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THE HOUSE ARMED
SERVICES COMMITTEE

STATEMENT OF
LIEUTENANT GENERAL H. P. OSMAN
UNITED STATES MARINE CORPS
DEPUTY COMMANDANT FOR MANPOWER AND RESERVE AFFAIRS
BEFORE THE
MILITARY PERSONNEL SUBCOMMITTEE
OF THE
HOUSE ARMED SERVICES COMMITTEE
CONCERNING
CARE OF INJURED AND WOUNDED
SERVICE MEMBERS
ON
MARCH 3, 2005

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Chairman McHugh, Congressman Snyder, and distinguished Members of the Subcommittee thank you for the privilege of testifying today concerning Marines – particularly our injured and wounded Marines and Sailors serving with Marines, as well as service members as a whole, and their families. The Commandant, and the Marine Corps as an institution, are intimately involved with this issue. We have absolute confidence in the full and energetic support of the Secretary of the Navy, the Defense establishment, and the Congress as we mature and refine our approaches. What we will do as concerns this topic runs at the core of who we are as an institution – it’s all about taking care of our own.

The over 35,000 Marines and Sailors serving today in Iraq and Afghanistan are performing superbly in the Global War on Terrorism due to, in large part, their training and extraordinary courage. They fully understand the danger to the Nation and the danger to themselves. The harsh and imperfect realities of war at times exact a severe human cost. Given our all-volunteer force, the commitment and sacrifice of our men and women is awe-inspiring, and one that demands our fullest support.

Since our nation suffered the attacks on September 11, 2001, over 460 Marines have been killed and over 4,000 have been wounded or very seriously or seriously injured answering the call of the Nation. As I will discuss in more detail later, we have experienced tremendous advances in individual protection and medical response and care. While this results in the lowest combat fatality rate in Corps history, it has also changed the dynamics of injuries and the direct and indirect support necessary. We are continuing to refine and mature our approaches to providing **complete** support for our brave warriors. Concurrently, the flexible and responsive support of the Congress has been indispensable. On behalf of your Marines, and Sailors who serve with us, their spouses, children, mothers and fathers, I thank you for your tremendous and

unwavering support. I thank this Committee for the opportunity to discuss evolving efforts to improve care for our injured and wounded service members and their families.

The Corps is fully engaged across the spectrum of military operations in prosecuting the Global War on Terrorism. Our core competencies, our capabilities, our non-negotiable focus on readiness and our culture of deployment have served us well in this war. We have been able to adjust to the operations, tricks, tactics, and techniques our enemy has employed against us. Nonetheless, the enemy has inflicted injuries on our brave troops, in some cases horrific ones. The daily courage and fortitude of our Marines in the face of these injuries is nothing short of inspiring and we must do everything we can to help them and their families during recovery.

In-Theater Care of Wounded and Injured Marines

Since the beginning of the Global War on Terrorism, the Marine Corps has focused on protecting the health and safety of every Marine sent into harm's way, and has ensured, along with Navy Medicine, that outstanding health services are available to anyone that does become injured or ill. Immediate initial treatment by well-trained hospital corpsmen, followed by rapid resuscitation and transport to advanced life-saving medical facilities within the "golden hour" after injury, have resulted in the lowest combat fatality rates in Marine Corps history. Added emphasis on casualty prevention measures, including improved body armor and anti-ballistic eye and hearing protection, brought about a shift in the pattern of combat injuries and saved many lives.

These recent advances in battlefield medical care and force protection, combined with the dedication and skill of the Navy Medical personnel deployed with Marine Corps units, have permitted two of every three wounded Marines to return to duty within 72 hours. Unfortunately, despite these successes some Marines suffer severe wounds. Those that cannot be rapidly

returned to duty are provided essential care in theater and stabilized for rapid evacuation to definitive care in Europe or in the United States – more than 2,200 Marines have been evacuated during Operation Enduring Freedom and Operation Iraqi Freedom to date.

One of the most noteworthy advances in battlefield medical care for the Marine Corps has been the successful deployment of the Forward Resuscitative Surgery System (FRSS). This small, highly mobile, 8-person team provides direct support to maneuvering infantry battalions to make life-saving resuscitative surgery available at the forward edge of the battlefield. During the 1st Marine Division's push to Baghdad, no Marine that arrived at an FRSS alive died of his wounds. Shock trauma platoons manned by emergency medicine specialists also work far forward, offering advanced resuscitation capabilities to stabilize wounded Marines for surgery or for evacuation to facilities at the rear.

From the corpsmen in Fallujah, to the doctors and nurses at the Shock Trauma Platoon and FRSS, to rehabilitation specialists at Bethesda and Walter Reed, the outstanding medical care provided to wounded Marines has been one of the true success stories of the War on Terror.

Support for Marines and Families

Marines are no strangers to combat, nor the unfortunate injuries or death that may ensue. While a significant number of our wounded are returned to duty, which is a testament to the battlefield medical care received, 23 percent of the injured required treatment beyond field medical capabilities and were subsequently transported out of theater. As of February 23, 2005, **86 Marines** are still hospitalized. In these cases, the presence of a family member, where determined appropriate, is one of the most significant contributions to the welfare of the injured/ill Marine, and also offers comfort or peace of mind for the family members that are reunited with the Marine.

Our goal is to ensure that our injured Marines and their families receive the proper level of support to accommodate their situations and allow them as much comfort as can be provided during extremely difficult times. That said, caring for our injured Marines' and their families is a complex process involving different agencies that must pull together for seamless support. Unfortunately, seams exist which need to be filled, with roles and responsibilities more definitely stated in order to achieve the intended continuum of care. We believe our "lessons learned" have improved our support and we will continue to refine our processes, as we provide vital care to our Marines and their families.

Notification of an Injury

When a Marine is injured, the parent command prepares and submits a Personnel Casualty Report to Headquarters Marine Corps. Next, for expediency, the rear command telephonically notifies the primary next of kin for cases involving seriously ill or injured casualties. A CACO may be assigned to the next of kin of severely injured/ill Marines. This generally occurs in cases where the Marine is not expected to survive. CACOs are resident to the location of the family. If the next of kin travel to the area where the Marine is hospitalized, an additional CACO is assigned to ensure they are supported during their visit. If the Marine dies, the CACO is in place to assist the family with all necessary actions.

If the Marine is not seriously injured, notification is generally not required unless the Marine requests family contact. The Marine's unit then provides updates to the family. The family is provided telephone numbers to the unit point of contact for additional information, as required.

Invitational Travel Orders (ITOs)

When deemed appropriate by the attending physician, the Marine Corps provides ITOs for three eligible family members to travel to the bedside of serious medical emergencies. We thank you for the new authority in the Fiscal Year 2005 National Defense Authorization Act which allowed us to increase eligible family members from two to three to travel to the bedside of an injured service member. The Headquarters Marine Corps Casualty Section assists families with all travel arrangements. ITOs are normally accomplished in as little time as a few hours. Typically, ITOs are for a 21-day visitation period. If an extension is needed, the Patient Administration Team at the hospital immediately requests an extension based on the call of the attending physician. A request for an extension can be made telephonically or through a written memorandum. It is important to emphasize that there is no administrative requirement or burden placed on the family regarding the ITO process.

Injured/Ill Patient Tracking

Following Operation IRAQI FREEDOM I, we identified the need for improved tracking of injured Marines to ensure the Marine's command and Headquarters Marine Corps were informed of status changes. In March of 2004, we launched a new web-based Injured/Ill Patient Tracking System (IIPT) that is linked to the Marine Corps Casualty database. Marines and Marine Commands around the world use this application to track the status and whereabouts of injured and ill Marines. Under the system, patient records are entered into the IIPT website by Marines assigned to Patient Administration Teams (discussed in greater detail below), located at all Medical Treatment Facilities. The IIPT tracks the Marine from the initial entry points to major CONUS Medical Treatment Facilities, such as the National Naval Medical Center (Bethesda). The IIPT website provides next of kin notification information, current progress

reports from all major points of treatment and reliable movement and destination data. This enables commanders to respond effectively to family members who have questions about their Marine and provide effective support to the patient. Since its inception nearly a year ago, the website has averaged over 2,000 hits per month and to date over 2,700 patient records have been added to the system.

Patient Administration Teams

Patient Administration Teams (PATs) are constituted with command assigned personnel and located at major military hospitals. These teams enter the most up-to-date general treatment information and travel plans on injured Marines into a common database tracking system. At the National Naval Medical Center (Bethesda), where the bulk of our Marines go to receive treatment, PATs meet arriving families at the airports, bring the families to their billeting at Bethesda to acquaint them with the Bethesda compound, advise families on the locations of various treatment areas and services available at Bethesda and introduce them to the services offered by the PATs. PATs will also provide transportation to and from the hospital on a daily basis, or to other locations if necessary. If a driver is unavailable at the time a family member needs transportation, cab vouchers are provided. In short, PATS provide any assistance the family may need.

If a Marine requires convalescent leave, the PAT contacts the nearest Marine unit to the destination of the Marine and provides the unit the Marine's home address, prognosis, requirement for follow-on treatment and where that treatment is to be given to assist the acquiring unit in providing continuing assistance.

Beyond Bethesda, we have PATs at the Landstuhl Regional Medical Facility, Brooke Army Medical Center, Walter Reed Army Medical Center, the Naval Hospital at Camp

Pendleton, and the Naval Regional Medical Center San Diego. PATs also coordinate the “warm handoff” to other civilian or VA hospitals that will provide additional support if needed to our wounded Marines.

PATs are also involved with the injured Marines in that they help them with clothing, such as break-away sweat clothing to make dressing and undressing easier, and phone cards. Available to Marines in their hospital rooms are items such as televisions and DVD players with movies available for use, as well as CDs with CD players and headphones. Also available to Marines are room laptop computers with access to the Internet and assistance with access to e-mail accounts so that our injured warriors can correspond with family members who are not with them. For Marines who are in an outpatient status and are staying in the Medical Holding Company Barracks at Bethesda, the PATs assure that the Marine makes their medical appointments and provide additional assistance as necessary.

National Naval Medical Center (NNMC)

As an assist to the Marine Corps and our families, the NNMC Marine Corps Liaison Office is available 24 hours a day and can assist family members who have questions or concerns and can help arrange billeting at the Navy Lodge, Fisher House, or at local hotels. The Liaison Office has a duty driver that is available to shuttle family members from the airport. These services are available to family members with or without ITOs.

Benevolent Organizations

Injured or ill Marines are **strongly** supported by various benevolent organizations. Such organizations include: the Navy/Marine Corps Relief Society, the Marine Corps Law Enforcement Foundation, the Fisher Foundation, the Injured Marine Semper Fi Fund, and the Intrepid Foundation. For those family members who are not eligible for ITOs, the Fisher House

Foundation has partnered with “Operation Hero Miles” to provide free round-trip airline tickets to permit qualifying family members and close friends to visit military centers. We will continue to foster relationships with these organizations and work toward our common goal of providing and caring for injured Marines and their families within legal bounds.

Support for Families of Military Personnel in Non-DoD Medical Facilities

Marines being transferred to a non-DoD medical facility fall under the cognizance of the closest Marine Corps unit. Once it is known that a Marine will be transferred to a non-DoD facility, PAT personnel at the Marines’ current location call the staff at the new hospital and the Marine unit that will be assuming liaison responsibility. This warm hand-off is coordinated to ensure a smooth transfer of both the Marine and family. If required, transportation and per diem benefits are provided for family members accompanying the Marine.

Beyond the assistance described above for our support of Marines and families during medical treatment and recovery. Marine Corps Community Services also provides many multi-faceted services involving various types of support for the families of our services members, from counseling to childcare to financial management. We continue to stand ready to help families with the challenges they face supporting their injured Marines.

Retention of Severely Injured Marines

The Commandant has stated that those severely injured Marines who desire to remain on active duty will be afforded every opportunity to do so as long as they can be retrained in any Military Occupational Specialty (MOS) where they are able to perform.

Marine For Life – Injured Support.

Building on and leveraging the organizational network and strengths of our previously established Marine for Life Program, we are currently implementing an Injured Support Program

to assist the disabled after they are discharged. The goal is to ensure that these Marines know that the Corps will always be there for them, and to bridge the often difficult and lengthy gap between the care we in the Marine Corps and Navy provide, and that which the Department of Veterans Affairs assumes. The key is to ensure continuity of support through transition and assistance for however long it might take, to include providing assistance during the gap in entitlements. Planned features of the program include advocacy within the Marine Corps and the Department of the Navy for the disabled and their families, and helping them in dealing with external agencies from which they may receive support. An extremely important part of this will be both pre and post service separation case management, assistance in working with physical evaluation boards, creation of an interactive web site for disability/benefit information, assistance with federal hiring preferences, and improved Department of Veterans Affairs handling of Marine cases. The latter is being effected by the attachment of a liaison officer embedded within the VA headquarters. The Marine for Life Injured Support Program began operations in early January, and it will continually evolve and improve its services. If there is any area that needs continued effort and interest, it is in the long-term help and assistance for our disabled personnel and their families.

Marine Corps Administrative Processing of Combat Injured Marines

When a Marine is injured in combat, the reporting unit creates a Personnel Casualty Report that triggers the tracking process and updates pay entitlements. The casualty trackers provide the commands, administrators, and patient liaison personnel with important information (detach date from the combat zone, join date to each hospital, room and ward number, duty status, etc.) needed to not only know the whereabouts of the Marine but to also run entries into the Marine Corps Total Force System (MCTFS) to update the Marine's pay entitlements.

Soliciting information, rather than waiting for reports allows units to stay on top of the location of their injured Marines (Active and Reserve). Regardless of whether the Marine is detached from their parent command or temporarily assigned elsewhere, the parent command is aware of the duty status and location of their Marine. This applies equally to both active and reserve Marines. The Marine Corps Total Force System allows us to successfully manage pay and administrative issues for the total force.

In conclusion, on behalf of your Marines and their families, I thank this Committee for your continued support during these demanding times. The programs discussed above are maturing and improving. We are **absolutely** committed to our Marines, the Sailors who serve with Marines, and their families. Few in uniform raise their hand and swear a solemn oath to serve and protect this Nation anticipating tremendous long-term financial benefit. However, when faced with severe injuries, they do expect to be provided support, assistance, and institutional commitment. The Marine Corps and the Commandant are just that – committed. For some who've sacrificed in the Global War on Terror the recovery will be long, and for a few it will be forever. We can not, and will not, allow bureaucracy and "systems" be an added burden to them, and we will remain an advocate as they work through their challenges. Once a Marine, Always a Marine.

Again, I thank the Committee for your unwavering support for your Marine Corps and all the Service Members of our great Nation.