



EMORY
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MEDICINE

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The Honorable S. Ward Casscells, MD
Assistant Secretary of Defense for Health Affairs
1200 Defense Pentagon
Rm 3D886
Washington, DC 20301

Dear Dr. Secretary:

In April 2005, I had the great honor to be selected by Secretary Rumsfeld to participate in the DoD's Joint Civilian Orientation Conference #69. That week remains one of the most incredible experiences of my life. While I have many fond memories of the various places we visited, the highlight remains the opportunity to meet countless brave and patriotic individuals who have volunteered to serve the United States of America in its armed forces.

I currently serve as an Associate Professor of Surgery at Emory University in Atlanta, Ga. My practice, based entirely at Grady Memorial Hospital, includes general and trauma surgery and surgical critical care. Prior to attending medical school, I worked as an Emergency Medical Technician-Paramedic, and still maintain involvement in Emergency Medical Services (EMS) on a local, regional and national level. I have recently been appointed by Secretary Peters to serve on the inaugural National EMS Advisory Council for the Department of Transportation. Last year I was appointed to Chair the Emergency Services / Prehospital Subcommittee of the American College of Surgeons Committee on Trauma (ACS-COT), where I also serve on the Executive Committee. Since 1996 I have served as an Associate Medical Director for the PreHospital Trauma Life Support (PHTLS) program of the National Association of EMTs (NAEMT), and have co-edited both the 5th and 6th editions of the PHTLS textbook. As you may be aware, PHTLS comprises the only prehospital trauma care standards that have been documented to increase survival rates of trauma victims.

I am writing to offer my congratulations for the recent dramatic advances in prehospital trauma care delivered by the U.S. military. Multiple recent publications have shown that Tactical Combat Casualty Care (TCCC) is saving lives on the battlefield. In the present conflict, U.S. military medicine has achieved the highest casualty survival rate ever in our country's history, and a recent article (senior authors HR Champion, and JB Holcomb), credits TCCC as being a major factor contributing to this success.[1]



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Furthermore, there has been excellent cooperation between ACS-COT/NAEMT PHTLS program in the civilian sector and the Tactical Combat Casualty Care program of the military. The Committee on Tactical Combat Casualty Care (CoTCCC) is a group primarily comprised of physicians and medics from all branches of the U.S. military, but also includes a few civilian trauma surgeons as members. The CoTCCC has developed the TCCC guidelines that are currently used by all of the services in the U.S. military. These TCCC guidelines are published in the PHTLS military textbook and are the only set of battlefield trauma care guidelines that carry the dual endorsement of both the ACS-COT and the NAEMT.

Through the efforts of a working group composed of individuals from the organizations noted above, a nationally recognized course in TCCC has been developed that will carry the endorsement of the CoTCCC, PHTLS, NAEMT and ACS-COT. **I urge you to consider recognizing this course as the new standard for DoD combat medical personnel preparing for the daunting task of caring for our wounded warriors on the battlefield, just as ATLS is recognized as the standard for hospital-based trauma care.**

I remain available to discuss this matter or answer any questions that you may have.

Sincerely yours,



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Cc: Frank Butler, CAPT, MC, USN (Ret), Chairman, Committee on Tactical Combat Casualty Care
Norman E. McSwain, MD, FACS, Medical Director, PHTLS
Will Chapleau, RN, EMT-P, Chairman, PHTLS Executive Committee

1. Kelly JF, Ritenour AE, McLaughlin DF, et al. Injury severity and causes of death from Operation Iraqi Freedom and Operation Enduring Freedom: 2003-2004 versus 2006. *J Trauma* 2008 62(2Suppl):S21-7.