ADVANCING EMERGENCY CARE \_\_\_\_\_\_\_

## Approved March 2024

## Disaster Medical Services

Reaffirmed March 2024

Revised June 2018

Reaffirmed April 2012, October 2006

Revised June 2000

Reaffirmed March 1997

Originally approved June 1985

The American College of Emergency Physicians (ACEP) believes that emergency physicians should assume a primary role in disaster preparedness and response, throughout all phases of the disaster life cycle. The provision of effective disaster medical services requires prior training or experience, which is a component of emergency medicine residency training. Additionally, emergency physicians should be encouraged to pursue continued training enabling them to best fulfill this responsibility.

A medical disaster occurs when the destructive effects of natural or man-made forces overwhelm the ability of a given area or community to meet the demand for health care. Where local, regional, and national disaster networks exist, emergency physicians should participate in strengthening them. Where they are not yet functional, emergency physicians should assist in planning and implementing them.

Disaster preparedness and response is a multidisciplinary activity that requires cooperation and frequent training exercises. Each agency or individual contributes unique capabilities, perspectives, and experiences that complement one another. Within this context, emergency physicians contribute both medical and operational expertise and share the responsibility for ensuring an effective and well-integrated disaster response.

Disaster medical services and emergency medical services share the goal of optimal acute health care; however, in achieving that goal, the two systems may use different approaches. The medical control of emergency medical services lies within the domain of emergency medicine. During a disaster, it remains the responsibility of emergency physicians to continue their regular responsibilities, in addition to disaster medical service-related roles.

The advancement of disaster medicine requires the integration of data from research and experience. Emergency physicians must use their skills in research, education, and organization to incorporate and disseminate these improvements as new concepts and technologies emerge.