EMERGENCY MEDICAL SERVICES IN METROPOLITAN AREAS:
A Bibliography

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INTRODUCTION

"Emergency Medical Services in Metropolitan Areas" is a study devoted to the planning of emergency medical services. Emergency services are defined as those services needed to treat the true emergency patient. Basic services are found to be communications, initial medical care, transportation, and definitive medical care.

The purpose of the study is to present a process of planning necessary to develop an emergency services plan for a metropolitan area. Initiators of planning and the organizations they work through are explored as the first step in the planning process. This is followed by the actual determination of the need for services on a metropolitan scale. The next step in the planning process is an evaluation of existing services to determine what needs are not being met. This is followed by a consideration of the alternative uses of resources to meet needs. Finally, an operating agency must be selected to carry out and coordinate services. This process of planning is the basis for the formulation of the plan.
The delivery of emergency services should be based on the plan formulated. The plan suggested in this study includes a medical services plan, an ambulance services plan, and an implementation plan. The implementation plan is first in importance as it is the action plan to get results from the planning undertaken. The medical services plan and the ambulance services plan are set forth separately due to the likely continuation of private and public services in a metropolitan setting. These two plans can be termed the program plans.

SUMMARY

This thesis deals with the delivery of emergency medical services on a metropolitan basis. The delivery of emergency care continues to be carried out at the community level as a subcomponent of the larger system of primary health care. The delivery of all health services is important today because of the belief that the quality of life must be improved. Some proponents, speaking on behalf of the people, contend that health care is a right, to be extended to all citizens. Evidence exists that people are exerting the right to health care because hospital emergency facilities are having difficulty managing the heavy caseload of people not able to locate or afford a family doctor. As a result of this patient influx, the purpose and scope of emergency facilities and services appears lost in the delivery of overall health services.
A definition of emergency services is needed to delineate the scope of this thesis. Emergency services are those services required when a true emergency exists. A true emergency can arise from cardiac arrest, automobile crash injuries, drownings, poisonings, drug overdoses, asphyxiations, and various environmental hazards. By definition, overall emergency health services programs serve three kinds of victims: the true emergency, the ambulatory nonemergent patient, and the disaster victim. Building a capability to treat the true emergency can be viewed as an initial effort to make "paper" disaster plans workable.

This thesis is limited to the true emergency victim who must be medically treated promptly, remote from the hospital emergency facility, and safely transported to the care of a physician. Also, the victim may need to be physically rescued before he is medically rescued. This thesis is not limited to ambulance rescue but includes the substantive element of emergency services; the hospital emergency facilities to handle the true emergency. This thesis assumes that of all the problems that impact on health within the community, the problems involved in providing emergency services have been recognized, defined, and assigned a health priority according to community need.
Purpose

The purpose of the thesis is to present a process of planning necessary to develop an emergency services plan for a metropolitan area. The approach is metropolitan because areawide planning facilitates the planning of both medical and transportation activities together. Not planning these two activities together has been the shortcoming of local planning approaches. It is assumed that metropolitan planning of emergency services can be more effective than local planning even though most planning is carried out locally within metropolitan areas.

The process of planning must logically lead to the development of a metropolitan plan to guide local and metropolitan policy makers. The plan should consist of the preferred alternatives for the metropolitan area. It is assumed that the plan should be in accord with any existing State plan.

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