

House Committee on Veteran's Affairs

Subcommittee on Health

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Testimony of Thomas E. Terndrup, M.D.

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Chairman Simmons, members of the committee, good morning. I am Dr. Thomas Terndrup, Professor and Chair of the Department of Emergency Medicine at the University of Alabama School of Medicine and Director of the Center for Disaster Preparedness at the University of Alabama at Birmingham or UAB. Speaking for Dean William Deal of the UA School of Medicine, we appreciate the opportunity to address the committee today. I am here to speak in support of Public Law 107-287, the Department of Veterans Affairs Emergency Preparedness Act. Funding for the establishment of four VA centers of excellence should be established with utmost speed, to ensure that our soon to be future veterans and our citizens can be afforded the security improvements that those centers would bring to bear.

As a career emergency physician, I have treated thousands of victims of the seemingly routine, small-scale disaster incidents, such as those that occur on our nation's highways and communities daily. As an educator, I have had the opportunity to work with and train nurses, doctors, and other staff members in the necessary recognition and treatment of a wide array of these emergency disorders. However, none of those has been as challenging and important as the tasks at present, that is preparing our healthcare system and its personnel for responding to the consequences of weapons of mass destruction. In this effort, the vital relationships between VA medical centers and our academic health centers and universities must surely be tapped in order for our nation to be better prepared. Secretary Tommy Thompson has said "knowledge is the healthcare

systems greatest weapon” against terrorism. Academic health centers collaborating with VA medical centers are an important national asset, whose relationship can be immediately exploited to our nation’s counter-terrorism efforts.

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At the UAB, we formed the Center for Disaster Preparedness in 1999, in order to address issues associated with preparation for biological terrorist attacks and other disasters through broad-based, multidisciplinary research, training, and service programs. Local Birmingham VA personnel were instrumental in its formation. The Center’s goal is to provide a formal structure to facilitate collaborative efforts between experts from a wide range of disciplines in order to address the issues surrounding disaster preparedness.

Our experts in public health, drug delivery, medical operations, rare and emerging infections, and basic and clinical research work together in strengthening our nation’s biological shield. These individuals work collaboratively in improving the awareness and preparedness of the health professions for possible Weapons of Mass Destruction or WMD incidents. We have built strong relationships with other universities in the United States, including Louisiana State and Vanderbilt Universities, who together with UAB comprise the National Health Professions Preparedness Consortium. UAB is also collaborating with other southeastern universities in responding to the NIH’s call for Regional Centers of Excellence in Biodefense research. I am intimately familiar with the broad capabilities that such multidisciplinary centers can deliver.

Our collaborative disaster center training activities include the nation’s only live-exercise based WMD course which achieves healthcare leadership integration in responding to WMD incidents. We achieve this through utilization and modification of Homeland Security’s Noble Training Center in Anniston, Alabama. Our local Birmingham VA has been a key component of the design and implementation of these training missions. The VA’s National Disaster Medical System and our local Disaster Medical Assistance Team have actively collaborated, and recently deployed to assist with the World Trade Center

attacks. The planning, coordination and training activities have included conferences on post-deployment health evaluation and optimization, essential in our post-“Iraqi freedom” world.

The University of Alabama School of Medicine is one of the nation's top educational, research and patient care institutions. It has ranked in the upper echelon of federally funded medical schools for over 20 years. Our faculty have risen to respond to virtually all health threatening events; HIV/AIDS, arthritis, heart disease, organ transplantation, cancer, anthrax, and others. Disaster preparedness is another example of our eagerness to serve the nation and the world.

Public Law 107-287 establishes Emergency Preparedness Centers at VA centers which have strong collaborations with qualifying medical and public health schools, as well as other appropriate research and educational activities. Though the mission of our VA is to provide care and assistance to veterans, it accomplishes this by providing a full range of patient care services, as well as education and research. A local example is a project at the Birmingham VA to evaluate ways of training physicians and nurses to detect patients that are victims of bioterrorist attacks. This project utilizes the advanced VA computer capabilities to provide training. The training programs were developed by the Agency for Healthcare Research on Quality and our UAB Center for Disaster Preparedness. This project will inform us not only about training VA personnel, but also about training community based healthcare providers nationwide.

Last year under the VA Quality Scholars training program at the Birmingham VA and UAB, Dr. Jessica Jones, a VA trainee in the program run by my colleagues, Drs. Catarina Kiefe and Norman Weissman, was trained by us in Bioterrorism Preparedness. This year she is employed in the Los Angeles County Department of Health Services, as the Assistant Director for Bioterrorism Preparedness.

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Public law 107-287 creates a joint program between the Department of Veterans Affairs and the Department of Defense in which a series of model education and training programs on the medical response to the consequences of terrorist activities are developed and disseminated. The long history of collaboration between VA hospitals and medical schools, puts the VA in an excellent position to get this valuable job done.

In closing, let me point out that existing resources should not be reassigned for this proposal; rather additional resources should be added for this specific program. These resources will be instrumental in securing our homeland, and they will build upon the strengths of existing VA and academic health centers.

I thank you for this opportunity to present to you today.