

EMT-Paramedic Defined

The medical profession and the government, despite their apparent differences on many fronts, have long shared certain commonalities: 1) the desire to place things within an organized framework, with an appropriate niche for each; 2) the use of acronyms as descriptive terms for those things which have been so categorized; and 3) the ability to arrive at a standard nomenclature and categorization only after long periods of discussion, confusion, and disagreement among the participants.

With the keen interest displayed by both the medical profession and the government in the development of emergency medical services, it has come as no surprise that: 1) an effort at providing an organized framework for the categorization of EMS personnel has been made; 2) appropriate acronyms have been developed for these personnel; and 3) there has been a tremendous amount of confusion, discussion, and disagreement among and between the two disciplines with respect to the standardization of designated titles for emergency medical services field personnel.

A few years ago, emergency medical technicians (EMTs) were designated by a Roman numeral according to their level of training: EMT-I, EMT-II, EMT-III, although there was some variation from locale to locale as to what each designation entailed in terms of training and capability. We were then advised that EMT-I and EMT-II were passe, and that henceforth EMT-Basic would be the new designation. However, there was also a special designation for those EMTs who had some sort of special qualifications in terms of common carriers, and thus the term EMT-Ambulance (EMT-A) came about. In addition, EMTs with advanced training could be designated EMT-Paramedic (EMT-P or, simply, Paramedic). Finally, some groups

of individuals appeared with less training than EMT-Ps, but with more training than EMT-As or EMT-Bs (EMT-Basics), who were referred to variously as Intermediate Emergency Medical Technicians (IEMTs) or with subletters denoting specific specialty training: EMT-Cardiac (EMT-C), EMT-Trauma (EMT-T), and so on.

The scene has been, to this point at least, one of the confusion and disagreement mentioned previously. As a means of bringing some order to the situation many groups, including the National Association of Emergency Medical Technicians (acronymously, NAEMT), have long encouraged the adoption of a standard nomenclature for emergency medical technicians.

As a step toward that goal, the ACEP Board of Directors has adopted the position that the term Emergency Medical Technician-Paramedic (EMT-P, or Paramedic) should be used only by those individuals who have successfully completed a paramedic training program based on the Department of Transportation standard. Such a position should be adopted as well by EMS systems, departments of health services, and all other organizations concerned with the delivery of prehospital care. A nationwide effort would provide at least one important group of prehospital personnel with a clearly defined basis for their acronym, and would no doubt provide the impetus for a standardized, national system for designation of prehospital EMS providers.

ACEP joins NAEMT in adopting the definition of EMT-P and urges that the acronym be used as standard nomenclature.

Michael Vance, MD
Member, ACEP EMS Committee