

EDITORIAL

A Call for Standardized Training

Jack A. Horner

This special issue of *Disaster Medicine and Public Health Preparedness* is being published as a result of the tragic events that occurred on the Virginia Polytechnic Institute and State University (Virginia Tech) campus in April 2007. Such events vividly underscore the need for specialized training to ensure the most appropriate and effective response on the part of the medical and public health community. The National Disaster Life Support Foundation (NDLSF; a 501(c)3 nonprofit foundation) was established for the primary purpose of developing and disseminating disaster medicine educational courses. In partnership with the American Medical Association the NDLSF has developed a “family” of courses to address the need for standardized disaster medicine education. The unknown aspects of any disaster scene require that standardized training be approached from an all-hazards standpoint. These are the underlying attributes of the NDLSF family of courses.

The courses are designed around an all-hazards disaster management mnemonic called the D-I-S-A-S-T-E-R paradigm, which facilitates ongoing qualitative and quantitative assessment of a mass casualty incident:

D—Detect

I—Incident Management

S—Scene Safety and Security

A—Assess Hazards

S—Support

T—Triage and Treatment

E—Evacuation

R—Recovery

The NDLSF courses are Core Disaster Life Support, Basic Disaster Life Support, and Advanced Disaster Life Support. As stand-alone courses that build upon the preceding course, they can be incorporated into the existing educational programs and workshops, using a multidisciplinary approach. Because the evidence base of disaster medicine is growing and dynamic, the content and curriculum of all NDLSF courses are reviewed and updated by a consortium known as the National Disaster Life Support Education Consortium. This consortium has broad representation and participation from many stakeholder organizations to ensure that the content and instructional design is current and appropriate.

With a shared goal of disaster preparedness, the NDLSF is pleased to lend its support to this special issue. We would like to commend the publishers and the editorial board for their vision in recognizing the value of a journal that cogently addresses the needs in disaster medicine. Unfortunately, disasters with severe medical consequences will continue to be a threat to our way of life. Weather-related and manmade disasters will persist, even in the absence of terrorist activities. We sincerely hope, via contributions such as this special issue, that complacency and panic, the 2 extremes that detract from appropriate preparedness, are replaced by standardized, all-hazards, interoperable practices.

About the Author

Mr Horner is President of the National Disaster Life Support Foundation, and contributes this editorial on behalf of the NDLSF Board of Directors.

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