

**Emergency Medical Services Advisory Council (IAC 147A)**

**Date:** November 6, 2006

**To:** Legislative Interim Emergency Services Committee:  
Honorable: Senator Tom Hancock (D), Senator Pat Ward (R), Representative Linda Upmeyer (R),  
Senator Jeff Danielson (D), Senator David Mulder (R), Representative Geri Huser (D),  
Representative Roger Thomas (D), Representative David Tjepkes (R), and Representative Philip  
Wise (D).

**From:** Jeff Messerole, PS  
Chair, Emergency Medical Services Advisory Council

**Re:** State EMS Medical Director

Dear Honorable Elected Officials,

On October 18<sup>th</sup>, 2006, the Emergency Medical Services Advisory Council (EMSAC) met and discussed the need for the Iowa Department of Public Health to have a clinically active full-time physician, boarded in emergency medicine, as the medical director for Iowa's statewide Emergency Medical Services (EMS) system. EMS in Iowa operates under the license of a physician medical director. Most service medical directors are volunteers. Currently, to meet the need of the state, the Bureau of EMS is using the volunteer services of EMSAC physician representatives for medical direction.

Health care changes dramatically, and EMS is faced with an equally dramatic growth as part of that healthcare for all Iowan's. Volunteerism can no longer sustain the growing duties required of a state EMS medical director. Patient care and EMS standards have reached new levels due to rapidly expansive technology and an increase in national standards for training and certification of providers. This technologic expansion, prior to widespread adoption by EMS systems and medical directors, require medical oversight, scientific evaluation and policy development by a qualified full time state EMS medical director. Collaborative EMS system development is essential for the future survival of EMS, especially in rural areas. A state medical director could work closely with service medical directors to ensure systems development and standards that meet the needs of all Iowan's regardless of location. The state medical director is charged with an analysis of required ambulance service data, provided to the Bureau, to support efficient system designs and improve timely access to care for life-threatening injury and illness. Such endeavors have a great potential to reduce suffering, disability, death, and costs; all of which, require medical director oversight.

The need for state physician involvement to promote and achieve the goals set forth in *Iowa's EMS Agenda for the Future* is critical to the future success of EMS in Iowa. Recently, the 2006 Institute of Medicine (IOM) report: *Emergency Medical Services at the Crossroads* validates this need. In order to promote the highest quality EMS care for Iowan's, the EMS Advisory Council requests your consideration to fund such a full-time statewide EMS Medical Director. Thank you for your concern and time in improving Emergency Medical Services for all Iowan's.

Sincerely,



Jeffrey J. Messerole, PS  
Chair - EMSAC

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**Cc: EMS Advisory Council Membership:**  
Janis Adams, RN, CCRN, PS – Waukee  
Azeemuddin Ahmed, MD – Iowa City  
Tina M. Brightwell, PA-C – Indianola  
Gary Brown – Climbing Hill  
Suzan Brunes, RN, BSN – Belmont  
Donas Charbonneau – Logan  
Jeff Dumermuth – West Des Moines

Carlos Falcon, M.D. – Keokuk  
Matt Gritters, M.D. – Pella  
Julie Lang-Gesie, EMT-I – Waterloo  
Amy Kumagai, D.O. – Ankeny  
Mark McCurdy – Russell  
Dan Neenan – Epworth  
Christopher Russi, M.D. – Iowa City

Kirk Schmitt, Chief, Bureau of EMS