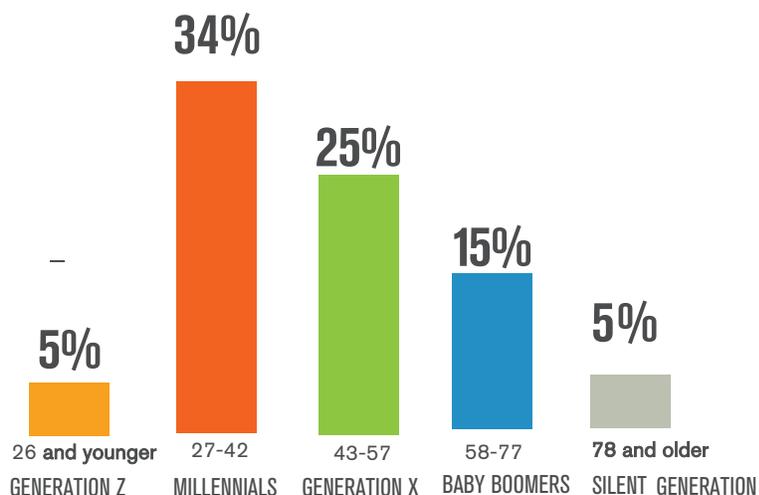
To meet the individual needs of a diverse membership, SCCM offers three member types: Select, Professional, and Associate. Members can choose the membership level and benefits that meet their current needs. Learn more about member types at [sccm.org/join](http://sccm.org/join).

## Members by Profession



## Members by Age\*

\*Based on self-reported demographic data. Approximately 15% of members have not reported age demographic data.



# THE FUTURE CRITICAL CARE WORKFORCE

**Clinical Spotlight**

## SCCM Critical Care Workforce Update 2023



**Growth in Graduate Medical Education Positions**

The landscape of critical care practice continues to change, but the multiprofessional team approach remains the foundation of delivering high-quality critical care medicine.

**Figure 1: Evaluation of Training Programs Across 40 Programs of Critical Care Training**

**Figure 2: Enrollment in Critical Care Training Programs**

**Figure 3: Three Physicians Across Critical Care Medicine and Pediatric Population Systems**

**Attending the 2024 Critical Care Congress?**

The author, Brian S. Hargrett, MD, is a professor of Critical Care Medicine at the University of Michigan, Ann Arbor, Michigan. He is also a past president of SCCM and a past president of the American Society of Critical Care Medicine (ASCCM).

The landscape of critical care practice continues to change, but the multiprofessional team approach remains the foundation of delivering high-quality critical care medicine.

Three SCCM committees evaluated the field's continued emergence from the COVID-19 pandemic, changes in the critical care workforce, and pitfalls exposed by the pandemic. This update was published in the Fall 2023 issue of *Critical Connections*, which is available online at [sccm.org/criticalconnections](https://sccm.org/criticalconnections).

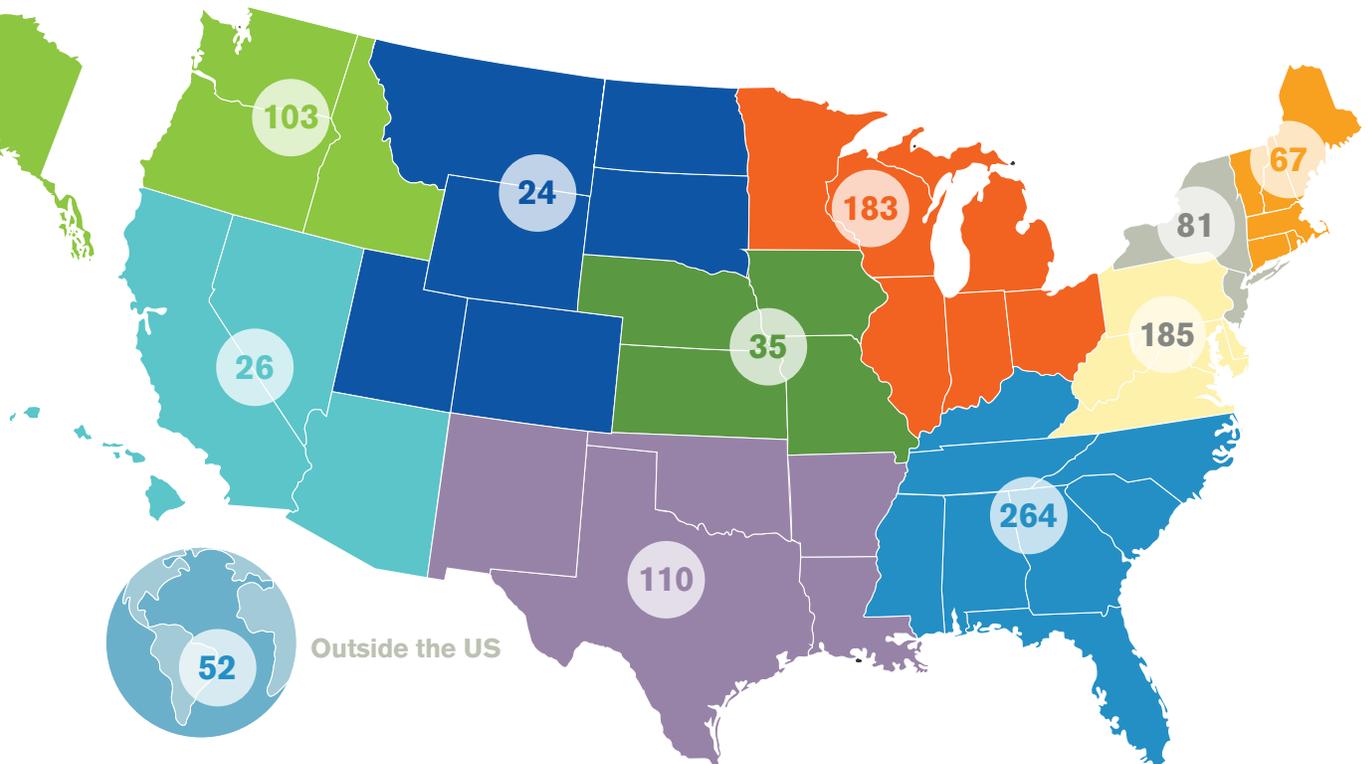
## CONNECTIONS ARE CRITICAL

The critical care community is better together! SCCM provides pathways and opportunities for connection that are vital for nurturing professional development, advancing research and best practices, and building lasting friendships!

### Creative Community

SCCM relies on its Creative Community, the more than 2000 members who volunteer for committees, task forces, and other groups to generate the cutting-edge education and activities on which our members rely. SCCM owes a debt of gratitude to these dedicated professionals who help advance the mission of the organization.

### Creative Community Geographic Distribution



## Specialty Sections

Specialty sections bring together members with similar interests to advance the specialty. Get involved, be inspired, and help advance the specialties that matter most to you through unique projects and educational programming. Network with your group using SCCM Connect and provide nominations for SCCM's Council, planning divisions, committees, and task forces and participate in the annual selection of awards.

### SCCM members can join up to three specialty sections!

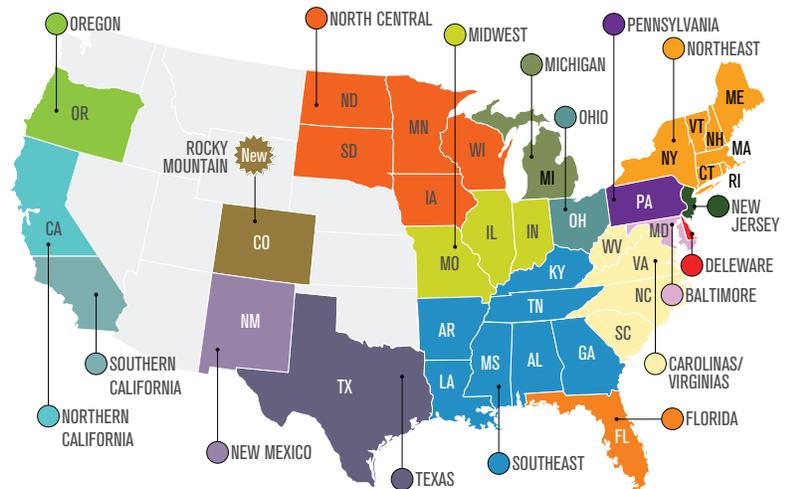
Visit [sccm.org/sections](https://sccm.org/sections) for details about each section.

Sections	Members
 Anesthesiology	1737
 Clinical Pharmacology and Pharmacy	2758
 Emergency Medicine	2470
 Industry and Technology	762
 Internal Medicine	3683
 In-Training	1265
 Neuroscience	2096
 Nursing	1497
 Osteopathic Medicine	351
 Pediatrics	1748
 Physician Assistant	684
 Research	2393
 Respiratory Care	2267
 Surgery	2706
 Uniformed Services	405

Several specialty sections now have social media accounts! Learn more under Social Media on [page 16](#).

## Chapters

Chapters connect critical care professionals regionally across the United States. Eighteen chapters provide a vehicle for members to exchange information, network with local critical care practitioners, and discuss the impact of national issues in their communities. Learn more about joining SCCM's chapter network at [sccm.org/chapters](https://sccm.org/chapters).



Chapters	Members
Baltimore	200
Carolinas/Virginias	500
Delaware	50
Florida	400
Michigan	220
Midwest	400
New Jersey	150
New Mexico	50
North Central	150
Northeast	550
Northern California	220
Ohio	350
Oregon	100
Pennsylvania	350
<b>NEW!</b> Rocky Mountain	150
Southeast	500
Southern California	250
Texas	650

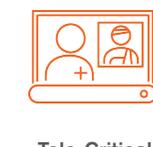
## Looking Ahead



**A new Telecritical Care Medicine Section will launch in 2024 to provide a space for those interested in telehealth issues to network and share!**

## Knowledge Education Groups

Knowledge education groups (KEGs) gather members together to collaborate and share their passions about clinical and professional interests.

 <b>Billing and Documentation</b>	 <b>Burnout</b>	 <b>Choosing Wisely</b>	 <b>Critical Care Clinicians in Practice</b>	 <b>Critical Care Organizations</b>	 <b>Data Science</b>	 <b>Ethics</b>
 <b>Geriatric</b>	 <b>Global Outreach</b>	 <b>Obstetric Critical Care</b>	 <b>Palliative Care</b>	 <b>Tele-Critical Care</b>	 <b>Under-Represented in Critical Care</b>	 <b>Women in Critical Care</b>

## SCCM Connect

No matter which SCCM community you belong to, SCCM Connect is the place to network and engage with colleagues who are in your field (sections), located in your region (chapters) or share your interests (KEGs). Visit [sccm.org/connect](https://www.sccm.org/connect) to find your critical care community!

### Top SCCM Connect Influencers



**Caitlin M. Thomas,**  
PharmD, BCCCP



**Kristie A. Hertel,**  
CCRN, DNP, ACNP-BC,  
FCCM



**Mahmoud A. Ammar,**  
PharmD, BCCCP,  
BCPS, FCCM



**Joanna L. Stollings,**  
PharmD, FCCM



**Jamie Sturgill, PhD**

Join more than  
**4500**  
Discussions

**50 Active**  
Groups

# GETTING THE MESSAGE OUT

## Critical Connections

Critical Connections, the critical care industry's only newsmagazine, provides information on cutting-edge topics in critical care useful to the entire multiprofessional team. Each issue includes articles focused on clinical topics authored by SCCM members as well updates about SCCM activities and successes.



**Winter 2023**  
Crisis Management



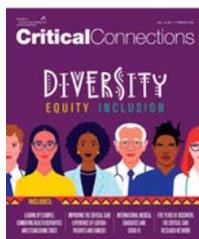
**Spring 2023**  
Better Together



**Summer 2023**  
Research Roundup



**Fall 2023**  
2024 Critical Care Congress



**Winter 2022**  
Diversity, Equity, and Inclusion



**Spring 2022**  
Burnout and COVID-19



**Summer 2022**  
Innovation in Critical Care



**Fall 2022**  
Hot Topics in Critical Care

## SCCM Digital Newsletters

SCCM has several digital newsletters bringing important critical care information to members and the critical care community! Sign up for updates at [sccm.org/newsletter](https://sccm.org/newsletter).

Newsletter	Circulation	Open rate
<b>SCCM News</b>	75,000	54%
The SCCM Newsletter goes out twice a month to provide updates about SCCM events and activities and the latest in critical care.		
<b>SCCM News, Select Edition</b>	2800	40%
This version of the SCCM Newsletter is delivered once a month to Select members and includes insight from SCCM leadership and special offers for Select members.		
<b>Critical Pulse</b>	10,000	56%
This digital newsletter is delivered to Select and Professional members and shares breaking news and headlines on critical care curated by clinical experts.		

## SCCM News



## SCCM Blogs

SCCM publishes regular blogs with commentary from subject matter experts and updates on important activities and achievements. Read more at [sccm.org/blog](https://sccm.org/blog).

Top SCCM Blogs				
<b>RSV Vaccination in Adults May Curtail Morbidity and Mortality</b>	<b>Concise Critical Appraisal: Hydrocortisone and Fludrocortisone Versus Hydrocortisone Only</b>	<b>Concise Critical Appraisal: Endothelial Glycocalyx Integrity and Fluid Bolus Types</b>	<b>Dr. Glaucomflecklen Shares Humor on Social Media and at 2023 Critical Care Congress</b>	<b>Concise Critical Appraisal: Impact of a Machine Learning Early Warning Score on Hospital Mortality</b>
June 2023	May 2023	April 2023	February 2023	November 2022

## SCCM.ORG

The SCCM website is your source for everything going on in the Society. Access education to enhance your practice, the latest advancements in the field of critical care, podcasts, webcasts, and more at [sccm.org](https://www.sccm.org).

### Web Page Views



**1.3**  
**MILLION**

### New Users



**1.2**  
**MILLION**

### Top Pages



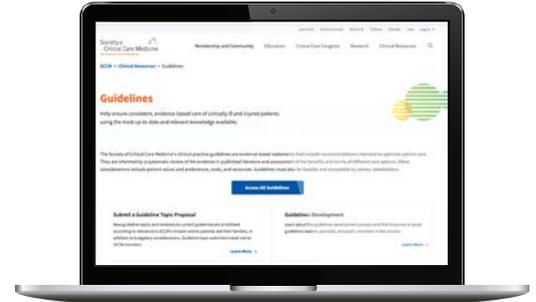
SCCM Home  
[sccm.org](https://www.sccm.org)



Surviving Sepsis Campaign  
[survivingsepsis.org](https://www.survivingsepsis.org)

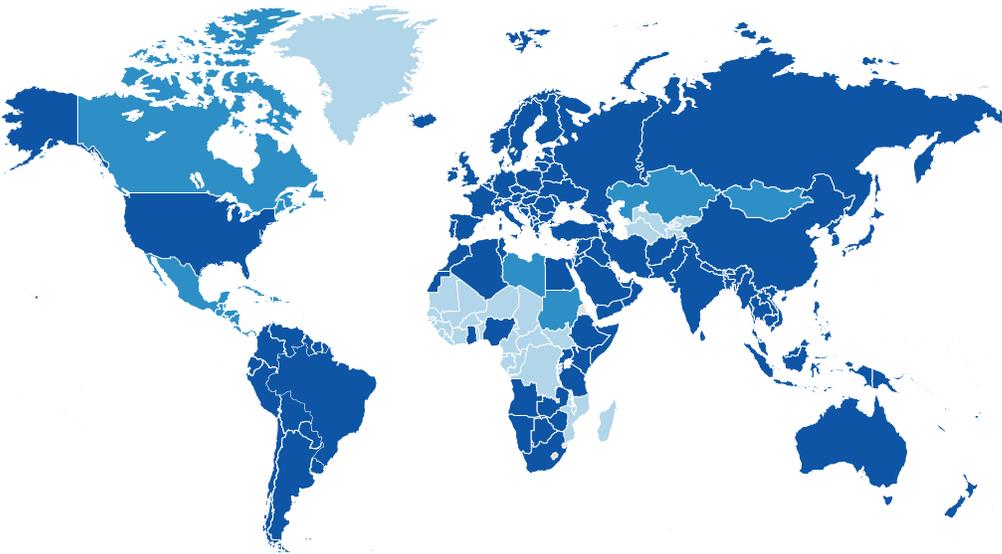


Critical Care Congress  
[sccm.org/congress](https://www.sccm.org/congress)



Guidelines  
[sccm.org/guidelines](https://www.sccm.org/guidelines)

### Users by Country



Country	Users
United States	744K
India	54K
United Kingdom	39K
Canada	31K
Mexico	27K
Brazil	24K
China	20K

## Let's Get Social

SCCM's social media footprint expanded with the addition of social media accounts for specialty sections!



## Social Engagement Ambassadors

SCCM social engagement ambassadors are a group of SCCM members and critical care community members who are passionate about the organization and its mission! The group grew to include 250 members dedicated to spreading the word about SCCM and its activities online through social media and SCCM Connect.

### What does an SCCM engagement ambassador do?

- Share what you love about SCCM and critical care, such as journal articles you find interesting or events you are excited about.
- Get the scoop on SCCM events and activities with tips for how you can share information with your networks.
- Follow SCCM and its top influencers on your favorite social media platforms.
- Use the **#SCCMSoMe** hashtag to help others curate and identify information.

### Become a Social Engagement Ambassador Today

[Learn More](#)

**PSST!** You can find more social media information including helpful infographics and social media templates to make generating and sharing content easy at [sccm.org/social](https://sccm.org/social).



Facebook  
@SCCM1



X (formerly Twitter)  
@SCCM



LinkedIn  
/society-of-critical-care-medicine



Instagram  
@SCCMcriticalcare



TikTok  
@sccmcriticalcare

	Facebook @SCCM1	X (formerly Twitter) @SCCM	LinkedIn /society-of-critical-care-medicine	Instagram @SCCMcriticalcare	TikTok @sccmcriticalcare
<b>Followers</b>	86,718	49,817	44,887	16,833	49
<b>Impressions</b>	88,108,421	1,463,183	440,039	637,617	2562
<b>Engagements</b>	217,643	18,088	15,039	4,810	50

# MULTIPROFESSIONAL EDUCATION

## 2023 CRITICAL CARE CONGRESS

SCCM's 2023 Critical Care Congress in San Francisco marked the in-person return of the largest multiprofessional critical care gathering, bringing together thousands of colleagues and experts from around the world. This year's Congress theme of "Better Together" recognized the meaningful ways in which critical care professionals collaborate with each other and contribute to the communities in which they live and work.



CRITICAL CARE  
CONGRESS.

Read more about Congress highlights and member experiences at [sccm.org/bettertogetherblog](https://sccm.org/bettertogetherblog).



**Jennifer Cole, PharmD, BCPS, BCCCP, FCCM**  
Veterans Health Care System of the Ozarks

**What does Better Together mean to you?**

I just came from a great plenary session where we talked about how ICU research tends to be a collaborative effort. The more groups you can get to communicate and to work together on research, the more exciting the research gets. The research ends up becoming more of an applicable product.

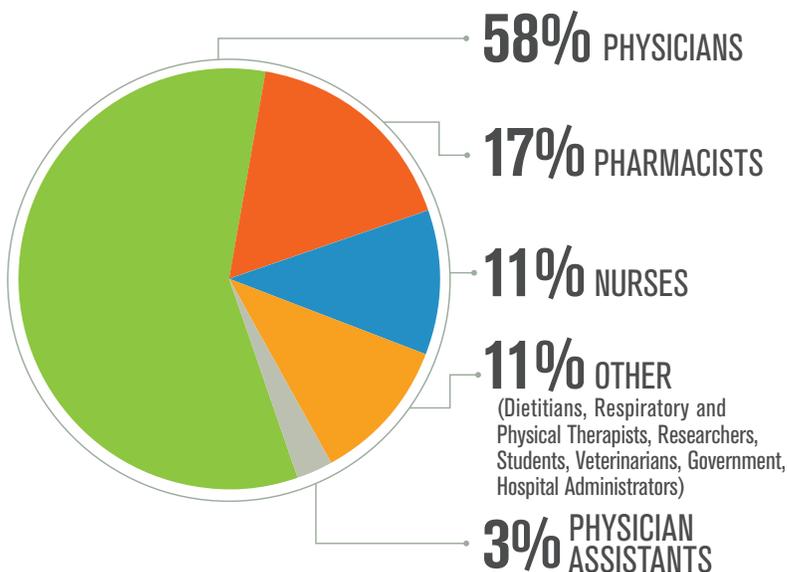


**Ndidi Musa, MD, FCCM**  
Pediatric Cardiac Intensivist  
University of Washington Seattle Children's Hospital

**What does Better Together mean to you?**

That we work together as a team—nurses, respiratory therapists, nutritionists, pharmacists. We are better together because each person brings their knowledge, and the patient gets the collective wisdom of the team.

### 2023 Congress Registrant Breakdown



#### Top Sessions

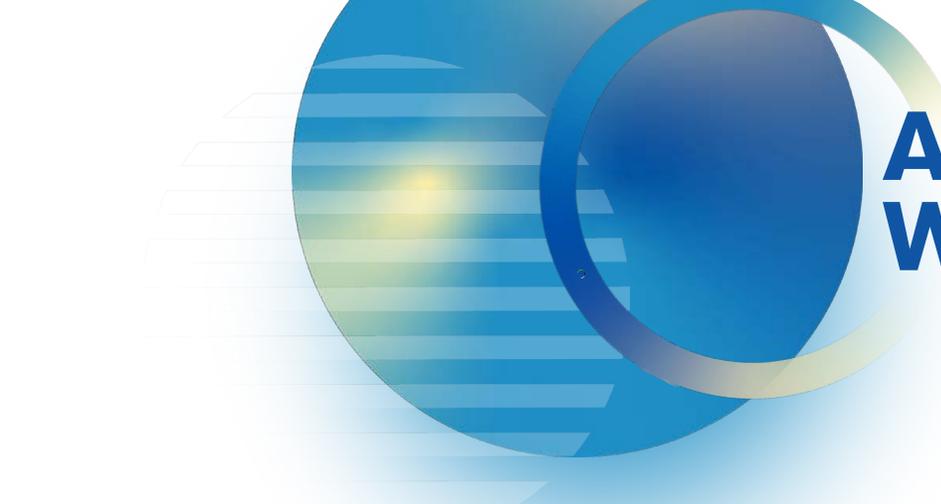
Late-Breaking Studies That Will Change Your Practice

Wife and Death, Featuring Dr. and Lady Glaucomflecken

Congress Opening Session and Presidential Address

Healthcare Redesign: Embedding Diversity, Equity, and Inclusion in Critical Care

Assessing Fluid Responsiveness in 2023



# AWARD WINNERS

**Congratulations to these 2023 SCCM award winners!**  
**Awards were presented during the 2023 Critical Care Congress.**

## **ASMUND S. LAERDAL MEMORIAL LECTURE AWARD**

**Sponsor: *Laerdal Foundation for Acute Medicine***

Commemorates Asmund S. Laerdal, creator of the Resusci Anne model used in cardiopulmonary resuscitation training procedures, and recognizes an individual for his/her extensive involvement in resuscitation research and publishing.

**Robert M. Sutton, MD, FCCM**

## **BARRY A. SHAPIRO MEMORIAL AWARD FOR EXCELLENCE IN CRITICAL CARE MANAGEMENT**

**Sponsor: *Barry A. Shapiro Memorial Award Fund***

Recognizes an individual who has made significant contributions to the design and/or implementation of an evidence-based practice that has significantly impacted clinical, operational, or fiscal outcomes within his/her area of responsibility.

**Jana A. Stockwell, MD, FCCM**

## **CHAPTERS ALLIANCE EXCELLENCE AWARD**

**Sponsor: *Chapters Alliance***

Recognizes a chapter for its exceptional work by being in good standing; holding regular academic activities; providing mentorship in areas of academics, patient care, research, and professional growth; providing outcomes measurements and reporting; and demonstrating continued importance in the development and growth of the chapter.

**Michigan Chapter**

## **DISTINGUISHED INVESTIGATOR AWARD**

**Sponsor: *American College of Critical Care Medicine***

Recognizes an established and active SCCM clinical investigator for meritorious and pioneering clinical research in critical care who has significantly contributed to the understanding of disease or treatment of patients.

**Craig M. Coopersmith, MD, FACS, MCCM**

## **DISTINGUISHED SERVICE AWARD**

Recognizes SCCM members who have made exceptional leadership contributions that have furthered the vision and mission of SCCM.

**Ognjen Gajic, MD, FCCM**  
**Tudy M. Hodgman, PharmD, BCPS, FCCM**  
**Ashish K. Khanna, MD, MS, FCCM**  
**Greg S. Martin, MD, MSc, FCCM**  
**Julie M. Winkle, MD, FCCM**

## **DR. JOSEPH AND RAE BROWN AWARD**

**Sponsor: *Pennsylvania Chapter of the Society of Critical Care Medicine***

Recognizes an SCCM member who has significantly advanced multiprofessional, quality care for critically ill and injured patients at the regional or local level.

**Alex D. Loarca, MD**

## **DRS. VIDYASAGAR AND NAGAMANI DHARMAPURI AWARD**

**Sponsors: *Drs. Vidyasagar and Nagamani Dharmapuri***

Recognizes an SCCM member for sustained exemplary and pioneering achievements in the care of critically ill and injured infants and children.

**Jayashree Muralidharan, MD, DNB, FIAP, FCCM**

## **FAMILY-CENTERED CARE INNOVATION AWARD**

Recognizes innovations that improve the care provided to critically ill and injured patients and their families.

**Cedars Sinai Medical Center**  
**Neuroscience ICU Family Room Project**  
**Los Angeles, California, USA**

## **GRENVIK FAMILY AWARD FOR ETHICS**

**Sponsor: *Grenvik Family Memorial Fund***

Established in memory of Christer Grenvik, MD, to honor an SCCM member who has promoted the ethical and humane delivery of critical care.

**K. Sarah Hoehn, MD, MBe**



**Patient**  
Levi Oattes  
**Family**  
Amy Oattes, Wyatt Oattes, BJ Bear  
**ICU Director**  
Joshua A. Marks, MD,

## ICU HEROES AWARD

Recognizes that a patient and family are an integral part of ICU care and awards an ICU patient, the family, and the multiprofessional team that delivered the care.



**Patient**  
Rowen Cartmill  
**Family**  
Mauria Cartmill, Craig Cartmill  
**ICU Director**  
Wendy Hasson, MD  
**Clinical Staff**  
Omar Bhutta, MD, Chris Whorly, RN

### INNOVATION IN EDUCATION AWARD

Honors an educator or team of educators who demonstrate(s) excellence and creativity in the development of an innovative educational program.

**Children's Hospital of Philadelphia**  
**Project POINTER (PICU Overnight INTERprofessional**  
**Education of Residents)**  
**Philadelphia, Pennsylvania, USA**

### NORMA J. SHOEMAKER AWARD FOR CRITICAL CARE NURSING EXCELLENCE

Honors Norma J. Shoemaker, RN, MN, FCCM, SCCM's first executive director, and recognizes an SCCM nurse member who demonstrates excellence in critical care clinical practice, education, and/or administration.

**Marilia I. Diaz Correa, RN, MSN, FCCM**

### SAFAR GLOBAL PARTNER AWARD

Recognizes an individual, hospital, or organization that expands the global reach of SCCM.

**Jorge L. Hidalgo, MD, MACP, MCCM**

### LIFETIME ACHIEVEMENT AWARD

Honors an individual who has demonstrated a lifetime of meritorious contributions to the field of critical care through the advancement of medical science, medical education, or medical care.

**John C. Marshall, MD, FRCS, FACS**

### PATIENT SAFETY FIRST! AWARD

Recognizes a unit or program that demonstrates novel, effective patient safety initiatives for critically ill and injured patients.

**Cincinnati Children's Hospital Medical Center PICU**  
**Chain of Survival Program**  
**Cincinnati, Ohio, USA**

### SHUBIN-WEIL MASTER CLINICIAN/TEACHER: EXCELLENCE IN BEDSIDE TEACHING AWARD

**Sponsor: Weil Family Foundation**

Recognizes an SCCM member who is a role model in both the teaching and ethical practice of critical care and who has substantially furthered the expert and appropriate use of life support interventions.

**Melissa E. Brunsvold, MD, FCCM**

# LOCAL IMPACT

In 2023, SCCM partnered with Project Homeless Connect and the San Francisco Ambassadors, two groups that work with people who are unhoused. SCCM supported Project Homeless Connect's Community Day of Service, which provided essential healthcare services delivered with care and dignity to people who are unhoused. Additionally, SCCM provided free Stop the Bleed training for the staff of these two organizations.



## Looking Ahead

### BRINGING CONGRESS CLOSER TO MEMBERS

SCCM is making exciting changes to its Critical Care Congress programming, including a shift to more spring dates and first-time locations!

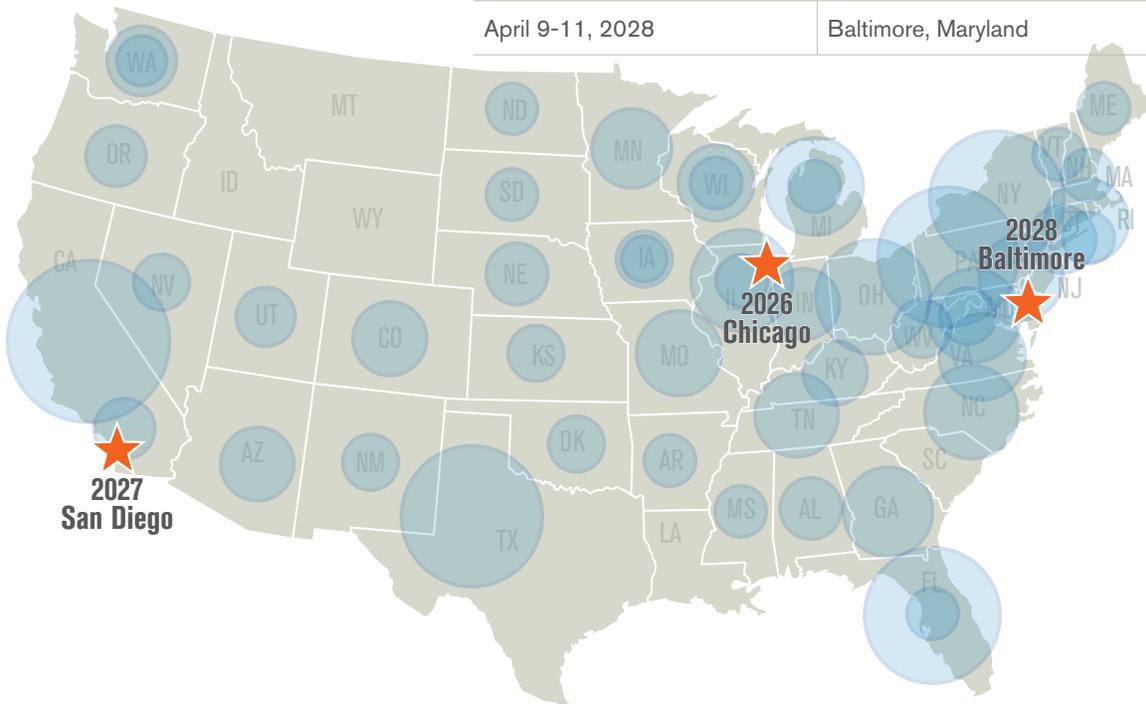


New dates and locations will provide a more inclusive experience that will maximize opportunities to attend.

All dates and locations are subject to change.

#### New Spring Dates and Locations!

March 22-24, 2026	Chicago, Illinois
March 14-16, 2027	San Diego, California
April 9-11, 2028	Baltimore, Maryland





# Fellows and Masters of the American College of Critical Care Medicine

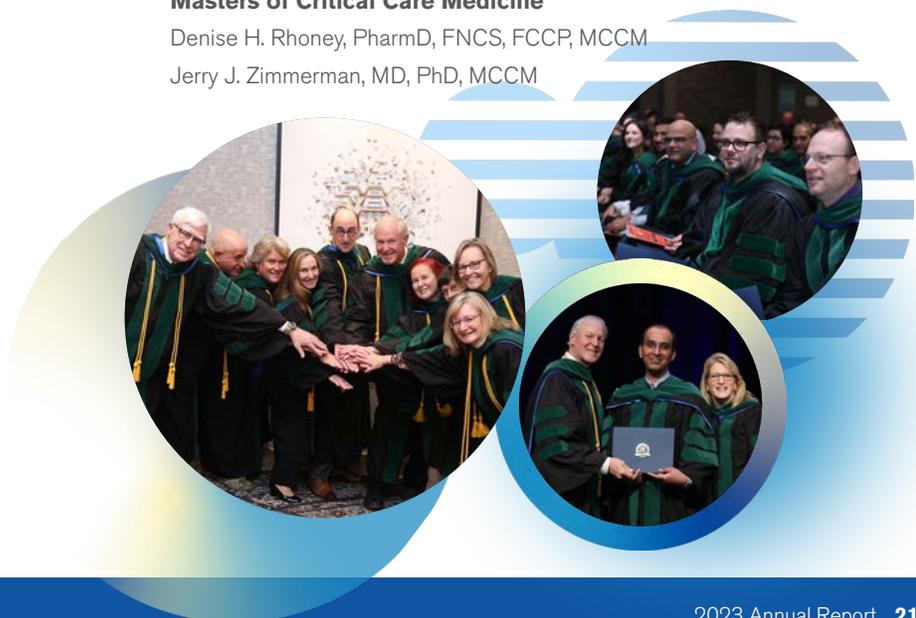
Congratulations to these 2023 American College of Critical Care Medicine Fellows and Masters! These Fellows and Masters were commemorated at the 2023 Critical Congress during the Convocation.

Jason L. Adler, MD, MBA, FCCM  
Olugbenga A. Akingbola, MD, CPE, CHSE, FAAP, FCCM  
Khalid A. Al Sulaiman, BCCCP, BCNSP, MBA, FCCM  
Diana Altshuler, PharmD, BCPS, BCCCP, FCCM  
Suneesh C. Anand, MD, FCCM  
Krishna Aparanji, MD, CPE, FCCM  
Zachary P. Asher, MHS, PA-C, FCCM  
Nteshi A. Asimi, MD, FCCM  
Mary Kay Bader, RN, MSN, CNS, CCRN, CCNS, FCCM  
Carolyn M. Bell, PharmD, BCCCP, FCCM  
Ryan P. Bierle, DMSc, PA, LP, FAWN, FCCM  
Angela L. Bingham, PharmD, BCPS, BCNSP, BCCCP, FCCP, FCCM  
Vaibhav Bora, MD, MBBS, FASE, FASA, FCCM  
Trisha N. Branan, PharmD, BCCCP, FCCM  
Andrea B. Braun, MD, Dr.med, FCCM  
Caitlin S. Brown, PharmD, BCCCP, FCCM  
Katharina M. Busl, MD, MS, FCCM  
Leon Chen, DNP, ACNP, AGACNP-BC, FCCP, FAANP, FCCM  
Neha S. Dangayach, MD, FCCP, FNCS, FAAN, FCCM  
Ashley D. DePriest, LD, MS, RD, CNSC, FCCM  
Michael W. Dingeldein, MD, FACS, FAAP, FCCM  
Nicholas A. Ettinger, MD, PhD, FAAP, FCCM  
David C. Evans, MD, FCCM  
James C. Fackler, MD, FCCM  
Saul Flores, MD, FCCM  
Brian W. Gilbert, PharmD, MBA, BCPS, BCCCP, FCCM  
Philip E. Grgurich, PharmD, BCPS, FCCM  
Daniel J. Haase, MD, FCCM  
Jason Hecht, PharmD, BCPS, BCCCP, FCCM  
Cindy H. Hsu, MD, PhD, MS, FCCM  
Kerstin G. Hudgins, EdD, MSN, RN, CCRN, CEN, FCCM  
Lauren A. Igneri, PharmD, BCPS, BCCCP, FCCM  
Nadia H. Ismail, BS, MS, BCCCP, MSc, FCCM  
Kaori Ito, MD, PhD, FCCM  
Nitesh K. Jain, MD, MBBS, FCCM  
Michael T. Kenes, PharmD, BCPS, BCCCP, FCCM  
Desiree E. Kosmisky, PharmD, BCCCP, FCCM  
Pedja Kovacevic, MD, PhD, FCCP, FCCM  
Catherine M. Kuza, MD, BA, FASA, FCCM  
Peter J. Lindbloom, MPAS, RDMS, PA-C, FCCM  
Joshua A. Marks, MD, FACS, FCCM  
Susan F. McLean, MD, MPH, FACS, FCCM  
Emily M. McRae, DNP, ACNP, APRN, CPNP-AC/PC, FCCM  
Scott Micek, PharmD, BCPS, BCCCP, FCCM

Andrew G. Miller, MSc, RRT-ACCS, RRT-NPS, FCCM  
Eduardo Mireles-Cabodevila, MD, FCCM  
Christopher C. Morrison, PharmD, BCCCP, FNCS, FCCM  
Benjamin A. Moses, MD, MS, FCCP, FCCM  
Diana Wells Mulherin, PharmD, BCNSP, BCCCP, FCCM  
Andrea M. Nei, PharmD, BCPS, BCCCP, FCCM  
Sara Nikravan, MD, FASE, FCCM  
Jody C. Olson, MD, FCCM  
Brandon Oto, PA-C, NREMT, FCCM  
Nicole M. Palm, PharmD, BCCCP, FCCM  
Vinciya Pandian, PhD, MBA, MSN, RN, CRNP, ACNP-BC, FCCM  
Donald S. Prough, MD, FCCM  
Kathleen Romanowski, MD, FACS, FCCM  
Cassandra A. Ruggles, PharmD, BCPPS, BCCCP, FCCM  
Ravi S. Samraj, MD, FCCM  
James A. Scott, DO, FCCP, FASA, FCCM  
Donald H. Shaffner Jr, MD, FCCM  
Nissaruddin Shaikh, MD, MB, EDIC, FCCM  
Nicole Siparsky, MD, FACS, FCCM  
Susan E. Smith, PharmD, BCPS, BCCCP, FCCM  
L. Douglas Smith Jr, DNP, APRN, ACNP-BC, CCRN, FCCM  
Eduardo Smith-Singares, MD, FCCM  
Roberta T. Tallarico, MD, FCCM  
Jonathan D. Trager, DO, FCCM  
Sandeep Tripathi, MD, MS, FCCM  
Isaiah R. Turnbull, MD, PhD, FCCM  
Emily K. Valcin, DNP, RN, FCCM  
Brandon M. Wiley, MD, FACC, FASE, FCCM  
Corey J. Witenko, PharmD, BCPS, BCCCP, FCCM

## Masters of Critical Care Medicine

Denise H. Rhoney, PharmD, FNCS, FCCP, MCCM  
Jerry J. Zimmerman, MD, PhD, MCCM



# RESOURCES FOR THE MULTIPROFESSIONAL TEAM

SCCM provides a breadth of education focused on hot topics in critical care. Education is tailored for every member of the team, and new and exciting opportunities are always in development.



SCCM released more than 30 podcasts, featuring interviews with authors from *Critical Care Medicine*, *Pediatric Critical Care Medicine*, and *Critical Care Explorations*. The SCCM Podcasts reached nearly one million listeners! Learn more at [sccm.org/podcast](https://sccm.org/podcast).

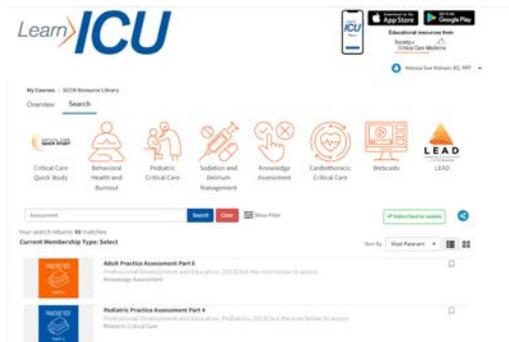


SCCM webcasts tackle late-breaking issues and the latest research. SCCM hosted more than 35 webcasts on a variety of hot topics. Learn more at [sccm.org/webcast](https://sccm.org/webcast).

Top 5 Podcasts	Downloads
<b>SCCM Pod-469 CCM: Method or Madness? Epidemiology of ICU-Onset Bloodstream Infection</b>	<b>18,279</b>
<b>SCCM Pod-463 CCM: Clazakizumab for COVID-19: Friend or Foe?</b>	<b>17,647</b>
<b>SCCM Pod-446: Comparison of Bivalirudin Versus Heparin</b>	<b>17,647</b>
<b>SCCM Pod-470 PCCM: Adverse Events and Mortality in the PICU</b>	<b>17,647</b>
<b>SCCM Pod-471: Mitigating Diagnostic Delays and Errors With Emphasis on Sepsis</b>	<b>17,647</b>

Top 5 Webcasts
<b>Implementing the Sepsis Hour-1 Bundle</b>
<b>Mitigating Implicit Bias in Diagnosing Patients With Sepsis</b>
<b>Engaging Healthcare Leaders in Sepsis Prevention and Progression</b>
<b>RSV in Critically Ill Children: Therapy and Management</b>
<b>Billing and Documentation Update 2022</b>

SCCM's Resource Library, part of LearnICU, offers access to more than 1000 resources, from presentation recordings and assessments to microlearning and book chapters. SCCM members receive access to the complete library, organized by knowledge area, learning pathways, and keyword to help find the resources relevant to you. Learn more at [sccm.org/learnicu](https://sccm.org/learnicu).



Top SCCM Resource Library Items
<b>Adult Practice Assessment Part 1 and Part 2</b>
<b>Intubation Medications/Sedation Requirements for Intubating COVID-19 Patient, Infographic</b>
<b>Pediatric Practice Assessment Part 1</b>
<b>Atrial Fibrillation in the Critically Ill: What, When, How, and What If?</b>

## New Courses and Opportunities

Download the Educational and Clinical Resources guide to explore all that SCCM has to offer.



**Download Now**

Deep Dive Courses
The Final Frontier of Sepsis Precision Medicine
Acute Kidney Injury and Organ Crosstalk During Critical Illness
Goals of Patient Care, Leadership, and Patient Flow
Advances in the Care of Infectious Diseases in the ICU
Post-Cardiac Arrest Online
Using Bundled Data in the EHR Online
New Courses
Advanced Critical Care Ultrasound: Echocardiography Learning Lab
Introduction to Point-of-Care Ultrasound in Life Support and Sepsis
Leadership, Empowerment, and Development programming

# GLOBAL HEALTH



SCCM  
Global Health

Launched during the 2023 Critical Care Congress, SCCM Global Health programs support humanitarian efforts worldwide, delivering free training and educational resources, supporting healthcare infrastructure, and providing supplies, medications, equipment, and volunteer clinicians to low-resource and crisis-affected areas. Learn more at [sccm.org/globalhealth](https://sccm.org/globalhealth).

From 2021 to 2023, SCCM has been a responsible steward of more than \$12.9 million in grant- and donor-funded activities supporting humanitarian projects, crisis response, and critical care training worldwide.

## HUMANITARIAN AND CRISIS RESPONSE ACTIVITIES

### Training in Ukraine

SCCM volunteers and staff traveled twice to Lviv, Ukraine, in 2023 to train nearly 500 clinicians on lifesaving education focused on point-of-care ultrasound (POCUS), Fundamental Critical Care Support: Surgical, and ICU Liberation. Courses from SCCM's critical care educational programs allowed Ukrainian medical professionals to hone skills to quickly diagnose and care for critically ill and injured patients and treat them after an ICU stay.

The courses included train-the-trainer techniques to ensure clinicians can continue to teach these skills.

"We provided the education to the experts in Lviv so they can then teach other clinicians in the country. This training can help in any situation where clinicians need to quickly assess whether someone is seriously ill and recognize critically ill patients early so they can intervene and prevent worse complications," said Mary J. Reed, MD, FCCM, a mission leader and Fundamental Critical Care Support expert.

Learn more about SCCM's efforts in Ukraine at [sccm.org/ukraine](https://sccm.org/ukraine).



Left to right: Sergii Dubrov, MD, First Deputy Minister of Health of Ukraine; Natalia Matolinets, MD, deputy medical director for anesthesiology of the Lviv First Territorial Medical Union; and José L. Díaz-Gómez, MD, FCCM, SCCM Council member and lead volunteer.



## Africa Infrastructure Relief and Support

The new Africa Infrastructure Relief and Support (AIRS) program will ensure the availability of stable, sustainable medical oxygen to patients in the Gambia, Sierra Leone, and Liberia. Officials and healthcare professionals from the three countries have informed project staff about their oxygen needs and are working closely with SCCM AIRS leaders.

In February 2023, SCCM leaders embarked on a diplomatic mission to these countries to meet with key staff on the ground. Participants on the trip were John B. Sampson, MD, associate professor of anesthesiology and critical care medicine at Johns Hopkins University School of Medicine, chair of the AIRS project; SCCM President Vinay M. Nadkarni, MD, MS, FCCM; and Mary J. Reed, MD, FCCM. They met with staff from the nonprofit Diaspora African Forum (DAF), the first and only diplomatic mission dedicated to the African Diaspora, as well as leaders and staff of the Edward Francis Small Teaching Hospital, the only teaching hospital in the Gambia. In Sierra Leone, the team met with leaders from the Ministry of Health and Sanitation and staff from the Bo Government Hospital, where the application of solar energy will be developed.



AIRS project leaders are welcomed at the Diaspora African Forum in Ghana to kick off the diplomatic trip.

Dr. Sampson has been helping improve health systems in Africa for more than two decades. He notes several key components that will influence the project's success. "For a program like this to succeed, we need to have a team that is sensitive to the healthcare priorities of the country that we're working with. We need to have a system set up for a proper maintenance culture. We want to see this equipment 10 years from now still working and still delivering care."

This project is made possible by a \$5.5 million grant from Direct Relief and in collaboration with the Johns Hopkins Global Alliance of Perioperative Professionals and the Institute of Global Perioperative Care.

[Read More](#)

## Türkiye-Syria Earthquake Response

In February of 2023, a 7.8-magnitude earthquake caused widespread damage across Türkiye and northern Syria, killing more than 50,000 people and causing devastation to the healthcare system in these two countries. SCCM's partners at Direct Relief needed contacts to help pave a smooth path for needed medical supplies. SCCM connected Direct Relief with Oktay Demirkiran, president of the Turkish Intensive Care Association, and government officials from Türkiye. More than 440 tons of medical aid have now made it safely into Türkiye and Syria.

SCCM, with support from Direct Relief, went on to provide Fundamental Critical Care Support (FCCS) training to more than 70 Turkish and Syrian healthcare professionals during the World Federation of Intensive and Critical Care (WFICC) meeting in August 2023. The training was performed in both English and Arabic. Additionally, SCCM and Direct Relief provided free registration and travel costs to the WFICC conference for nearly 150 Turkish and Syrians clinicians to advance critical care education!

## Donor-Funded Training in Low-Resource Areas



The Edwards Lifesciences Foundation has supported SCCM with \$1 million in grant funding since 2020. These grants support the foundation's Every Heartbeat Matters initiative, which seeks to improve the lives of 2.5 million underserved structural heart and critical care patients. SCCM has held more than 100 free Fundamentals training courses worldwide, training more than 3,600 learners. Attendees focused on critical care recovery of cardiac and high-risk surgery patients, and courses were held in low-resourced areas.

### Looking Ahead



**SCCM is seeking new sites in low-resources areas as it continues to partner with the Edwards Lifesciences Foundation into 2024. Learn more about the criteria for free training and apply at [sccm.org/freetraining](https://sccm.org/freetraining).**

### Crisis Response during Natural Disasters

SCCM monitors current events and regularly activates its crisis response plan, which includes releasing complimentary education and resources to help clinicians treat critically ill and injured patients, respond to patient surges, and implement resource allocation strategies. Learn more at [sccm.org/response](https://sccm.org/response).

From October 2022 to September 2023, SCCM provided free critical care resources to those effected by:

- West Java earthquake
- Hawaii wildfires
- Hurricane Idalia
- Marrakesh–Safi earthquake
- Libya floods

# HOSTED TRAINING

## Providing Vital Skills Training Worldwide

SCCM provides a variety of skills training opportunities. The Fundamentals programs are geared toward future intensivists and those not trained in critical care.

### Introducing the Per-Learner Model: A Better Way to Host Training

SCCM's hosted courses have been around since the launch of the Fundamental Critical Care Support course in 1996. Hosted courses are expert-developed courses that are licensed to institutions to train attendees in a consistent, comprehensive manner.

SCCM updated the hosted training model by:

- Implementing a per-learner fee (rather than a learner fee and licensing fee)
- Providing more flexibility for hosts to provide in-person or online lectures, in addition to interactive skills
- Updating the program director portal to improve the user experience and simplified purchase process



Fundamental Critical Care Support Course	Students Trained	Courses Held Worldwide
Fundamental Critical Care Support	4723	224
Fundamental Critical Care Support: Pediatrics	1037	52
Fundamental Critical Care Support: Obstetrics	309	13
Fundamental Critical Care Support: Resource Limited	71	3
Fundamental Critical Care Support: Surgical	298	14
<b>New!</b> Fundamental Critical Care Support: Crisis Management	68	5
Other Hosted Training Courses		
ICU Liberation	20	1
Multiprofessional Critical Care Review	285	2
Ultrasound	180	4

Learn more about how SCCM's programs can help your team improve care. Contact the Hosted Training Team at [Hostedtraining@sccm.org](mailto:Hostedtraining@sccm.org).

## Looking Ahead



**SCCM is always expanding its hosted training offerings. The hosted training model allows hospitals and institutions greater flexibility and opportunity to train clinicians on the skills they need. Look for these popular SCCM courses to be offered as hosted training opportunities soon. Learners will have the opportunity to review lectures and assess their knowledge online and then attend in-person skill stations to make the most of their learning.**

### Airway and Mechanical Ventilation

A practical guide for clinicians new to airway and mechanical ventilation management or those looking to refresh their techniques, Airway and Mechanical Ventilation Management highlights new practices in managing critically ill adults. Topics range from an overview of airway practices to advanced airway techniques.

### Hemodynamic Monitoring

Receive a comprehensive introduction to hemodynamic monitoring in critically ill patients. Course content covers basic principles of hemodynamics and shock management, concepts of functional hemodynamic monitoring and assessment of fluid responsiveness, and cardiovascular pharmacology. Assessment of tissue perfusion, technical aspects of monitoring, and consideration of strengths and weaknesses of various invasive and noninvasive monitoring devices will also be covered.

### Blood Purification Program Pilot

The Blood Purification Program is a pilot course developed by a group of international experts from China, United States, and Europe. It is committed to improving the knowledge and skills of clinicians who manage critical care patients with blood purification therapy. A pilot course is being planned for the China region.

# QUALITY IMPROVEMENT



## ICU LIBERATION CAMPAIGN

Liberate patients from the harmful effects of an ICU stay with the ICU Liberation Campaign. The campaign provides evidence-based strategies for the entire multiprofessional critical care team that have been shown to improve outcomes for patients and reduce costs for hospitals, while transforming ICU culture.

### Implementing ICU Liberation Into Your Electronic Health Record

Epic and Cerner's inclusion of the ICU Liberation Bundle (A-F) in their electronic health record software puts these evidence-based practices at the fingertips of physicians, nurses, and other clinicians. Educational events and resources centered around providing more information about implementing the ICU Liberation Bundle into electronic health systems continue to break attendance and download records.

### Bringing the ICU Liberation Course to Hospitals Worldwide

Since 2020, ICU Liberation has been an offering in SCCM's hosted training catalog, allowing institutions to license the course and provide uniform patient management training to their clinicians.

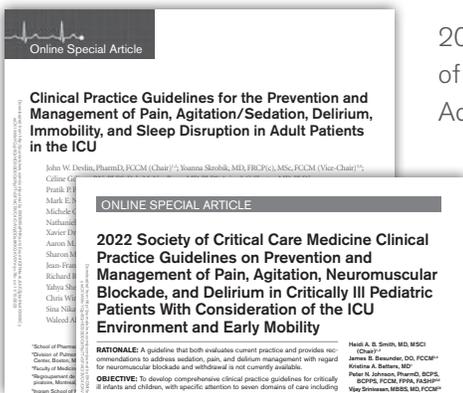
### Providing a Free Toolkit to Implement the ICU Liberation Bundle

The ICU Liberation Toolkit has been downloaded more than 5000 times since its release. It includes tools such as compliance calculators, teaching slides, and minimal data set tools for adults and pediatrics along with links to helpful resources.

[Click to Download Free Toolkit](#)

### Publishing Evidence-Based Guidelines and Research

Thousands of clinicians have accessed these guidelines to understand the foundations of the campaign:



2018 Clinical Practice Guidelines for the Prevention and Management of Pain, Agitation/Sedation, Delirium, Immobility, and Sleep Disruption in Adult Patients in the ICU

2022 SCCM Clinical Practice Guidelines on Prevention and Management of Pain, Agitation, Neuromuscular Blockade, and Delirium in Critically Ill Pediatric Patients With Consideration of the ICU Environment and Early Mobility (PANDEM)

## Looking Ahead



Look for details in 2024 about how SCCM is expanding its quality improvement efforts through the new ICU Centers of Excellence pilot program.

## ACHIEVING DIAGNOSTIC EXCELLENCE IN SEPSIS AND SEPTIC SHOCK

In 2022, SCCM launched the Diagnostic Excellence Program to inform and support implementation of diagnostic excellence strategies to healthcare professionals and leaders to improve patient outcomes in reducing delays and errors in early recognition of sepsis. This program, funded by a Council of Medical Specialty Societies (CMSS) grant, strives to enhance diagnostic excellence, address implicit biases affecting diagnoses, and increase awareness about sepsis. The project yielded several educational materials, including webcasts, podcasts, and toolkits.

### Webcasts and Podcasts

Title	Description	Webcast Views	Podcast Listens
<b>Mitigating Diagnostic Delays and Errors</b>	Addressing the major causes of morbidity, mortality, and mitigation, this session explored effective techniques to mitigate diagnostic delays and errors.	<b>622</b>	<b>13,990</b>
<b>Implementing the Sepsis Hour-1 Bundle</b>	This session delved into the efficacious national and international sepsis bundle, providing insights into its implementation strategies.	<b>2241</b>	<b>12,970</b>
<b>Mitigating Implicit Bias in Diagnosing Patients With Sepsis</b>	This session offered strategies to recognize and counteract implicit bias in diagnosing patients with suspected sepsis.	<b>929</b>	<b>8643</b>
<b>Engaging Healthcare Leaders in Sepsis Prevention and Progression</b>	Exploring the clinical, operational, fiscal, and reputational impact of delays and errors in diagnosing sepsis and septic shock, this session equipped participants with tools to effectively engage hospital leadership.	<b>1151</b>	<b>9043</b>
<b>Total</b>		<b>4943</b>	<b>44,646</b>

[Click to View Webpage](#)

## IMPROVING COMMUNICATIONS ABOUT PATIENT OUTCOMES

SCCM received a Council of Medical Specialty Societies (CMSS) grant in October 2023, Developing a Feedback Mechanism for Referring ICU Clinicians of Patients With Sepsis. Knowing that it is imperative that referring clinicians learn about the outcomes of their patients to improve future clinical performance, this project aims to close the communicate gap for referring clinicians whose patients are transitioned to a higher level of care and eventually diagnosed with sepsis. The project will build on the 2022 CMSS grant to ensure that multiprofessional teams caring for patients with sepsis obtain appropriate feedback to improve and sustain excellent diagnostic performance. Learn more at [sccm.org/diagnosticexcellence](https://sccm.org/diagnosticexcellence).

### New Grant Will Focus on Improving Patient and Caregiver Care Through Research

SCCM will work to identify and disseminate strategies that can be used for overcoming barriers to patient- and family-centered comparative effectiveness research. The project is made possible by a \$250,000 award through the Eugene Washington PCORI Engagement Award program, an initiative of the Patient-Centered Outcomes Research Institute (PCORI). "Addressing Barriers to Engaging Patient and Caregivers Experiencing Critical Illness to Build Capacity for Patient-Centered Outcomes Research" aims to identify strategies that can be used to overcome barriers for patients and caregivers to participation in research. The project will be led by Vanderbilt University School of Nursing researchers Ruth Kleinpell, PhD, RN, FAAN, FAANP, FNAP, MCCM, and Marianna LaNoue, PhD.

## Comprehensive Toolkits:

In addition to interactive learning, SCCM developed toolkits addressing preventive measures for diagnostic delays and errors in diagnosing sepsis and septic shock.

Download

### Mitigating Diagnostic Delays and Errors

This toolkit emphasizes improved communication methods in ICUs to mitigate sepsis-related diagnostic delays and errors.

Download

### Implementing the Hour-1 Bundle

This toolkit provides a detailed guide on implementing the Hour-1 Bundle, emphasizing the role of champions and multiprofessional teams to initiate timely interventions within the crucial first hour of sepsis recognition.

Download

### Mitigating Implicit Bias in Diagnosing Patients With Sepsis

This toolkit focuses on recognizing and mitigating implicit bias in the ICU. It includes questions for reflection, along with links to interactive modules, case studies, and practical methods to sensitize clinicians about biases affecting sepsis diagnoses.

Download

### Engaging Healthcare Leaders in Sepsis Prevention and Progression

This toolkit focuses on engaging healthcare leaders in understanding the financial implications of diagnostic delays and errors in sepsis management.

## GUIDELINES ARE A KEystone OF QUALITY IMPROVEMENT

SCCM released three guidelines during the fiscal year, which are available for free in *Critical Care Medicine*. Check out [sccm.org/guidelines](https://www.sccm.org/guidelines) to find additional resources and online tools to easily filter recommendations by strength and category.

### Guidelines for the Management of Adult Acute and Acute-on-Chronic Liver Failure in the ICU (Part II)

*Crit Care Med.* 2023  
May;51(5):657-676.

### Guidelines for Evaluating New Fever in Adult Patients in the ICU

*Crit Care Med.*  
2023 Nov;51(11):1570-1586.

### Guidelines for Rapid Sequence Intubation in the Critically Ill Adult Patient

*Crit Care Med.*  
2023 Oct;51(10):1411-1430.

### New Guidance Issued on the Determination of Brain Death

SCCM also served as a collaborating partner on the release of a revised consensus practice guideline for the determination of brain death in both children and adults. The guidelines were published in the October 2023 issue of *Neurology*, the official journal of the American Academy of Neurology. Additional commentary on what critical care professionals need to know about the updated guidance will be published online ahead of print in January 2024 and appear in the February 2024 print edition of *Critical Care Medicine*.

More Information

## Looking Ahead



Look for guidelines on these clinical topics to be released in 2024 and beyond.

Recognizing Critical Illness Outside the ICU

Stress Ulcer Prophylaxis

Glycemic Control for Children and Adults

Corticosteroid Use in the ICU

# DISCOVERY AND RESEARCH



The Critical Care Research Network

Discovery, the Critical Care Research Network, celebrated six years in April 2023 and continues to collect a variety of accomplishments. Discovery programs and projects are making a huge impact on the future of critical care.



Since Discovery's 2017 inception, notable achievements include:

- **8 Discovery programs**
- **40 Discovery-endorsed projects**
- **More than 170,000 patients enrolled in Discovery studies**
- **Nearly 100 Discovery-related publications and abstracts published**

## DISCOVERY TIMELINE

Learn more about the evolution of Discovery and its impact at [sccm.org/discoveryat5](https://sccm.org/discoveryat5)

2018

Discovery launched a grant program, offering \$100,000 in funding each year to support critical care investigators.

2017

Discovery, the Critical Care Research Network, was launched.

The first in-person Discovery Clinical Investigators Meeting was held at the National Institutes of Health in Bethesda, Maryland. Federal funding program officers attended.

2016

The research trials network business plan was approved. Existing critical trials networks United States Critical Illness and Injury Trials (USCIIT) and Critical Care Pharmacotherapy Trials Network (CCPTN) disbanded and joined SCCM.

2015

The task force, along with key SCCM leaders and staff, developed a business plan for the implementation of a research trials network.

2014

SCCM Council appointed a Research Network Task Force to perform a needs assessment and provide recommendations to improve critical care research.



**Rahul Kashyap, MD, MBA**  
Principal investigator  
Discovery Steering Committee Member

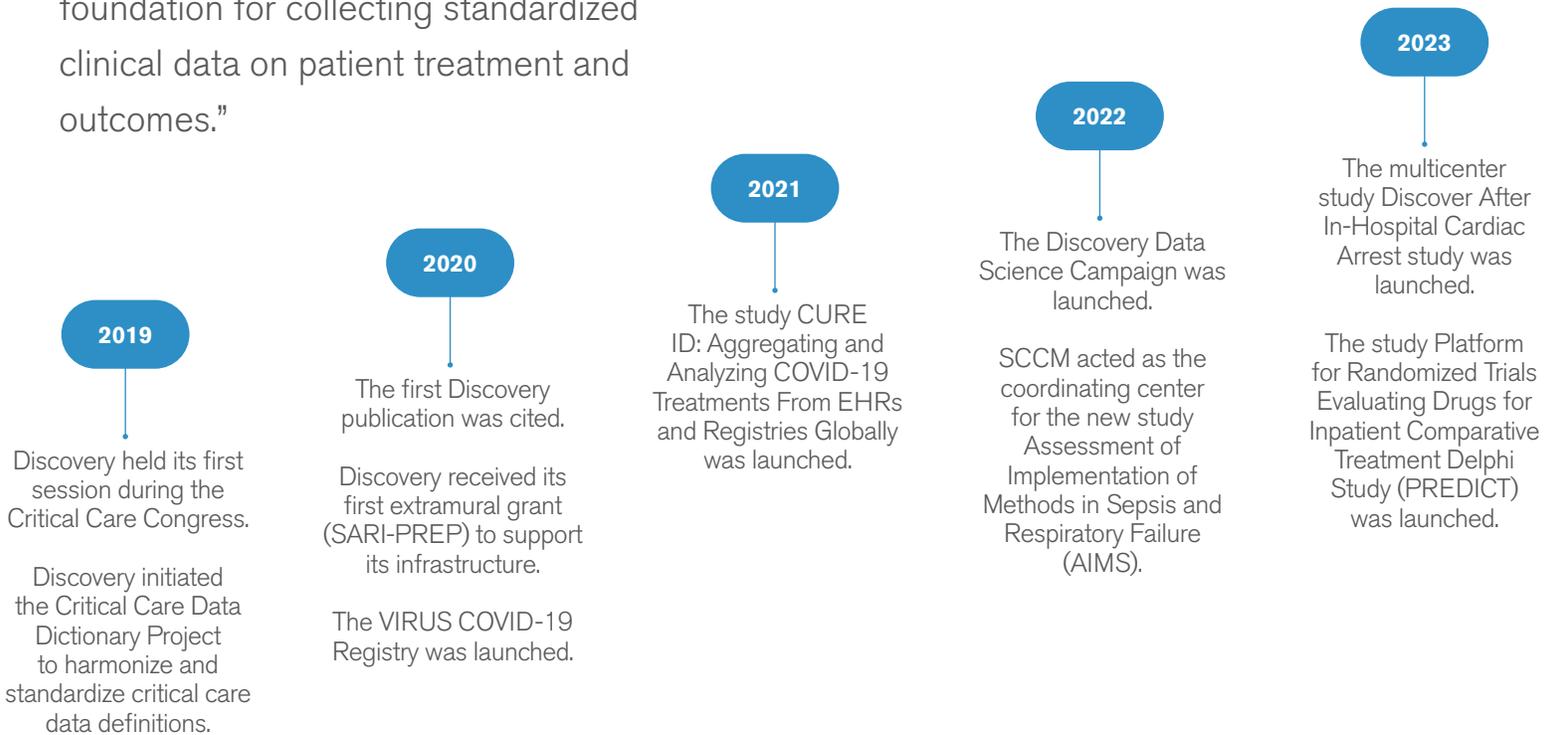
“Without Discovery, initiatives such as the VIRUS COVID-19 Registry likely would have existed but only as educational initiatives to provide resources for ICU departments and hospitals in need. Thanks to Discovery, the registry has become a foundation for collecting standardized clinical data on patient treatment and outcomes.”

## CLINICAL INVESTIGATORS MEETINGS

Each year, Discovery holds clinical investigators meetings, including one during the Critical Care Congress. More than 300 attendees participated in these meetings in 2023.

**April 10, 2023:** What's Next for ICU Research? New Tools for ICU Research

**September 28-29, 2023:** New Health Information Technologies Implementation: Who, How, Why, and What?



### Looking Ahead



**Outputs are expected from the Data Science Campaign.  
New clinical studies and collaborations will be launched.**

# SCCM'S DISCOVERY DATATHON PARTICIPANTS LOOK TO THE FUTURE

More than 70 participants, including critical care clinicians, data scientists, and researchers, came together to use data science to solve critical care problems during SCCM's Discovery Datathon. The event was held in New York City in August 2023, attracting attendees from 25 U.S. states and more than 12 countries.

The participants worked in multiprofessional teams to develop pragmatic, data-driven models applicable to the care of critically ill patients, addressing patient safety, COVID-19, and health equity. They were given access to de-identified critical care electronic health record datasets and had the opportunity to collaborate with experts in the field of critical care medicine.

Special thanks to the sponsors and supporters of the Datathon:

- Patient Safety Technology Challenge
- Gilead Sciences
- Clew Medical

## Looking Ahead



**Three teams were selected as winners, one from each category (COVID-19, patient safety, health equity). One member from each winning team will receive support for registration and travel for the 2024 Critical Care Congress in Phoenix, Arizona, USA.**

**Look for details about the 2025 datathon coming soon!**



### **Does Limited English Proficiency Affect Time-to-Death for Critically Ill Patients Who Expire in the Hospital?**

*Topic: Health Equity*

Team #4



### **The PRONE-COVID Study: PRoning and Outcomes among different ethNiciTiEs**

*Topic: COVID-19*

Team #8



### **What Are the Key Factors Influencing Glucose Variability in Point-of-Care and Serum Measurements?**

*Topic: Patient Safety*

Team #1

# GRANT RECIPIENTS

SCCM is proud to advance critical care through numerous grants that unlock opportunities for established and early-career researchers.

## DISCOVERY GRANT AWARD RECIPIENTS

Awarded to SCCM members as new pilot grants to support multi-institutional critical care research studies, Discovery grants foster collaborative research to improve outcomes for patients.



**2022**  
**Whitney Gannon, APRN, MSN, RN**  
Vanderbilt University Medical Center  
*Topic: ECMO-Free Trial: A Multicenter Pilot Feasibility Study*



**2023**  
**Ankita Agarwal, MD, MSc**  
Emory University  
*Topic: Study of Physician Cognitive Load and Work in the ICU*

## SCCM-WEIL RESEARCH GRANT RECIPIENTS *Funded by the SCCM-Weil Research Trust*

Awarded to SCCM members who focus on basic, translational, or clinical research to sponsor research efforts that will improve patient care in the ICU and after discharge



**2022**  
**Joshua Denson, MD**  
Tulane University School of Medicine  
*Topic: The Impact of a Metabolic Syndrome Phenotype in ARDS*



**2023**  
**Jose Javier Provencio, MD, FCC**  
University of Virginia  
*Topic: Developing a Treatment for Delayed Cerebral Injury After Aneurysmal Subarachnoid Hemorrhage*



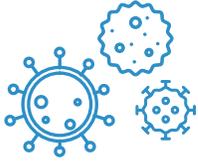
**2022**  
**Katie Moynihan, MD, FCICM, FRACP**  
Boston Children's Hospital  
*Topic: Geographic Access to Pediatric Healthcare According to Social Determinants of Health*



**2023**  
**Christine Vohwinkel, MD**  
University of Colorado  
*Topic: Metabolic Crosstalk in Acute Lung Injury Between Alveolar Macrophages and Epithelium*

# RESEARCH PROJECTS PROPELLING THE FUTURE OF CRITICAL CARE

SCCM secured several new funding opportunities and grant partnerships, further establishing Discovery and SCCM as trusted leaders in critical care research.



## VIRUS

Discovery's **Viral Infection and Respiratory Illness Universal Study (VIRUS) COVID-19 Registry** is a multi-institutional collaboration led by members of SCCM, Mayo Clinic Rochester, and Boston University. SCCM is the clinical coordinating center in collaboration with Mayo Clinic as the data coordinating center for this multicenter cross-sectional observational study and registry of all eligible adult and pediatric patients admitted to a hospital with COVID-19. As part of Discovery, this global study fosters collaborative research to promote the advancement of science in the field to improve outcomes for critically ill and injured patients and will exponentially increase research in the critical care field internationally. VIRUS's findings will be disseminated and may be implemented into practice. More than 40 publications have been released using the VIRUS Registry data to date.

ClinicalTrials.gov Identifier: NCT04323787



## CURE ID

VIRUS Registry sites are participating in the SCCM and CURE Drug Repurposing Collaboratory (CDRC) program on **CURE ID: Aggregating and Analyzing COVID-19 Treatments from EHRs and Registries Globally**. SCCM is one of the consortium partners along with other academic medical institutions. The program will crowdsource the global medical community for their experience using repurposed drugs to treat infectious diseases such as COVID-19 with no adequate approved therapies to help identify treatments that are promising and can be investigated further. The goal is to build a de-identified, readily available database using the CURE ID platform and the Discovery VIRUS COVID-19 Registry to support drug repurposing research for COVID-19 and other challenging infectious diseases and to generate hypotheses that can be confirmed in clinical trials. One manuscript has been published and another manuscript is in development to date for this project.



## DISCOVER IHCA

**The Discover In-Hospital Cardiac Arrest (IHCA) study** is a multicenter, prospective observational study led by SCCM and Montefiore Medical Center aimed at better understanding variations in practice for the post-cardiac arrest patient. There is considerable debate among experts concerning many components of intra- and post-arrest care. This study aims to increase the evidence base of these components, particularly temperature control and neuroprognostication in post-arrest patients. In addition to providing insights regarding immediate and long-term post-arrest care, data collected will also be useful in studying variation in cardiopulmonary resuscitation practices.



### **PREDICT Delphi Trial**

**The PREDICT: Platform for Randomized Trials Evaluating Drugs for Inpatient Comparative Treatment study** is a Delphi process to select potential repurposed drugs for consideration in the PREDICT trial, a platform randomized adaptive trial for patients with sepsis that is being developed as part of a collaboration with the Critical Care Path Institute. It is designed to facilitate the use of automated extraction of clinical data from the electronic medical record (EMR) to inform observational research and interventional clinical trials. This process involves a diverse group of established and early-career investigators from high-, middle-, and low-resourced areas. In combination with parallel efforts to use clinical data taken from EMRs to inform the completion of case report forms and with the design of an adaptive platform trial infrastructure, a group of approximately 50 experts is being gathered to participate in the Delphi process to select the drugs that will initially be used to populate the platform trial.



### **SARI-PREP**

**The CDC Foundation funds the Severe Acute Respiratory Infection – Preparedness (SARI-PREP) consortium** led by SCCM member researchers at the University of Washington. Together with Emory University, SCCM functions as the data coordinating center. SARI-PREP is a multi-institutional collaborative network of acute care hospitals that rapidly enroll, sample, and follow patients admitted with severe COVID-19 and develops research protocols to rapidly determine demographic, clinical, host molecular, virologic, and institutional correlates of outcomes. The information gained from this consortium will help to quickly inform and improve clinical management of epidemic/pandemic patients with severe acute respiratory infection (SARI) COVID-19, thus fulfilling the mission of SCCM and Discovery to improve outcomes for critically ill and injured patients. The primary manuscript is currently being developed and is expected to be submitted to *Critical Care Medicine* or *Critical Care Explorations*.

ClinicalTrials.gov Identifier: NCT04323787



### **Assessment of Implementation in Sepsis and Respiratory Failure (AIMS)**

The goal of this **NHLBI \$3.5 million, five-year clinical trial, funded to Rhode Island Hospital, focused on emergency departments**, is to determine whether the sepsis Hour-1 Bundle or 3-Hour Bundle is most effective in reducing hospital mortality, length of mechanical ventilation, and length of hospital stay. The study compares both bundles head to head for the first time since they were released by the Surviving Sepsis Campaign. Discovery recruited 18 sites and their multiprofessional teams. Of the 18 sites, nine were randomized to the Hour-1 Bundle and nine to the 3-Hour Bundle. Year 1 (2022-2023) focused on recruitment, agreement execution, training, and baseline data collection. Year 2 comprises the implementation phase as sites participate in a 27-month, evidence-based, implementation science-driven learning collaborative. Discovery is serving as the data and clinical coordinating centers for the study.

## SCCM JOURNALS

SCCM's primary dissemination tools for research are its world-renowned journals, **Critical Care Medicine** and **Pediatric Critical Care Medicine** and the fully open-access journal **Critical Care Explorations**. These trusted journals have become a hub for late-breaking research and guidelines, achieving record-breaking submissions over the years. They remain among the most highly cited journals in the field.



	2022 Impact Factor	Acceptance Rate	Facebook Followers	X (Formerly Twitter) Followers
<i>Critical Care Medicine</i>	8.8	17%	@criticalcaremedicine 14,000	@CritCareMed 50,200
<i>Pediatric Critical Care Medicine</i>	4.1	20%	@PedCritCareMed 16,880	@PedCritCareMed 15,300
<i>Critical Care Explorations</i>	N/A	45%	@CritCareExplore 773	@CritCareExplore 8700

### Looking Ahead



**SCCM will announce a new strategy for its journals, focusing on ensuring the articles and research meet the needs of critical care professionals of the future.**



# ENVIRONMENTAL, SOCIAL, AND GOVERNANCE (ESG)

## Environmental Stewardship and Sustainable Operations

SCCM has made significant effort to minimize its ecological footprint. The recently remodeled headquarters in Mount Prospect, Illinois, is one example of this commitment. The building was remodeled to support team-focused activities, providing staff flexible schedules to work from home and reduce their carbon footprints. The building includes energy-efficient technologies, including LED lighting throughout. Single-use plastics or disposable plateware are not used.

SCCM has integrated ESG considerations into its vendor and contractual relationships. Convention centers and hotels hosting the Critical Care Congress and other in-person meetings are asked to include their social and environmental commitments in proposals, and SCCM considers this information in its proposal evaluation processes.



## Social Responsibility

SCCM remains deeply committed to social responsibility.

In 2023, The Society's Diversity, Equity, and Inclusion (DEI) Committee developed a lexicon to assist with engaging in meaningful dialogues and fostering a culture of respect and inclusion. By embracing these terms and definitions, SCCM can contribute to creating a more equitable and just healthcare environment for both patients and clinicians.

SCCM also developed an online training program addressing implicit bias. The training will be mandatory for SCCM volunteers. Diversity considerations have been incorporated into the strategic planning process and formalized for committee appointments.

The Immigrant Critical Care Professionals (ICCP) Mentoring Program Task Force has been formed to develop and implement a mentorship pilot program for leadership building for ICCPs, to encourage their professional development and inclusion within both the Society and the broader external healthcare community.

SCCM continues to vigorously pursue DEI initiatives within the Society and to take steps toward a more inclusive workforce in critical care.

## Governance and Ethics

Maintaining high standards of governance and ethics is paramount to SCCM's mission. SCCM updated and made more transparent its Standards of Professional Conduct to include specific statements related to DEI initiatives. It also clarified how SCCM manages professional misconduct allegations. [Learn more here.](#)

# DONORS

## THANK YOU TO DONORS WHO SUPPORT SCCM'S MISSION

SCCM's giving clubs recognize generous donors whose cumulative gift in one calendar year (January 1 through December 31) equals one of the donor levels. Giving club members play a critical role in helping to advance SCCM's mission by making generous gifts that help expand its ability to impact the critical care community and to improve the care of critically ill and injured patients around the world.

### Legacy Circle Members **\$500-\$1,970**

Abbas Khider Ali, MD, FCCM  
Harry Linne Anderson III, BS, MD, FCCM  
Sarah E. Bain, MD  
Benevity  
Anna Budde  
Carolinas/Virginias Chapter of SCCM  
Katherine Cashen, DO  
Cherylee W.J. Chang, MD, FNCS, FACP, FCCM  
Mark D. Cipolle, MD, PhD, FCCM  
Craig M. Coopersmith, MD, FACS, MCCM  
Jose L. Diaz-Gomez, MD, FCCM  
Nicholas A. Ettinger, MD, PhD, FAAP  
Maria A. Enrione, MD, MEd  
Laura E. Evans, MD, MS, MSc, FCCM  
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Karen Harrington, MD  
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Christina Koutsari

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Pauline K. Park, MD, FCCM  
Margaret M. Parker, MD, MCCM  
Joseph E. Parrillo, MD, MCCM  
Jose L. Pascual, MD, PhD, FACS, FCCM  
Bruce M. Potenza, MD, MPH, MD/MPH  
Mary J. Reed, MD, FCCM  
Gloria M. Rodriguez-Vega, MD, MCCM  
Benjamin Schultze, PhD,  
Billie L. Short, MD  
Lori A. Shutter, MD, FCCM  
Daniel Skully, BA, MD  
Philip C. Slocum, DO, FCCM  
Marie E. Steiner, MD, MS  
Samuel A. Tisherman, MD, FCCM  
Sara White

### 1971 Club Members **\$1,971-\$4,999**

Philip S. Barie, MBA, MD, MCCM  
Judith Jacobi, PharmD, BCCCP, MCCM  
Keith Killu, MD, FCCM  
Jong O. Lee, MD, FACS, FCCM  
David J. Martin, CAE  
Sophia Socaris, MD, FCCM  
Southeast Chapter of SCCM

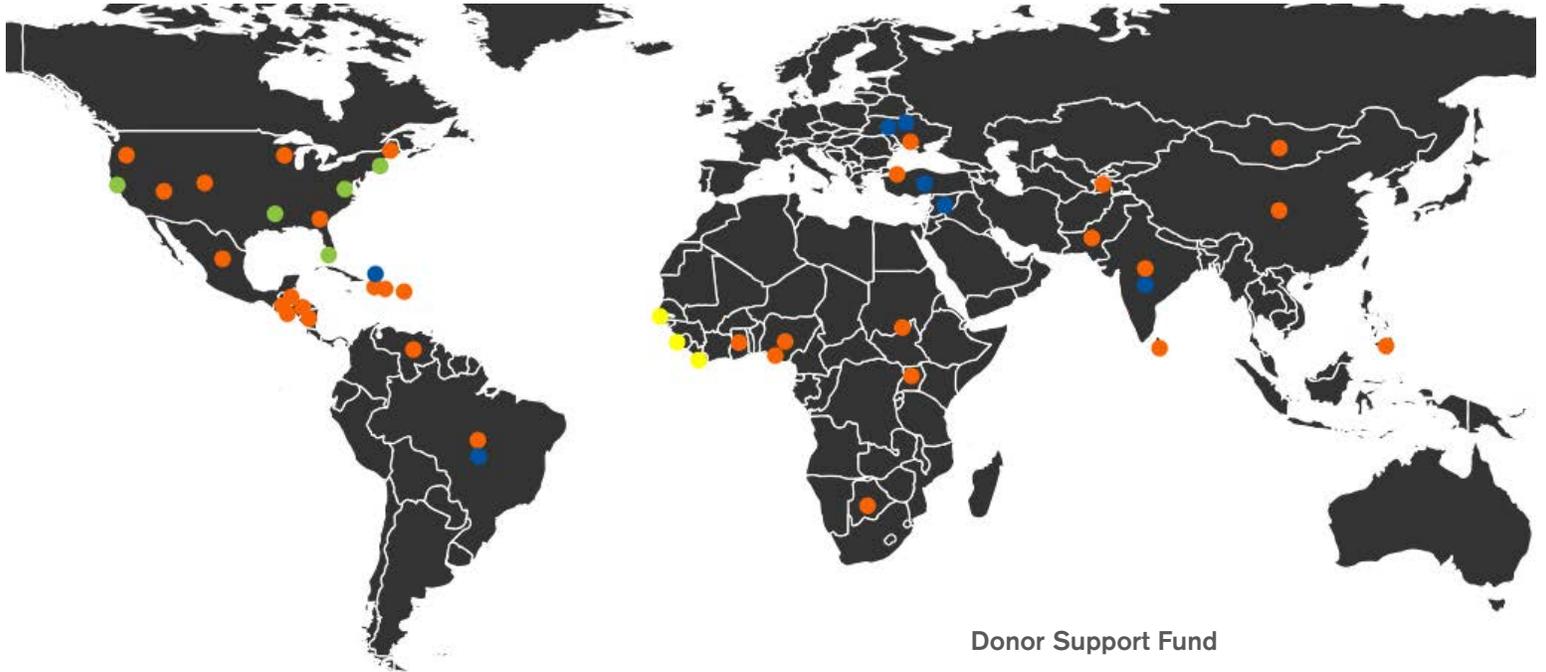
### Presidents Club Members **\$5,000 +**

Direct Relief  
Weil Family Foundation  
Jerry J. Zimmerman, MD, PhD, MCCM

## YOUR DONATIONS IN ACTION

Learn more about how donations to SCCM are used to improve the care of critically ill and injured patients.

Visit [sccm.org/donate](https://sccm.org/donate)



### Donor Support Fund

- Training and Education
- Disaster Relief
- Research
- Humanitarian



SCCM is committed to improving care for patients worldwide.  
With your support, the Society is making an impact worldwide.



# FINANCIALS

SCCM experienced a small net loss from programs of \$380,000, but robust investment gains and grant revenue pushed up the total organizational net revenue for the year to \$5.2M. This increased organizational net assets to a record \$53.3M. This result was driven by strong support from government, private foundations, and industry for the Society's Global Health initiatives.

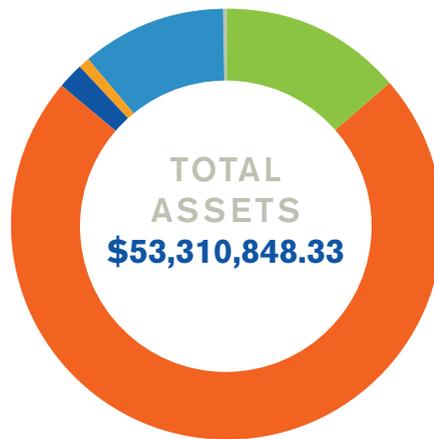
SCCM volunteers traveled across the globe training clinicians in low-resourced areas, war zones, and locations devastated by natural disasters. Since its inception in 1972, SCCM has grown both programmatically and financially. The SCCM Council and staff leadership employ a conservative financial approach, putting aside resources into several funds to support new program development and provide for emergency reserves should the need arise. Reserve funds were at \$32.9M at the end of FY2023.

The SCCM Council will continue to invest in many new endeavors including technology platform upgrades, research program expansion, implementation of new diversity, equity and inclusion initiatives, and Global Health initiatives.

Audited financial statements are available for public inspection by contacting SCCM's Chief Financial Officer at [bschramm@sccm.org](mailto:bschramm@sccm.org) or +1 847 827-6869.



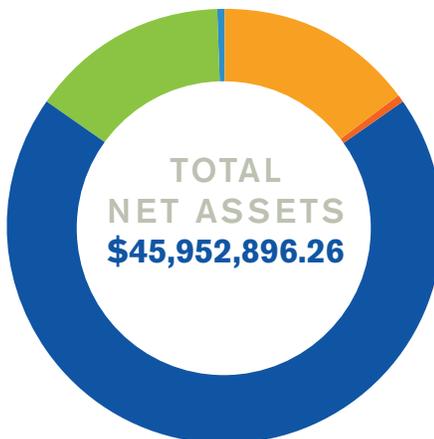
	Actual
<b>Knowledge and Skills</b>	
Revenue	\$ 6,669,805
Expense	4,684,455
Net Income (Loss)	1,985,350
<b>Membership</b>	
Revenue	\$ 5,430,935
Expense	1,797,736
Net Income (Loss)	3,633,199
<b>Research</b>	
Revenue	\$ 4,329,855
Expense	1,706,337
Net Income (Loss)	2,623,518
<b>Fundamentals</b>	
Revenue	\$ 1,536,195
Expense	174,864
Net Income (Loss)	1,361,331
<b>Review and Assessment</b>	
Revenue	\$ 1,763,287
Expense	299,045
Net Income (Loss)	1,464,242
<b>Quality and Safety</b>	
Revenue	\$ 207,214
Expense	191,437
Net Income (Loss)	15,777
<b>Communications</b>	
Revenue	\$ 558,518
Expense	326,651
Net Income (Loss)	231,867
<b>Governance/Organizational Affairs</b>	
Revenue	\$ 7,761,529
Expense	6,151,407
Net Income (Loss)	1,610,122
<b>General &amp; Administrative</b>	
Revenue	\$ 90,780
Expense	14,116,344
Net Income (Loss)	(14,025,563)
<b>General Operating Total</b>	
Total Revenue	\$ 28,348,118
Total Expense	29,448,276
Transfers for New Programs	719,080
Net Income (Loss)	(381,079)



- Cash and Equivalents  
**\$7,363,339.54**
- Investments  
**\$38,570,209.28**
- Accounts Receivable  
**\$1,050,188.91**
- Prepaid Expenses  
**\$491,015.20**
- Fixed Assets  
(Net of Depreciation)  
**\$5,725,867.28**
- Deposits  
**\$110,228.12**



- Accounts Payable  
**\$1,003,492.57**
- Accrued Expenses  
**\$1,769,894.39**
- Deferred Income  
**\$3,794,291.31**
- Deferred Compensation  
**\$790,273.80**



- General Operating Fund  
**\$6,943,167.08**
- Subsidiaries  
**(\$263,846.94)**
- Reserve Funds  
**\$32,200,733.80**
- Miscellaneous  
Temporarily Restricted  
**\$6,845,747.49**
- Sections  
**\$227,094.83**

Society of  
Critical Care Medicine



The Intensive Care Professionals



Learn more at [sccm.org](http://sccm.org)