Health Care Delivery Subcommittee

Advancement and Sustainment of Amputee Care

George K. Anderson, MD, MPH

Defense Health Board
November 6, 2014
Overview

- Membership
- Tasking
- Timeline
- Areas of Interest
- Way Forward
Membership

Health Care Delivery Subcommittee

- Maj Gen (Ret) George K. Anderson, MD, MPH
- Eve J. Higginbotham, SM, MD
- Russell V. Luepker, MD
- RADM (Ret) Kathleen L. Martin, MS
- Dennis S. O’Leary, MD
- Joseph E. Parisi, MD
- Michael D. Parkinson, MD, MPH
- Richard L. Salcido, MD
- GEN (Ret) Frederick Franks
“Review the full spectrum of amputee care, and define a strategy for preserving and continuing these advancements, identifying the best possible care to our beneficiaries.”

- Acting Under Secretary of Defense for Personnel and Readiness memorandum dated January 20, 2013
Meetings since August 2014 Board meeting:

- **September 23-24 – Meeting at DHHQ**
  - Discussions with the Director of the DoD/VA Extremity Injury and Amputation Center of Excellence and Director, Program Review and Evaluation, Health Budgets and Financial Policy, Office of the Assistant Secretary of Defense for Health Affairs.
  - Discussion of draft findings and recommendations
Meetings since August 2014 Board meeting:

- October 8 – Teleconference
  - Discussion of draft report, findings, and recommendations

- October 30 – Teleconference
  - Finalizing of draft report, findings, and recommendations
Areas of Interest

1. Current Environment
   - Current DoD amputee care infrastructure, functions and vision of approach to care, as well as international awareness

2. Collaboration
   - Potential partnerships with VA, HHS, NIH, civilian partners, academic centers, international partners and others

3. Technology
   - Use of technology and simulations to maintain skills
   - Value of co-located multidisciplinary providers and researchers
Areas of Interest

- **Research, Data and Surveillance**
  - Current state and gaps in both clinical and technological areas
  - Defining and assessing provider competencies

- **Future Need**
  - Necessary patient load to sustain expertise and capabilities
  - Preventive care services for current amputee population as they age
  - Continued reintegration support for amputees to return to active duty, deployments and civilian life
Way Forward

- Continue monthly teleconferences and meetings
- Further develop findings and recommendations
- Compose, edit, and review report language
- Present draft report for February 2015 DHB meeting
Questions?