30 Years of NAEMT

To commemorate the 30th anniversary of the National Association of EMTs in 2005, the editorial staff of NAEMT News compiled a history of NAEMT, in part based on notes provided by the late Richard Vomacka, NAEMT Past President (1980-1981).

At the time of the founding of the National Registry in 1972, no national organization existed to address the interests of the new “EMT” people who had begun appearing at the state level since 1970. A number of state organizations were being formed, but little organization or collaboration existed.

In 1975, Rocco Morando of the National Registry convened a meeting of all of the then-existing state EMT organizations, including Massachusetts, Colorado, Florida, Oregon, North Carolina, New Hampshire, Maine, Tennessee and Illinois. The Registry hosted the meeting in Columbus, Ohio, and covered all of the expenses.

At that meeting, agreement was reached that a national association was a good idea. Several more meetings were needed before the details were hashed out and the group was ready to actually create the new organization.

The National Association of EMTs was originally more a confederation of state organizations than the truly freestanding body that it is today. The governing body was the board of directors, comprised of one member (often the president) from each participating state organization; one “at large” director representing the unaffiliated states; a director representing the National Registry; the chairman of the NAEMT board of medical advisors; the editor of the association; and some presidential appointments.

There was also a recommending body, the House of Delegates, which had a different member from each participating state organization. The House was supposed to maintain close contact with the members and make recommendations to the board.

The first president was A. Roger Fox from the Oregon state EMS office, who actually served a single two-year term because the group really wasn’t up to speed enough to hold elections at the end of the first year. Our first secretary was Jeff Harris of the Massachusetts EMS office. Roger White, MD, of Rochester, Minnesota, chaired the board of medical advisors, and J.D. “Deke” Farrington, MD, was the editor of the association. “PJ” Williams from Texas was chairman of the House of Delegates.

NAEMT convened its first-ever national awards banquet in Spring 1978 at Kent State University in Ohio. The banquet was held as part of the annual conference of the Ohio Association for EMS, whose president, Gary Williams, was also serving on the NAEMT board of directors. The Ohio Association had generously allowed NAEMT to “co-host” its annual conference, so the Kent meeting became the site of NAEMT’s first annual educational conference and national awards banquet. Kent was also the site of the first full-scale meeting of the NAEMT board of directors.
In 1978, a very significant award was presented at an NAEMT luncheon in Houston. Although we were brand new as a profession, one of our “fathers” was critically ill. Robert Motley, one of the original U.S. Department of Transportation staff members, was dying of cancer. In Houston, the very first “Robert E. Motley EMT of the Year Award” was created and presented – in absentia – to Bob. It was NAEMT’s first “named” award.

In the late 1970s, NAEMT was doing some of its most productive and beneficial work on weekends, in cities and towns across the country. We were blessed with the involvement of Joseph “Jay” Fitch, St. Louis’ EMS commissioner. Jay was – and is – a management guru, and was the founding chairman of our Society of EMS Administrators. Together with Jeff Harris and a few other folks, Jay had put together a weekend course for administrators and those who wished to be. Comprised of lectures, case studies, and interactive small group sessions, these conferences were outstanding hits. We ran one in Des Moines in 1979 or 1980, and it attracted more than 300 paying customers.

By this time, NAEMT had also developed a very respectable EMT Journal, which was published quarterly through Mosby. This was a terrific step forward, and it represented the first “For EMTs, By EMTs” scientific journal.

Spring 1979 found us in Denver for NAEMT’s second annual education conference, which was really hosted by the EMT Association of Colorado. Three major things transpired in Denver. First, a general membership vote was taken to change the bylaws and no longer require that active members had to be certified by the National Registry. From our founding, the requirement had been to be nationally registered in order to belong to NAEMT. Four years later, NAEMT was receiving complaints from EMTs in states where the Registry was not recognized or supported. State organizations that did not have an “all-Registry” membership policy at the state level were also experiencing “split-level” memberships.

There was a lot of tension in Denver over that vote. Clearly, the required quorum of active members was not present, even with the mail-in ballots. Rocco Morando, the Registry’s representative on the board of directors, was clearly in a position to challenge the presence of a quorum and stop the vote. One possible outcome was that the Registry could have been seriously weakened if NAEMT changed its membership rules. To his everlasting credit, Rocco Morando was the gentleman he has always been. Knowing that – right or wrong – the sense of the meeting was in favor of the change, he never raised the issue of the quorum and the bylaws were amended to allow state-certified EMTs to be active members of NAEMT. It is a little-remembered but very significant part of NAEMT history.

The second major event in Denver was an increase in dues. From its founding, NAEMT’s dues had been $2 per year. Although Jeff Harris was a miracle worker at getting us into mass mailings by other people, it was becoming clear that NAEMT needed more money with which to operate. In Denver, after many meetings and arguing, the dues were raised to $7 per year, but they were still to be collected through the state associations.
The third significant event in Denver was the appearance of Thomas (TJ) Sanborn. He was president of the South Dakota EMT Association, which had not as yet affiliated with NAEMT. Tom had come to sit in and observe, and then go back to South Dakota and report. Over the course of the years, TJ Sanborn immensely contributed to NAEMT’s rich social heritage.

The 1980 conference took place in Nashville. While the classes and social life went on around us, the board wound up almost hopelessly submerged in executive sessions and debates over the real future of the Association. Gary LaBeau defeated me for president-elect, cutting short our mini-tradition of two-year presidencies, and Donnie Stamper and TJ Sanborn were seated as members of the board of directors.

In Nashville, our conference coincided with the first-ever educational conference of the “JRC” – the joint review committee for the accreditation of paramedic training programs. It was a funded group, part of a structure through the AMA’s Council on Accreditation of Health Education Associations (CAHEA).

We had a large contingent of representatives from other national organizations with us in Nashville, and despite the closed-door executive sessions, they must have liked a lot of what they saw, because they stuck with us. I think that was one of the first appearances of Dr. Marilyn Gifford on behalf of ACEP, and she went on to be chairperson of the National Registry some years later. We were also working in conjunction with the National Council of State EMS Training Coordinators and the National Association of State EMS Directors, both of which were hardly any older than NAEMT.

During 1980–81, steps were taken to move NAEMT into an independent position, not reliant on the states for dues collection and, for the first time, not requiring the NAEMT officers to be the director from their states. During my term as president, I was able to resign as the Iowa president and focus my attention on NAEMT.

It was also during this year that a major change took place in NAEMT’s management. Jim Page, Jay Fitch and Jeff Harris had formed a company, and they proposed that it would provide management services for NAEMT from a Boston office.

The 1981 meeting took place in Portland, Oregon. As the outgoing president, I remember very little about the Portland meeting except the fire alarms in the hotel after midnight (a real but minor fire) and new president Gary LaBeau appointing Norman McSwain, MD, and Bob Nelson to investigate developing an “ATLS Course for Non-Physicians”. The American College of Surgeons had inaugurated the Advanced Trauma Life Support course in 1987, and although NAEMT had been rebuffed when we asked that EMTs and paramedics be allowed to take the ATLS course, the College had graciously offered to help us develop a similar program for EMTs. This would become PHTLS in a couple of years.

Somehow it was arranged for the NAEMT board to hold a mid-year meeting in New Orleans in 1981. I am not sure with what it may have coincided, perhaps the
ACEP/EDNA convention, but we met at Le Richelieu in the French Quarter and really did work hard. On Saturday, Dr. McSwain rose to report that although he and Bob Nelson had developed a curriculum for the “ATLS Course for Non-Physicians,” they had been unsuccessful in finding $50,000 in backing to finance a nationwide “instructor-trainer” venture to launch the course. The motion was to drop the project. I was interested in this program, but had not had much contact with Dr. McSwain as he and Bob Nelson worked on the project. When I heard about the lack of support, I had an idea and asked for the vote to be tabled for a day so that some other avenues could be explored. On Sunday, the board authorized the three of us to go ahead with the project, as long as it did not cost NAEMT any money. We were on our way. We worked on what became PHTLS for about 18 months. I do not recall anything momentous about it at the 1982 Boston conference, but in Dearborn one year later we gave a panel presentation on “Improved Trauma Management” and presented for the first time many of the teachings that were being built into PHTLS.

Back to 1982 and the Boston conference. Boston was to be the site of another major step in NAEMT’s development. A consensus had actually developed that the governing body was unworkably large – we now had about 40 state affiliates, therefore 45 or more directors. Mail ballots were taking forever, it was incredibly expensive to try and convene 40-plus people for a mid-year meeting and other events. After hours of meetings in Boston and many more hours spent re-working draft, the board agreed to a multiple compromise document that created a small board of directors that was elected by a board of governors, which was comprised of a member from each state affiliate and the affiliated organizations.

For the first time, the National Registry was not guaranteed a seat on the body that would actually run the Association. Don Stamper was the president who presided over this period of change, and Dave Wuertz of Tennessee was elected president-elect. I believe it was in Boston that the House of Delegates, which had had a stormy relationship with the board of directors from Day 1, was dissolved. The House often seemed to think that it was their role to tell the directors what to do, while the directors more often had looked to the House for opinions, not directives.

From Boston we went to Dearborn, Michigan, for our next conference. Dave Wuertz was our incoming president, and a good time was had by all at the Dearborn Hyatt. The banquet was a grand event, and marked the introduction of the Asmund S. Laerdal EMT-Paramedic of the Year Award.

As mentioned earlier, Dearborn was also the site of the first glimpse of what was coming in the PHTLS curriculum. That lecture room was packed, and we went for about three hours to a very positive reception. I remember wondering going in if we would be applauded or strung up, since some of the things we were saying about the need for short on-scene times and simplifying some of the in-field protocols were obviously not going to be popular everywhere. Remember, back in those days the higher your certification level, the longer you got to “stay and play” in the street. We were saying that EMT-A level care was closer to the optimum than high-falutin’ ALS treatment.
Our next stop was Biloxi, Mississippi, in early Spring 1984, followed by Las Vegas in 1985. From there, we went to Orlando in July 1986 in conjunction with ClinCon, which was sponsored by the Florida ACEP. In Orlando, the board took the first steps to change our administration, and we wound up contracting with an association management firm. Another significant development at Orlando was the appearance for the first time of the PHTLS textbook, published by Alex Butman’s Emergency Training Institute. ETI “owned” the book but paid a significant royalty to NAEMT on each sale, thereby further strengthening PHTLS’ support of NAEMT. John Murray took office as president.

NAEMT’s first female president, Janet Head of Kansas, took office in 1987 and our convention was in Kansas City.

In 1988 an extremely significant event occurred: the “Military Medical Training Team” of the US military medical school in Bethesda arranged for a PHTLS class to be taught at Camp Shelby, Mississippi, for a group of Army National Guard medics. At that time the military was a very patchy patchwork quilt of training levels and certifications that had little correspondence with civilian levels. One purpose for the course was to see if the military could “speak” civilian PHTLS – and learn anything from it. PHTLS Chairman Dave Wuertz coordinated the course, and it was a whopping success. Air Force Major General David Trump, who headed up the military’s “C4” course (Combat Casualty Care Course) out of San Antonio was absolutely determined that PHTLS should be made available to front line military medics, and began to find the money to do it. The C4 teams were already traveling about the country, teaching ACLS, ATLS, TNCC and other weekend courses to officers at National Guard and Reserve units.

In 1988 we went back to Biloxi. Jim Paturas took office as president and either was re-elected or the bylaws had changed to allow two-year terms, for he served until 1990. The 1989 convention was in Kansas City again, I believe.

Somewhere in here, about 1989, Dave Wuertz asked me to head up the military PHTLS program. This became a labor of love for the next several years, and I developed a dedicated respect and admiration for the military medical people with whom I worked and came in contact. We assembled a team of distinguished EMS working experts from around the country to work with the C4 teams – deliberately separate from the civilian PHTLS structure because the military courses were very active and I didn’t want to compromise the developing civilian structure while the military pulled us pell-mell into their world.

The 1990 Annual Meeting was held in Philadelphia in early June. Paul Maniscalco took office as president and served for the next two years. I left at the end of the conference and flew to Monterey, California, for a two-week stint with Air force Reservists at Ft. Hunter-Leggett.

On August 1, 1990, while the military PHTLS program was teaching several back-to-back instructor courses at Tripler Army Medical Center in Hawaii, Iraq invaded Kuwait and military PHTLS changed dramatically. Now, rather than well-forecasted courses
planned months and even years in advance, we were getting calls to hold courses on two and three days’ notice. The C4 teams were fantastic in rising to the challenge, and we also wound up working with some units directly because they were able to obtain funding on their own to prepare their troops before they deployed to the Gulf. Colonel Merle Boyce from March Air Force Base in California fought and fought to secure funding for his folks, and then ran an entire summer of PHTLS courses outside Sheppard Air Force Base in Texas. We had also by now become involved with first the Army Special Forces troops at Ft. Bragg, and later with personnel from the Navy SEALs and Air Force PJ’s. A PJ is a guy who trains to jump out of a moving helicopter into treetops, without a parachute. Trains for it—practices, does it again and again. Egad! We did a combined SEAL/PJ course on Coronado Island outside San Diego, and another one with SEAL Team 2 in Little Creek, Virginia, and a PJ instructor course at Hurlburt Field, Florida. They flew people in from England and Japan for the course. The level of interest and commitment in the military was incredible, and I never recall hearing anyone ask “why do I have to learn this?”

In 1991 we went to Reno for the first time, and Mark Lockhart of St Louis became president. Bruce Shade became president in 1993 and served a one-year term. I think that the conference that year was in Atlanta. NAEMT took over management of the Association and moved headquarters to Clinton, Mississippi.

Jonathon Best of Connecticut became president in 1994 and was re-elected for a second term as the bylaws were changed yet again to eliminate the board of directors and delegate powers of the active members to the board of governors and the executive council and officers. Jim Allen of Mississippi took over as president in 1996 and served until 1998 when Deborah Knight-Smith became president in Winston-Salem and served two terms.

In 1996, NAEMT launched its Web site. In 1999, the national rollout of the Advanced Medical Life Support (AMLS) educational course took place, followed by the national rollout of Pediatric Prehospital Care (PPC) in 2001.

In 2002, NAEMT began its successful co-location of its Annual Meeting with EMS EXPO. This “partnership for progress” continues today and has been extended through 2008.

In 2005, NAEMT celebrated 30 years of service to EMTs and paramedics worldwide.