WILDERNESS INSTRUCTOR

An Introduction to *Wilderness Emergency Medical Services Medical Director Course*

Steve Donelan

“EMS medical direction involves granting authorities to act and accepting responsibility for the delivery of EMS patient care.”¹ In urban emergency medical services (EMS) systems, the medical director (who is usually certified in emergency medicine) grants authority to Emergency Medical Technicians (EMTs) and paramedics to perform specific procedures by standing orders or live communication. Although they should not need direction for basic procedures like bandaging and splinting, medical direction may be needed for administering drugs or interpreting data from an electrocardiograph (ECG), especially if that data can be transmitted to the medical director through an Internet connection.

The authors of the following article quote a statement from the National Association of EMS Physicians and officials that all wilderness EMS programs should have qualified medical directors. Regulations vary from state to state, but generally only agencies whose scope of practice is EMT or higher are required to have physician medical directors. Search and Rescue (SAR) teams usually limit their scope of practice to the Emergency Medical Responder (EMR) level, although some members may have higher certifications. The National Ski Patrol’s Outdoor Emergency Care (OEC) curriculum lacks a few classroom hours in some topics to meet national requirements for EMT, so it is classified as more than equivalent to EMR, although OEC training goes beyond EMT in other areas.²

Some ski patrols (such as the Wachusett Mountain Patrol in Massachusetts) have physicians as members who volunteer to act as medical directors. But most SAR

teams and National Ski Patrol responders are volunteers, so it is very unlikely that they could afford to pay physicians to act as medical directors. SAR teams do, however, have medical team leaders who have higher levels of certification than EMR, and conduct practical training to maintain and improve the skills of team members, especially realistic outdoor scenarios.

For decades, wilderness medicine experts have been teaching people to do procedures that are beyond the scope of practice of EMTs and paramedics in urban EMS systems, because rapid transport to a hospital is seldom possible in wilderness emergencies. But members of wilderness EMS programs are limited by their scope of practice, and cannot use skills that go beyond it when they are part of an official response. If wilderness medical experts are trained to become emergency medical directors of such organizations, however, it will be interesting to see whether that expands their scope of practice to include some of the potentially life-saving techniques that are taught in wilderness first responder and wilderness EMT courses.

References

1. US Dept of Homeland Security, FEMA. *Handbook for EMS Medical Directors*. March 2012.
2. Constance BB, Auerbach PS, Johe DH. Prehospital medical care and the National Ski Patrol: how does outdoor emergency care compare to traditional EMS training? *Wilderness Environ Med*. 2012;23: 177–189.