



# FICEMS

Federal Interagency Committee on EMS

March 17, 2010

The Honorable Deborah A. P. Hersman  
Chairman  
National Transportation Safety Board  
490 L'Enfant Plaza SW  
Washington, DC 20594

In reference to: A-09-102 and A-09-103

*Debra*  
Dear Chairman Hersman:

The Federal Interagency Committee on Emergency Medical Services (FICEMS) understands the long-standing importance of medical helicopters in responding to motor vehicles crashes and other medical emergencies. We also appreciate the National Transportation Safety Board's significant commitment to improving the safety of helicopter emergency medical services (HEMS) as evidenced by your four day hearing in February 2009 and by your thoughtful recommendations.

Because FICEMS has consistently emphasized the importance of medical oversight of Emergency Medical Services (EMS), your HEMS recommendations to FICEMS were referred to our Medical Oversight Subcommittee. The FICEMS deliberated the subcommittee recommendations at our January 20<sup>th</sup> meeting.

We are pleased to provide the enclosed FICEMS-approved strategies for addressing the two NTSB recommendations (A-09-102 and A-09-103). Both the development and implementation of these plans reflect our significant interagency commitment and collaboration. We request that both recommendations receive an "Open-Acceptable Action" status.

We will provide periodic project updates to the NTSB. If you have any questions concerning these FICEMS reports, please contact Drew Dawson at the NHTSA Office of EMS which provides administrative support to FICEMS. Drew can be reached at 202 366-9966 or by e-mail at [drew.dawson@dot.gov](mailto:drew.dawson@dot.gov).

Sincerely yours,

David L. Strickland  
Chair, Federal Interagency Committee on Emergency Medical Services  
Administrator  
National Highway Traffic Safety Administration

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Secretary of Defense for  
Health Affairs

**Department of  
Homeland Security**

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**Federal Interagency Committee on EMS (FICEMS) RESPONSE TO  
NTSB RECOMMENDATIONS A-09-102 & A-09-103**

**Develop national guidelines for the use and availability of helicopter emergency medical transport by regional, state, and local authorities during emergency medical response system planning. (A-09-102)**

**Develop national guidelines for the selection of appropriate emergency transportation modes for urgent care. (A-09-103)**

Background

The decision whether to use a ground or air ambulance for the transport of an ill or injured patient must simultaneously weigh such issues as the scientific evidence for the clinical efficacy of the transport mode, the distance and terrain over which the patient must be transported, EMS system resource needs and local weather conditions. In order to develop national guidelines for selecting appropriate modes of emergency transport, it is necessary to first gain a clear understanding of the relative clinical benefits of ground versus aeromedical transport.

Overview of Proposed Strategy

The Federal Interagency Committee on Emergency Medical Services (FICEMS) proposes to develop national guidelines for the emergent transport of traumatically injured patients from the scene of injury as the first step in establishing broader national guidelines that will eventually include recommendations for the transport of patients with medical emergencies and for inter-facility transports. As a first step, FICEMS proposes to develop and implement evidence-based clinical guidelines for the helicopter transport of injured patients at the State level. By initially focusing on trauma, FICEMS will develop guidelines to cover a significant subset segment of the patients potentially requiring air ambulance and will gain important information about any barriers that may exist to the implementation of emergency transport guidelines at the State level. Once the evidence-based guidelines for helicopter transport of injured patients have been developed, input will be solicited from national stakeholder organizations, administrators from rural and urban EMS systems, field providers and from patient care representatives to develop national guidelines for the use of helicopters by regional, state and local EMS agencies. These efforts will be funded through an FY09 cooperative agreement between National Highway Traffic Safety Administration (NHTSA) and Children's National Medical Center and through an inter-agency agreement between the Centers for Disease Control and Prevention (CDC) planned for FY10.

## Specifics of Proposed Strategy

1. Evidence-based clinical guidelines for the helicopter transport of injured patients will be developed by a multidisciplinary advisory panel through a cooperative agreement with Children's National Medical Center (CNMC). The project, funded by NHTSA, was awarded to CNMC in response to a competitive FY09 RFA to pilot test the National Evidence-based Guideline Model Process. The guidelines, which will cover adults and children, are expected to be completed by the summer of 2010.
2. An inter-agency agreement between the Centers for Disease Control and Prevention (CDC) and NHTSA will be signed in FY10 to develop national mode of transport guidelines. This effort will build upon the CDC's successful efforts to revise and implement the Field Trauma Triage Decision Scheme, utilizing many of the same expert panelists, augmented with representatives from the HEMS stakeholder community. Using the evidence-based guidelines developed by the CNMC project, this panel will develop and vet proposed national guidelines for the selection of appropriate mode of emergency transportation for urgent care in fulfillment of the NTSB recommendation A-09-103.
3. Using the evidence-based guidelines developed in the first phase of their project, the CNMC investigators will also develop, implement and evaluate a helicopter transport protocol for the State of Maryland. The final report for the study will be submitted in September 2011.
4. The second phase of the CDC-NHTSA inter-agency agreement will develop national planning guidelines for the use and availability of helicopter transport of injured patients by regional, state, and local EMS agencies. This effort will be informed, in part, by the results of the CNMC evidence-based clinical guidelines and draft Maryland State protocol, as well as by input from national HEMS stakeholder organizations in order to develop guidelines for issues including public safety answering point coordination/dispatch of HEMS, coordination with emergency response organizations, regional EMS system coordination and transport across State lines.
5. While the national planning guidelines for trauma transport are being developed, FICEMS will explore funding mechanisms to adapt the emergency planning transport guidelines and related protocols to other medical emergencies.
6. It is the intent of FICEMS to provide the NTSB with periodic written updates on the emergency transport guidelines development process.

Approved by FICEMS January 20, 2010, as amended.