



Global Patient Movement Requirements Center (GPMRC)






At the end of this session the participants should understand the Global Patient Movement Requirements Center (GPMRC) roles and responsibilities during contingencies.



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Global Patient Movement Requirements Center (GPMRC)






Overview

- *Guidance*
- *Alert Notifications*
- *Regulating*
- *Throughput Calculations*

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Global Patient Movement Requirements Center (GPMRC)

Guidance

- *Public Law 97-174, Section 2 (b)*
- *DoDD 6010.22 - National Disaster Medical System (Jan 03)*
- *DoDD 6000.12 - Health Services Operations and Readiness (Jan 98)*
- *DoDI 6000.11 - Patient Movement (Sep 98)*
- *AFJI 41-315 - Regulating to and within the CONUS*
- *Joint Pub 4-02 - Health Service Support (Oct 06)*
- *VA-DoD Memorandum of Agreement (Nov 06)*

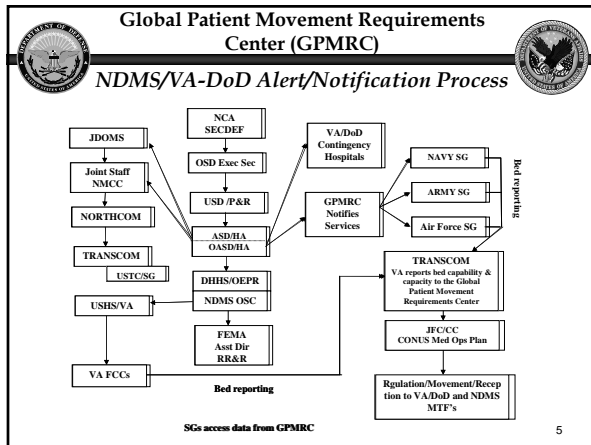
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Global Patient Movement Requirements Center (GPMRC)

DoDD 6010.22 Mission Statement

- *Activate the NDMS in time of war or national emergency involving armed conflict when the DoD and the VA bed capability is insufficient to provide adequate treatment for military casualties.*
- *The Assistant Secretary of Defense for Health Affairs (ASD(HA)) shall activate NDMS Federal Coordinating Centers (FCCs) with sufficient civilian hospital beds to support a military conflict when casualties exceed the combined VA-DoD Contingency Hospital System.*
- *Deactivation of the NDMS system will occur when projected casualties may be supported by VA-DoD facilities alone; the ASD(HA) shall deactivate the NDMS FCC/civilian in-patient support.*

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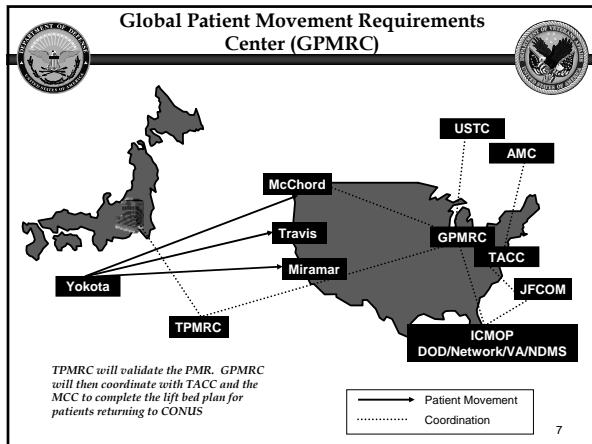


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JP 4-02 Health Service Support 31 Oct 06

The operational environment during major operations and campaigns may present lethal threats requiring the evacuation of casualties to highly developed medical capabilities in the JOA and locations outside the theater of operations for advanced medical services and rehabilitative care. The decreased medical footprint and the increased PM requirements demand a more interdependent medical community, improved interagency and multinational partnerships, and developing joint solutions.

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- ### Global Patient Movement Requirements Center (GPMRC)
- Regulating: VA-DoD MOU '06 / AFJI 41-315*
- *Bed Reporting (Quarterly to Daily)*
 - *VA-DoD must ensure compliance*
 - *Reports updated in TRAC2ES*
 - *Closest MTF (Capability and Capacity)*
 - *5 "Contingency Med Spec Codes"*
 - *CC - Critical Care*
 - *MM/SS - Medical/Surgical*
 - *SBN - Burn*
 - *MP - Psychiatric*
 - *MC - Pediatrics*
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- ### Global Patient Movement Requirements Center (GPMRC)
- Regulating: DoDD 6000.12,
DoDI 6000.11/AFJI 41-315*
- *Deliverables to PRCs:*
 - *Mission manifest information with times and patient loads*
 - *PRC will pass information to individual facilities*
 - *Patient clinical and administrative data*
 - *Depth of information dependent on availability of data*
 - *May be limited due to nature of contingency*
 - *Regulate patients, provide "ITV" for those transported on DoD owned/controlled assets from Aerial Port of Embarkation/Debarcation (APOE/D)*
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Regulating: DoDI 6000.11/AFI 11-2AE Series

- *Non-Medical Attendants (NMAs)*
 - *One able bodied adult /immediate family*
 - *NMAs may be limited due to contingency*
 - *Critical Patients (Life threatening)*
 - *Pediatric Patients*
 - *Burn Patients*
- *Authorized Animals on AE Platforms*
 - *Military Working Dogs*
 - *Seeing Eye Dogs*

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**Global Patient Movement Requirements
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"Throughput" Calculations: (AFJI 41-315)

- *Current Hospital Bed Census/Discharge Plan*
 - *Supporting Facilities MOU/MOAs*
 - *Hospitals (DoD, VA and NGO)*
 - *APODs (Airports/Airfields)*
 - *Management and Labor*
- *Transportation Assets*
 - *Organic vs. Contracted*
 - *Vehicle capability and capacity*
 - *Crew qualifications*
 - *Transit time from PRC to VA/DoD MTF*
 - *Vehicle Maintenance schedules*

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**Global Patient Movement Requirements
Center (GPMRC)**

Summary

- *Guidance*
- *Alert Notifications*
- *Regulating*
- *Throughput Calculations*

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