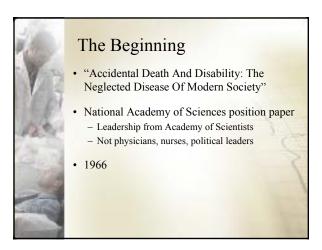


Outcomes At the end of this lecture at the learner will be able to: Describe some of the major historical events in the evolution of EMS Discuss the role played by standard setting agencies such as National Registry, Joint Review Committee of Accreditation, and NAEMT Discuss the role of research in EMS And become familiar with several professional journals.

Early Emergency Care • Mesopotamia (SW Asia; 3000 BC) • Artifacts showing that these early civilizations had: - Medical records - Protocols of treatment - Head to toe evaluation (pt. history) - Natural history or expected outcome (prognosis) - Necessary equipment itemization

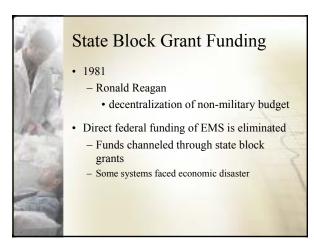
Early Emergency Care • French / Napoleonic wars - Trauma surgeon, Larrey: • "Flying Ambulance" triage • U.S. - Clara Barton • Removal of the severely injured from battlefield to a makeshift hospital - Cincinnati Ohio (1865) • First non-combat ambulance service in U.S.

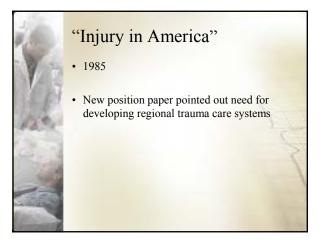
20th Century Emergency Care • In field trauma, triage and treatment continued to evolve - World Wars I and II - Korean and Vietnam wars • In field non-trauma, triage and treatment began to evolve in the early '70s - Several U.S. cities - Ireland - Israel



The National Academy's Position • Identified deficiencies in pre-hospital emergency care • Guidelines for development of EMS System • Guidelines for training of pre-hospital health care providers • Proposed standards for pre-hospital equipment

Initiatives • Transportation and Safety Act of 1966 – along with other private initiatives • The first Transportation and Safety Act establishing this part of the DOT • Forced states to develop EMS systems • DOT • Published the first EMT curriculum in 1969 • Then later published the first EMT-paramedic curriculum in 1977 • The National Registry of EMTs • Founded in 1970, before the first paramedic curriculum !!





National Quality Assurance

1988, ACEP recommends:

- · Standard ALS equipment
- Establishing EMS technical assistance programs
- Including quality improvement systems
- Medical direction of all aspects of patient care rendered by non-physician providers
- All pre-hospital providers now function as designated agents regardless of employer

National Quality Assurance · 1998, DOT publishes new, revised EMTparamedic curriculum (NSC) Standard setting for education organizations JRC-CAHEA, now called JRC for educational programs AMA committee - Providing accreditation services for paramedic educational programs

- Only national quality assurance system for educational outcomes
- Competency-based, criterion-based

National Professional Organizations NAEMT (National Association of Emergency Medical Technicians) - Committed to improving EMS education - Still only a few thousand dues-paying members (why?)

National Registry • Standardized national tests: basic, intermediate, paramedic • Establishes national minimum standard of competency • Major tool for professional lateral transfer and reciprocity • In 2003, the only eight states do not recognize the National Registry Paramedic • Statistically more valid than small test pool (small test pool = small denominator) • Tax savings to states which adopt the National Registry



Research Project Components Identify the problem, reason for the study, question to be examined Formulate a hypothesis Literature search Design the study—outline previous methods, patient-consent issues, review process Perform steady/collect data Analyze data out/statistical correlation Evaluate results against the original question Write the study for publication

