Basic policy of Emergency Medical Service and Disaster Medical Response
Plan during the Tokyo Olympic and Paralympic Games in 2020

The Academic Consortium on Emergency Medical Service and Disaster Medical Response
Plan during the Tokyo Olympic and Paralympic Games in 2020

The Joint Committee for Emergency Medical Service and Disaster Medical Response
Plan during the Tokyo Olympic and Paralympic Games in 2020

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- Yuichi Koido, Representative Director, The Japan Association of Disaster Medicine
- Shinichiro Suzuki, Representative Director, Japanese Society for Clinical Toxicology
- Hiroaki Nakazawa, Representative Director, Japanese Society for Burn Injuries members
- Tetsuya Sakamoto, Representative Director, Japan Society for Emergency Medicine
- Naoto Morimura, Chairman, The Joint Committee for Emergency Medical Service and Disaster Medical Response Plan during the Tokyo Olympic and Paralympic Games in 2020

1. The Academic Consortium on Emergency Medical Service and Disaster Medical Response Plan during the Tokyo Olympic and Paralympic Games in 2020 (hereinafter called consortium: AC TOKYO 2020), which was formed in April 2016 for the Tokyo Olympic Games and the Paralympic Games (hereinafter called the Tokyo Olympic Games 2020), established the Joint Committee for Emergency Medical Service and Disaster Medical Response Plan during the Tokyo Olympic and Paralympic Games in 2020 (hereinafter called JC-AC TOKYO 2020), cooperating with the 7 organizational societies to acquire academic information that will contribute to building better emergency medical services and disaster medical response plans and to examine the contents of required skills, and submit recommendations.

2. The consortium maintains an organization and activities that can respond to large-scale crowd events (mass gathering) even after the completion of the Tokyo Olympic Games 2020.
3. The consortium emphasizes risk assessment in building emergency medical services and disaster medical response plans and supports the creation of structures capable of responding to heat stroke, lightning strikes, mass casualty incident by terrorism, and infection.

4. The consortium will examine the requirements necessary for smooth operation of emergency medical services in the area hosting the Tokyo Olympic Games 2020 where emergency demand is expected to increase.

5. The consortium constitutive academic society is planning to conduct examination making full use of the special field of each academic society.

6. The Japanese Association for Acute Medicine, in collaboration with the Society of Constitution, develops training courses of emergency resuscitation, advanced trauma life support, acute poisoning, medical control, triage etc, and provides those for healthcare workers and stakeholders who respond to the audience etc. during the convention. In addition, we will aggressively collaborate with related medical and medical related organizations, and we will record records of emergency and disaster medical services during the Tokyo Olympic Games and Paralympic Games 2020 and verify after games.

7. The Japan Society for Emergency Medicine is planning to consider examining emergency medical response (including non-disaster situations) including a first aid stations, and medical control systems based on the Medical Association and multi-occupational collaboration.

8. The Japanese Association for The Surgery of Trauma is planning to consider ways of treating gunshot wounds and explosions.

9. The Japan Association of Disaster Medicine is planning to proceed with consideration for mass casualty incident by terrorism.

10. The Japanese Society for Burn Injuries members is planning to examine the acceptance system for a large number of burned patients.

11. The Japanese Society for Clinical Toxicology is planning to consider based on chemical terrorism etc.

12. The Japanese Society of Intensive Care Medicine is planning to examine the system of intensive care unit accepting of mass casualty in the event of a disaster.

13. Assuming the occurrence of terrorism during the event, it is necessary to systematically prepare the hospital's system to accept.