



May 9, 2014

Marlene H. Dortch  
Federal Communication Commission  
445 12th St. S.W.  
Washington, DC 20554

PS Docket No 07-114

RE: Wireless E911 Location Accuracy Requirements

Dear Ms. Dortch:

On behalf of more than 32,000 members and the 130 million patients we see annually, the American College of Emergency Physicians' (ACEP) appreciates the opportunity to support the Federal Communication Commission's Third Notice of Proposed satisfaction and indoor locations of wireless 911 calls. ACEP is a national medical specialty society that provides continuing medical education, patient advocacy at all levels, and public safety information through our website and national media campaigns. Many of our members also provide disaster preparedness expertise and the College has developed guidelines via support from CDC and other agencies. Within our structure, we have an EMS Committee that specifically addresses operational and policy issues such as the ones contained in this proposal.

The Emergency Department Practice Management Association (EDPMA) is one of the nation's largest professional physician trade associations focused exclusively on the delivery of emergency medical services, with an emphasis on the provision of high-quality, cost-effective care in the emergency department to all Americans. Together, EDPMA's members deliver (or directly support) health care for over half of the 130 million patients that visit U.S. emergency departments each year. EDPMA's membership includes emergency medicine physician groups, as well as billing, coding, and other professional support organizations that assist health care providers in our nation's emergency departments. We work collectively and collaboratively to deliver essential health care services often unmet elsewhere to an underserved patient population.

As noted in this (March 28, 2014) proposal's background, the majority of 911 calls now come from wireless phones and over 50% are made indoors. Improved indoor location accuracy will greatly benefit both patients and first responders so it seems logical for 911 dispatchers to have access to these advanced tools. There is no doubt that delays in locating patients in an emergency can make a life or death difference in some instances, including trauma, heart attacks, and stroke. Concomitant benefits to EMS providers and other first responders include improved efficiency which increases employee satisfaction. Locating, assessing, beginning stabilization, and transport of patients to the emergency department as quickly as possible will be improved through use of this technology. And, it should also result in faster turnarounds between trips for busy EMS, fire, and police responders.

As emergency physicians, we are extremely sensitive to need for seriously ill or injured patients to reach the emergency department as quickly as possible. We are very familiar with the clinical literature on reduction of mortality rates and other improved outcomes from timely interventions, and many of our members conduct this type of clinical research in their hospitals. Further reducing dispatcher time in pinpointing the patient's location is the most important aspect of this proposal. A new level of timing

accuracy is particularly crucial for certain populations such as the elderly, disabled, children, or individuals with mental incapacities who are unable to provide information cogently.

We support the goal of the FCC on this issue, but are unable to comment on the estimates of costs and benefits noted in the proposal (e.g. Issue #29-savings estimate from a PA cardiac study) as it is not clear what type of costs were saved and to whom the savings accrued. Clearly, there will be attendant costs of nationwide implementation of this technology and those costs will undoubtedly be passed onto consumers in the form of additional taxes and/or fees.

Thank you for the opportunity to share our concerns and comments. If you have any questions, please do not hesitate to contact Barbara Tomar, Federal Affairs Director at [btomar@acep.org](mailto:btomar@acep.org).

Sincerely,

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President, ACEP

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