

Referrals to an Advanced Rehabilitation Center (ARC)

Referrals to Walter Reed National Military Medical Center and the Military Advanced Training Center (WRNMMC / MATC)

The Department of Defense developed medical centers of excellence in trauma treatment and rehabilitation over the previous twenty years of conflict. These medical centers are designated as Advanced Rehabilitation Centers (ARCs). These facilities are the highest level of care nationally, partnered with academia, industry, research, and civilian institutions, with the result of optimal outcomes for our Wounded Warriors. In the nation's capital, Walter Reed National Military Medical Center and the Military Advanced Training Center provide cutting edge amputee rehabilitation to Wounded Warriors, Veterans, Family members, Secretarial Designee civilians, and foreign military members.

The referral guidelines and processes are in general for patients eligible to receive care at a Military Treatment Facility (MTF) such as Active Duty, retired/medically retired Veterans, and eligible Dependents. The Secretarial Designee process is also an option, although lengthier and more difficult to achieve. It is described at bottom. When in doubt, please call. Our goal is to support all Department of Defense members with amputation.

External inpatient to inpatient referrals

Coordinate directly with specialty providers or the Trauma Service. To facilitate the process, call the WRNMMC Patient Administration (PAD) at (301) 295-2126 and inform them that this is a Provider One Call. They will collect all necessary information and contact the appropriate service who will be accepting the patient, to facilitate provider to provider hand-off.

We recommend that coordinators/providers also contact the Amputee Care Coordinators as a courtesy notification that an amputation care patient is inbound. Amputee Care Coordinators can be reached at (301) 400-1482/295-8958.

Outpatient Referrals (post inpatient and before outpatient rehabilitation has been initiated)

For DoD eligible patients, the Primary Care Manager (PCM) or specialty provider must enter a referral in the electronic medical record for the service needed (Physical Medicine & Rehabilitation [PM&R], Orthopedic Surgery, Vascular Surgery, Trauma, etc.), specifying which facility is desired (i.e., WRNMMC, SAMMC, NMCSO). If an accepting provider is already identified, his/her name should be specified, as well as why the patient is being referred.

The consult may take 3 business days for processing. You can check status in Genesis and if it has not progressed, call Integrated Referral Management & Appointing Center (IRMAC) (855) 227-6331, or the Amputee Care Coordinators at (301) 400-1482/295-8958 for assistance.

For Veterans who are not dual eligible, the PCM must put in the referral with the same specifics as above. It must be processed through the Community Care Office at their Veterans Administration Medical Center (VAMC), then faxed to (301) 319-8555 or emailed to dha.bethesda.ha-support.list.wrnm-epro@health.mil. The External Program Referrals Office

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(EPRO)/VA Sharing office at WRNMMC will work with the Community Care Office for authorizations and funding, contact (301) 319-4630/319-4631.

Upon receiving referral information, the Amputee Care Coordinator will verify eligibility, registration to an MTF, contact appropriate providers to inform them and forward the patient's/referring provider's contact information. They also assist with the referral process through the MTF and coordinate appointment scheduling, lodging information, paperwork required by units, etc. The Amputee Care Coordinators also serve as general liaisons and can provide information and assistance to anyone or any organization in need.

Post Amputation/Outpatient

Once discharged from inpatient care, all patients need a referral for Physical Medicine and Rehab. The patient is seen in the Amputee Clinic for an evaluation, to meet with the interdisciplinary team (Occupational Therapy [OT], Physical Therapy [PT], Orthotics and Prosthetics [O&P], PM&R, RN Care Coordinator), and to establish a rehabilitation plan of care.

Amputee Care Coordinators will assist patients as needed throughout the rehabilitation coordination process. They will also communicate with the entire health care team, to include patient's referring provider and/or case manager, to keep them informed regarding the patient's condition and to provide updates on the plan of care.

Residual limb complications, additional services, or maintenance care

Please contact the WRNMMC Amputee Care Coordinators to assist with coordination to ensure that referrals are placed, and appropriate appointments are scheduled.

Some patients may need WRNMMC Ortho/Vascular and then follow-up with PM&R. Some may not need surgical intervention but need to be seen and evaluated in the Amputee Clinic to determine a plan of care. For example, the patient may need adjustments to orthotic or prosthetic components, pain management interventions, or additional prosthetic training. WRNMMC PM&R will refer to other specialty services as needed.

Elective Amputations

Referrals need to be entered as above and should be processed through the specialty service, or a specialty provider (e.g., Ortho or Vascular) may be contacted directly by an outside facility regarding a referral. Contact the WRNMMC Amputee Care Coordinators to assist, ensuring that referrals are placed, and appropriate appointments are scheduled.

After the WRNMMC specialty provider(s) evaluates the patient, if an elective amputation is found to be a reasonable option, then a second specialty provider must see the patient for second opinion evaluation. If both agree that amputation is appropriate, the Amputee Care Coordinator will be contacted to coordinate a mandatory psychiatric evaluation.

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Once all evaluations are completed and the health care team agrees that amputation is appropriate for the patient, Amputee Care Coordinators will meet with patient to schedule an initial Amputee Clinic appointment for pre amputation counseling, and to determine his/her needs, timeframe for when they will have the elective amputation and where they would like to complete their rehabilitation. This information will then be communicated to the team.

Amputee Care Coordinators will work with the interdisciplinary team, case managers, Service Specific Wounded Warrior Programs and Veterans Administration, etc. If active duty and patient is going to be at WRNMMC for an extended time, it may be appropriate for them to be placed in one of the WW programs (based on service). For patients who do not meet criteria for a WW program, Amputee Care Coordinators will work with the patient/unit liaisons and interdisciplinary team to provide coordination of care during their rehabilitation phase.

Returning for prosthetics care

The central points of contact are the Amputee Care Coordinators. Patients may be referred or may call directly for assistance with lodging and prosthetic care. If the patient has not been seen previously by WRNMMC, the patient will need a referral to the PM&R Amputee Clinic and will need to be seen first in the Amputee Clinic for evaluation and for assignment of a prosthetist.

If already an established patient, the Amputee Care Coordinators will coordinate directly with the prosthetist prior to arrival to ensure the prosthetist is available, and to get an estimate on length of stay needed for prosthetic work. Amputee Care Coordinators then schedule patients for prosthetic care and follow up in the Amputee Clinic.

At WRNMMC, amputation care is ideally organized to begin on Monday and be completed by Friday. If additional time is required, Amputee Care Coordinators will contact units and provide documentation as needed.

Secretarial Designee

For additional information or assistance with a Secretarial Designee referral to WRNMMC please contact the WRNMMC Amputee Care Coordinators at (301) 400-1482/295-8958. More information on the program is also available at

<https://www.esd.whs.mil/Portals/54/Documents/DD/issuances/dodi/602523p.pdf?ver=2019-03-22-095347-850>.

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Points of contact for other ARCs:

Referrals to Naval Medical Center San Diego and the Comprehensive Combat and Complex Casualty Care (C5):

External inpatient referrals:

Communicate directly with specialty providers or the Trauma/Acute Care Service.

Duty Phone for Trauma/Acute Care Consults: (619) 532-7533

Phone for Trauma/Acute Care Case Management: (619) 532-5831

Outpatient referrals (post inpatient and before outpatient rehabilitation has been initiated):
The referring physician places a consult to NMCS D PM&R.

General information for C5: 619-531-1404.

Coordinating Points of Contact:

C5 Front Desk 619-531-1404

C5 Division Officer 619-532-6044

Referrals to San Antonio Military Medical Center / Brooke Army Medical Center and the Center for the Intrepid (CFI):

The referring physician places a consult to the SAMMC/BAMC CFI program.

Patient Administration: 210-916-2733 (Admissions and Dispositions)

The POC for consults/referral management is Dr. Veeta Vaughn, 210-916-3780 or
veeta.m.vaughn.civ@health.mil

Case Manager contact information is 210-916-5463.