

New Homework Assignment!

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The "why"...



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Amputee Care & Rehabilitation

- **Paradigm Shift:** has occurred in the amputee patient population for both DoD and VA driven primarily by the volume of a particular set of patients that we have seen in this current conflict:
 - Historically, the higher volume amputee care recovery has been for less highly functioning individuals (chronic vascular pts, advanced diabetics, etc...)
 - Current cohort are highly performing individuals (aka our soldiers/sailors/airmen/marines) returning to high performance occupations.
- **What’s the Endstate:** Functional recovery of an amputee to a high performance level.
- **So begs the Question:** How will the MHS maintain the advances (achieved in this current conflict) in limb & amputee care and rehabilitation skill sets.

Amputee Care & Rehabilitation

- **Background:** Incredible MHS advances in polytrauma and amputee rehabilitation have occurred at WRNMMC, SAMMC, and Balboa.
- **Issue:** AD patient volume will rapidly decline post-conflict, creating risk for maintaining currency and competency.
- **Way Ahead:** Joint Staff and USD(P&R) requesting the DHB address the issue of:


Maintaining the skill sets required to optimize the functional recovery (prosthesis fitting/rehabilitative care) of our Soldier, Sailor, Airmen, and Marine amputee population.

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Way Ahead

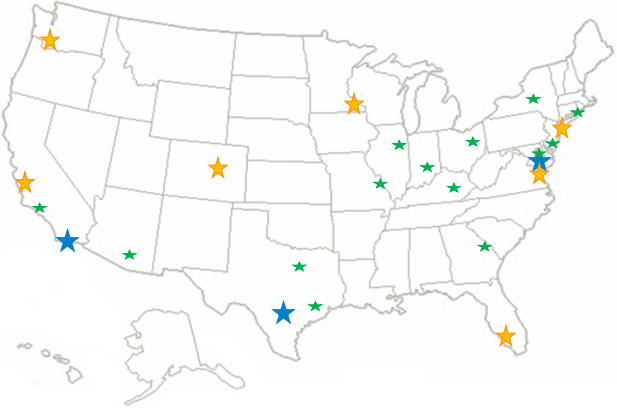
- To support the functional recovery of our amputees to a high performance level, we must look at:
 - Skill set maintenance/currency & competency
 - Infrastructure needed to support above
 - Build upon the already established Extremity Trauma and Amputation Center of Excellence (EACE) as the Center of Gravity
 - *Who maintains the “pilot light” in the interwar years*
 - *For trauma care continuum of care it’s Joint Trauma System*
 - *Build formal partnership with JTS*

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DoD-VA Amputation Care Sites







DOD Advanced Rehab Center (ARC)	
WRNMMC/MATC	SAMMC/CFI
NMCS D/C5	
VA Regional Amputation Center (RAC)	
Bronx, NY	Richmond, VA
Tampa, FL	Minneapolis, MN
Denver, CO	Seattle, WA
Palo Alto, CA	
Polytrauma Amputation Network Site (PAN)	
West LA, CA	Tucson, AZ
Dallas, TX	Houston, TX
St. Louis, MO	Hines, IL
Indianapolis, IN	Lexington, KY
Augusta, GA	Cleveland, OH
Syracuse, NY	Boston, MA
Philadelphia, PA	Washington DC

MATC: Military Advanced Training Center at Walter Reed National Military Medical Center; CFI: Center for the Intrepid at San Antonio Military Medical Center; C5: Comprehensive Combat & Complex Casualty Care at Balboa Naval Medical Center San Diego







OEF/OIF/OND Major Limb Amputations Patient Volume to Date



	AMPUTEE PATIENTS	WRNMMCB	SAMMC	NMCS D
OIF	837	625	300	42
OEF	763	567	217	121
OND	2	1	2	0
TOTALS	*1602	1193	519	163


Source: EACE-R
*Note there has been overlap of patients at reporting facilities
As of: 01 June 2013

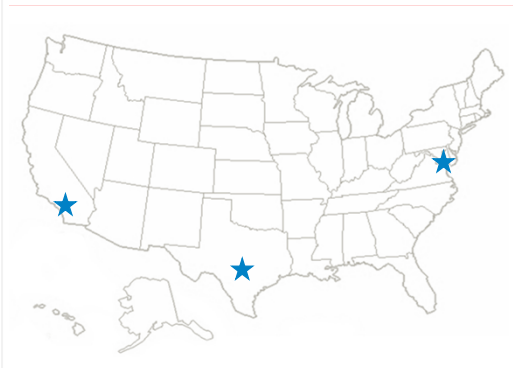




Amputee Care & Rehabilitation

How do we maintain Synergy of Effort?






Continuum of Care


Epidemiology	Pre-Clinical Basic Science	Regenerative Medicine	Medical/Surgical Interventions	Prosthetics and Orthotics	Rehabilitation	Community Reintegration
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Team Approach

Centers of Excellence
Military Treatment Facilities
Veterans Affairs
Medical Research and Materiel Command
Defense Advanced Research Projects Agency
Academia
Industry




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Maintaining Amputee Care & Rehabilitation

Currency & Competency

...just for thought!






Issue(s):

1. Post OIF/OEF, we'll see declining military amputee care & rehabilitation patient population...the good news!
2. How do we maintain currency & competency...the challenge!

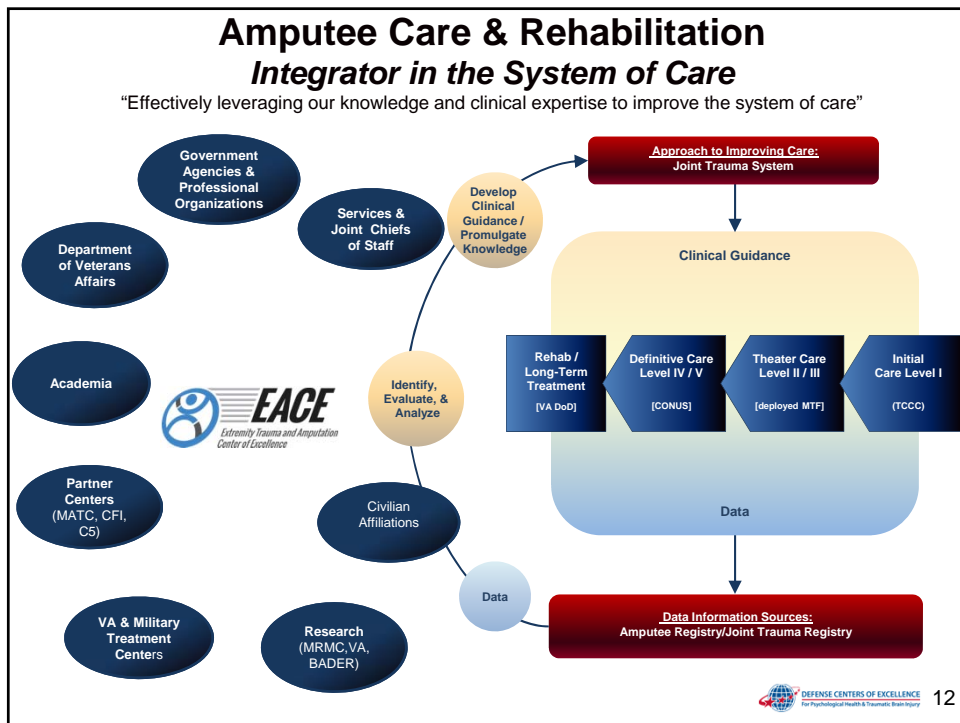
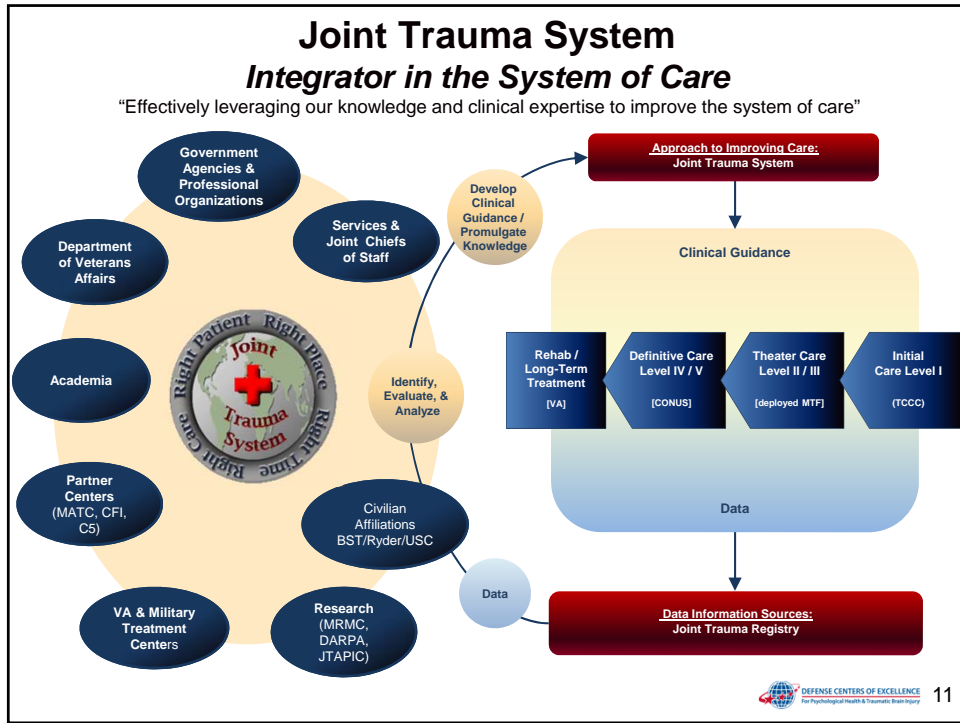
Question(s):

1. Bring pt population (mil/civ) to military COE/COG(s)?
2. Bring mil patients & mil staff to civilian/VA COE/COG(s)?
3. Bring VA/civilian patients & staff to military COE/COG?
4. Hybrid?

Note: potential civilian COEs not depicted on slide



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Restatement of Homework Assignment

- Way Ahead: Joint Staff and USD(P&R) requesting the DHB address the issue of:

Maintaining the skill sets required to optimize the functional recovery (prosthesis fitting/rehabilitative care) of our Soldier, Sailor, Airmen, and Marine amputee population.

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We are transforming society...



...with the "why not!"

Back Up Slides

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