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PROFESSIONAL MEDICAL SOCIETIES:

THE BENEFITS OF MEMBERSHIPS FOR THE TACTICAL MEDIC

BY BRENDAN BYRNE, KEEGAN BRADLEY, TAYLOR GEORGE AND KATE ZIMMERMAN

Injuries and illnesses have plagued humanity for the duration of recorded history. As long as there has been strife, be it military or civilian, there has been a need for those who can triage, treat, evacuate and manage casualties and who can do so under direct threat.

Today, this has developed into the field of Tactical Emergency Medical Services (TEMS). A myriad of advances in medicine have grown out of the practice of medicine in conflicts, from point-of-injury to the most technologically advanced care. Within the Department of Defense (DOD), both the Special Operations Forces (SOF) community and the military in general realized that training, plans and execution were enhanced when tactical commanders and medical personnel function in concert to achieve mission objectives. Medical contingencies occur, and this must be recognized in every facet of planning and operations, leading to a higher chance of mission success and lower overall risk. We believe that that lesson applies to EMS activities across the military and civilian enterprises, and certainly to TEMS.

Despite this storied past and its many contributions to medicine, TEMS remains poorly understood by both the supported tactical units as well as the rest of the “House of Medicine” and is still very much considered a “niche” or “hobby.” TEMS has developed rapidly in the latter half of the 20th and into the 21st centuries due to better codification and retention of lessons learned from conflicts, supported by the well-defined roles and TTPs (tactics, techniques and procedures) of U.S. and partner forces.

Today, TEMS is well-recognized in law enforcement, with the NTOA publishing their initial position statement in 1994,¹ but the administration and employment vary widely between health care systems, law enforcement, fire and third service agencies. In high-profile incidents, first responders work together across departments and job fields. Many law enforcement entities are beginning to recognize the value a good TEMS program brings, not only to their department but to their communities.

While TEMS supports law enforcement, there also is a growing call for more guidance and support from the law enforcement community to the medical world. To clarify and codify those needs, multiple medical and tactical societies are working to develop resources to define how law enforcement departments can develop and improve their TEMS programs. Some common obstacles have been: Where can the typical law enforcement medical provider go to get good, consistent information and support? Can I be a part of some of these societies if I am not a physician? Which society is best for me and my department? Is it worthwhile for me to commit my time, money and resources to becoming a member of this society?

As the field grows, developing the connections and information streams to ensure that one is up to date on the latest developments becomes an ever more critical task.

There are many societies out there; this list is not all-encompassing. We will mention a few groups that have a reputable track record of being credible sources to help address many of the questions mentioned above.

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Medical societies you should know

ACEP (American College of Emergency Physicians): This is the largest group of emergency physicians in the U.S. and is a great resource of information and providers who typically are the ones dealing with similar patients encountered by TEMS providers. They even have a section based solely on the field of TEMS, with a focus on law enforcement.

Historically, you needed to be a physician to join this group; however, recently, the TALEM (Tactical and Law Enforcement Medicine) section voted to allow non-physicians to be eligible for membership in the hope of making their work and resources available to all TEMS providers regardless of their level of certification. Many of the physicians who are part of this group not only are on the front lines, but also are leaders in the field for advancing the specialty of TEMS. Their members have gone on to be the heads of many other medical sections in other groups, including IACP, NTOA, etc. They are a strong, encompassing group that offers expert information starting from the field all the way through to the patient's care in the hospital.

www.acep.org/talem

NAEMSP (National Association of EMS Physicians): Focused on the care of prehospital patients across all subspecialties of the field of EMS, NAEMSP boasts multiple strategic partnerships (including with ACEP and SOMA). Their membership is open to both physicians and nonphysicians, and they are representative of the professionals who practice across the spectrum of care from the field, through the prehospital environment and into the hospital.²

The Operational Medicine (OpMed) committee is focused on supporting the professionals who provide operational medical support to agencies across the breadth of law enforcement, military and tactical activities. Many of their members, both medic and physician, work in the field and on the front lines of prehospital medicine daily.

NAEMSP works closely with multiple other specialty societies involved in prehospital medicine (from NAEMT and NASEMSO to agencies like NHTSA), publishes the journal *Prehospital Emergency Care* and publishes the largest compendium of prehospital clinical guidelines. Many of OpMed's members also are members of state, local and national organizations.

naemsp.org

naemsp.org/prehospital-guidelines-consortium/

www.tandfonline.com/journals/ipe20/about-this-journal#journal-metrics

NAVEMS (National Association of Veterinary EMS): For TEMS providers who provide care for law enforcement and search and rescue canines, the National Association of Veterinary EMS is an association to consider joining. NAVEMS is a 501(c)(3) nonprofit with the specific purpose of representing and serving providers of veterinary prehospital care.

NAVEMS promotes advancing knowledge and high standards of practice in veterinary EMS (VEMS) through

education, advocacy, evidence-based initiatives and research. NAVEMS also seeks to associate and affiliate veterinary professionals (doctors of veterinary medicine, veterinary technicians, veterinary assistants and veterinary students) and EMS professionals. NAVEMS' vision is to serve as the unifying organization that provides education, fosters advocacy and develops evidence-based, best-practice initiatives for veterinary prehospital care and VEMS.

The VEMS Scope of Practice and Core Content has been published, and educational standards are to be published this year. Members of NAVEMS will be able to access educational material and webinars and contribute to the field of VEMS. K9TECC has housed their website on the NAVEMS website. One does not need to be a member to access K9TECC resources.

navems.org

SOMA (Special Operations Medical Association): SOMA is the only medical association in the world that brings together the unique blend of pre-hospital, tactical, wilderness, austere, disaster and deployed medicine. As the official TEMS partner and conference of NTOA, SOMA's primary goal is to advance the art and science of special operations medical care through the education and professional development of special operations medical providers, with a core focus on the SOF Medic.

SOMA makes a difference and drives change. Many areas of special operations medicine have grown out of the efforts of SOMA; areas like Prolonged Field Care (PFC), Tactical Combat Casualty Care (TCCC), and Acute Resuscitative and Surgical Care (ARSC) started at the SOMA Scientific Assembly, an annual conference which provides a forum for special operations medical providers, academia and industry from around the world to meet and exchange ideas, including U.S. and foreign military, domestic tactical law enforcement and TEMS personnel. SOMA advances the science, technology, knowledge, skills and abilities of its members; membership also brings unrivaled access to a network that represents the past, present and future of special operations and unconventional medicine.

specialoperationsmedicine.org

jsomonline.org

Conclusion

In closing, the benefits of membership in a specialty society are both tangible (from access to the experts in the field to "a seat at the table" when position statements and other decisions are being made, continuing education, etc.) and intangible (support, fellowship and collegial discussion with like-minded professionals.)

TEMS is still in development, and many of the problems faced by a provider or agency in one state may well inform or assist those who face similar problems in another. The ability to access one's peers and colleagues in order to inform and guide one's own agencies is a material benefit that we would urge everyone to consider as more than merely an-

other merit badge; as such, we strongly encourage the engagement and activity of every medic, physician and tactical officer as we solve complex tactical problems to the benefit of our fellow citizens.

Disclaimers/disclosures: All authors participated equally in the production of this work. None of the authors had any conflicts of interest to disclose. Most of the authors here have realized the benefits of membership and hold multiple memberships, including in the listed societies. None gain any personal or professional benefit from your joining.

This work represents the opinions of the authors and does not constitute the official policy or position of any of the cited organizations; the Department of Defense [nor a respective Military Service or any other DOD Component] does not approve, endorse or authorize these organizations or any named products or services.

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1. NTOA Statement on TEMS: ntoa.org/sections/tems/tems-position-statement
2. NAEMSP Membership categories: naemsp.org/join-renew

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