

Congress of the United States
Washington, DC 20515

February 17, 2010

The Honorable Eric Shinseki
U.S. Department of Veterans Affairs
810 Vermont Ave NW
Washington, DC 20420-0002

The Honorable Robert Gates
U.S. Department of Defense
1400 Defense Pentagon
Washington DC 20301-1400

Dear Secretary Gates and Secretary Shinseki,

Thank you for your leadership on behalf of our men and women in uniform. As Members of Congress, we take very seriously our responsibility to work with you to assure that our Soldiers, Sailors, Airmen, and Marines receive the care they need to safely carry out their mission.

That is why we wanted to call your attention to a recent article in *The Temple Daily Telegram* ("Mind M.A.S.H.: Fort Hood succeeding in treatment of TBI") documenting the highly successful efforts of the medical staff in treating traumatic brain injuries (TBI) in soldiers deployed as a part of Operation Enduring Freedom and Operation Iraqi Freedom.

If detected early, those suffering from mild to moderate TBIs can recuperate with proper rest, rehabilitation, and avoidance of additional brain trauma. The Department of Defense and the Department of Veterans Affairs are leading the way in providing top quality care to veterans suffering from TBI.

Traumatic Brain Injury has become the signature wound of the Iraq War. According to a landmark 2008 RAND study, about 19% of troops surveyed report a probable TBI during deployment. Since untreated psychological injuries can lead to homelessness, unemployment and even suicide among veterans, we feel that proper detection and treatment of TBI is a top priority.

However, we are concerned with reports of TBI going undiagnosed during and after deployment. The Defense and Veterans Brain Injury Center (DVBIC) has mandated that all servicemembers exposed to a blast be administered the Military Acute Concussion Evaluation (MACE) within 3 days of the exposure. The MACE is designed to test for TBI in a military setting.

According to the Army's Mental Health Advisory Team, less than half of the 11.2% of soldiers who met the screening criteria for mild TBI were evaluated for a concussion. The Iraq and Afghanistan Veterans of America has repeatedly expressed concern to us that incidences of TBI are falling through the cracks. It is likely that full implementation of the DVBIC mandate would catch many more of these walking-wounded servicemembers and ensure that they are promptly put on a course toward

treatment and recovery. Unfortunately, data on the frequency with which MACE is implemented is unavailable, there appears to be no central reporting of MACE data, and there is an overall absence of visibility on the program itself.

We respectfully request that your Departments provide a public report detailing the frequency with which the MACE is implemented in response to head and neck injuries, and continue to make this data available on an ongoing basis.

Catching these invisible wounds is a crucial step in ensuring our servicemembers are put on the path to the successful, highly effective treatment currently available. The men and women who serve in our military deserve nothing less than an absolute guarantee that they will receive proper screening and treatment for any and all injuries they may have suffered on behalf of our country. We thank you for your continued work towards these goals, and eagerly await your response.

Sincerely,



Gary C. Peters
MEMBER OF CONGRESS



Frank A. LoBiondo
MEMBER OF CONGRESS



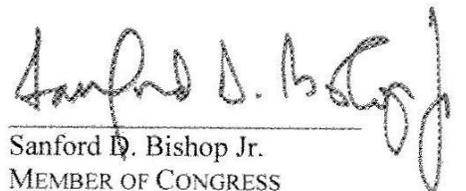
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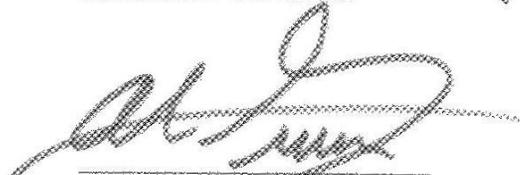
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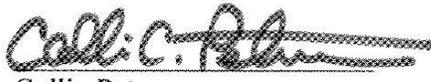
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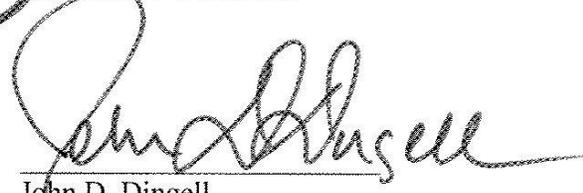

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