ROLE OF THE STATE EMS MEDICAL DIRECTOR

A joint statement by the American College of Emergency Physicians (ACEP), the National Association of EMS Physicians (NAEMSP), and the National Association of State EMS Officials (NASEMSO)

Physician oversight of emergency medical services (EMS) by a dedicated and qualified medical director is critical to the successful delivery of quality out-of-hospital patient care at all jurisdictional levels. It is essential that the lead agency for EMS within each of the fifty states, the District of Columbia, Puerto Rico, the territories of Guam, the Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands, has a state EMS medical director.

The state EMS medical director provides specialized medical oversight in the development and administration of the EMS system and is an essential liaison with local EMS agencies, hospitals, state and national professional organizations, and state and federal partners. The state EMS medical director provides essential physician leadership for key aspects of the state EMS system including: system oversight, coordination of guideline development, planning for EMS care in austere environments and during disasters and mass casualty incidents, identification and implementation of best practices, system quality improvement, patient safety, education, and research. Furthermore, the state EMS medical director is vital to the EMS system at the local level by promoting integration of direct and indirect physician oversight for the comprehensive emergency health care delivery system.

The state EMS medical director should be a physician with extensive experience in EMS medical direction and an unrestricted medical license within the state. Ideally, the state EMS medical director will be a physician who is board-certified in emergency medicine or in the subspecialty of EMS, by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine.

The state EMS medical director requires political, administrative, and financial support to successfully function in this role. The foundation of the relationship between the state’s lead agency for EMS and the state EMS medical director should be clearly defined within legislation, regulation, or a written contract, including language defining the job description,
responsibilities and authority. The state EMS medical director should be provided with mutually agreed upon compensation for services, necessary materials and resources, administrative support, and liability protection specific to the unique duties and actions performed.

In summary, ACEP, NAEMSP, and NASEMSO strongly encourage the establishment of a permanent, compensated position for a state EMS medical director in all fifty states, the District of Columbia, Puerto Rico, the territories of Guam, the Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands.