
Editorial

The Academic and Clinical Sophistication of EMS

This issue of the *Journal*, making its national debut as the *Journal of Prehospital Medicine* from its former regional status as the *Tampa Bay EMS Journal*, marks the end of one experiment and the start of another.

Our purpose in publishing the *Journal* and creating the Acute Care Foundation has been to bring academics into the everyday practice of prehospital EMS. It bothers us that there are so few field personnel or medical directors that are active in research. It bothers us that so few are even exposed to publications that contain what little research there is that is germane to EMS. It bothers us that there are so few opportunities for professional growth for field personnel, particularly if they wish to stay in patient contact. It bothers us that one can become a paramedic and still be unable to write a reasonable sentence with reasonable spelling. It bothers us that when we think about paramedics as professionals, despite the semantics of what is and is not a "profession," we see dominant vocational attributes in field personnel (1). It bothers us that paramedic textbooks are not written by paramedics, even as contributing authors. It bothers us that there are so few academic role models for paramedics. It bothers us that there are so few EMS degree programs, even fewer at a post-graduate level - and those are focused only on administration.

It encourages us to find that there are more people out there than what we might have suspected who share these frustrations. This has encouraged us to continue to invest our time and energy into the Foundation and *Journal* to find more who share these views and will join in an effort to fuel a real academic movement in prehospital EMS.

Our first year of publishing a refereed journal was an experiment to see how many people would salute if we ran an academic style EMS journal up the flagpole. After a year, we have grown from a primary distribution in five central Florida counties to a small but nationwide circulation, spurred on by the incredible calibre of people we see saluting.

I would like to take this opportunity to thank those of you who took the time to let us know what you thought of the publication - the good and especially the bad. It gave extremely valuable feedback for our editorial decisions on the directions that this publication and the Foundation will take in the future. Thank you for all your support and encouragement.

Not much has really changed in this past year in EMS - there is much that still bothers us about how EMS is evolving. However, we hope that in some small way we can affect its course toward academic and clinical sophistication. To that end, we hope to engage in a number of other complementary and collaborative programs.

There is tremendous potential for collaboration between EMS agencies, hospital education departments, community colleges, universities and their medical schools in production of educational television program segments for a nationwide Emergency Medical Television® network. Distribution and broadcast may be facilitated through public/educational access cable TV channels, microwave and satellite transmitters and direct distribution of videotapes. Every EMS agency should have access to high quality continuing education programming. Funding may be possible through a combination of vendor sponsorships, grants and donated services and resources.

Research is extremely important to the growth of medical professionals. We would like to start a prehospital EMS research fund with competitive grant awards. To encourage development of field clinicians as researchers, special consideration may be given to paramedics and EMT's serving as principal investigators. As an added incentive, an annual prize for original EMS research should be established with consideration of categories at the doctoral, resident, paramedic, and EMT levels.

We would like to participate in, or create, a nationwide computer bulletin board system. We would use it for electronic distribution of the *Journal*, use of message strings regarding *Journal* papers as part of the correspondence section in print, conduct of on-line medical symposia, and as a vehicle for our entire editorial review and production process.

A major academic resource for EMS is missing, or maybe we just don't know about it. We would like to establish, or find and support, a national EMS library. This might be in the form of a special collection at a major medical school library. This will involve soliciting donations of materials to form a complete collection of past periodicals and texts relating to EMS. Complementary to this and the computer bulletin board system should be a complete data base catalog of the collection to facilitate on-line literature searches, requests for reprints, etc. Donation of future periodicals and texts should be provided by voluntary cooperation of the publishers.

There are many more projects we have envisioned for the Acute Care Foundation and the *Journal*. They can become a reality with your participation and support. We would like to do so in collaboration with other medical organizations. Reinvention of the wheel is a waste of time and resources. If you, as an individual or in representation of a group, are interested in such collaboration, please contact us. We are ready to work toward mutual goals of academic and clinical sophistication in EMS. Our new experiment is to see if these efforts can have any significant impact on the way in which the people in EMS conduct themselves - as technicians or academically oriented technologists.

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Editor

References

1. Gunderson M: Editorial: Professional or Vocational Career Development. *Tampa Bay EMS Journal* 1(2):51, 1987.