



# *“Military Medical Partnership’s Vital Role in Warrior Health”*



***USAMRMC’s Military Medicine Partnership Days 2015***

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# Themes



- 1. Warrior and Military Family health is deeply personal to all of us.**
- 2. Unprecedented Warrior health protection and battlefield survival have been outcomes of effective partnerships.**
- 3. We want to work with you; get to understand the military medical requirements and focus. Innovation and cutting edge ideas are pipe-dreams without willing partners in academia and industry.**



**“...the long war”**

*GEN John Abizaid*

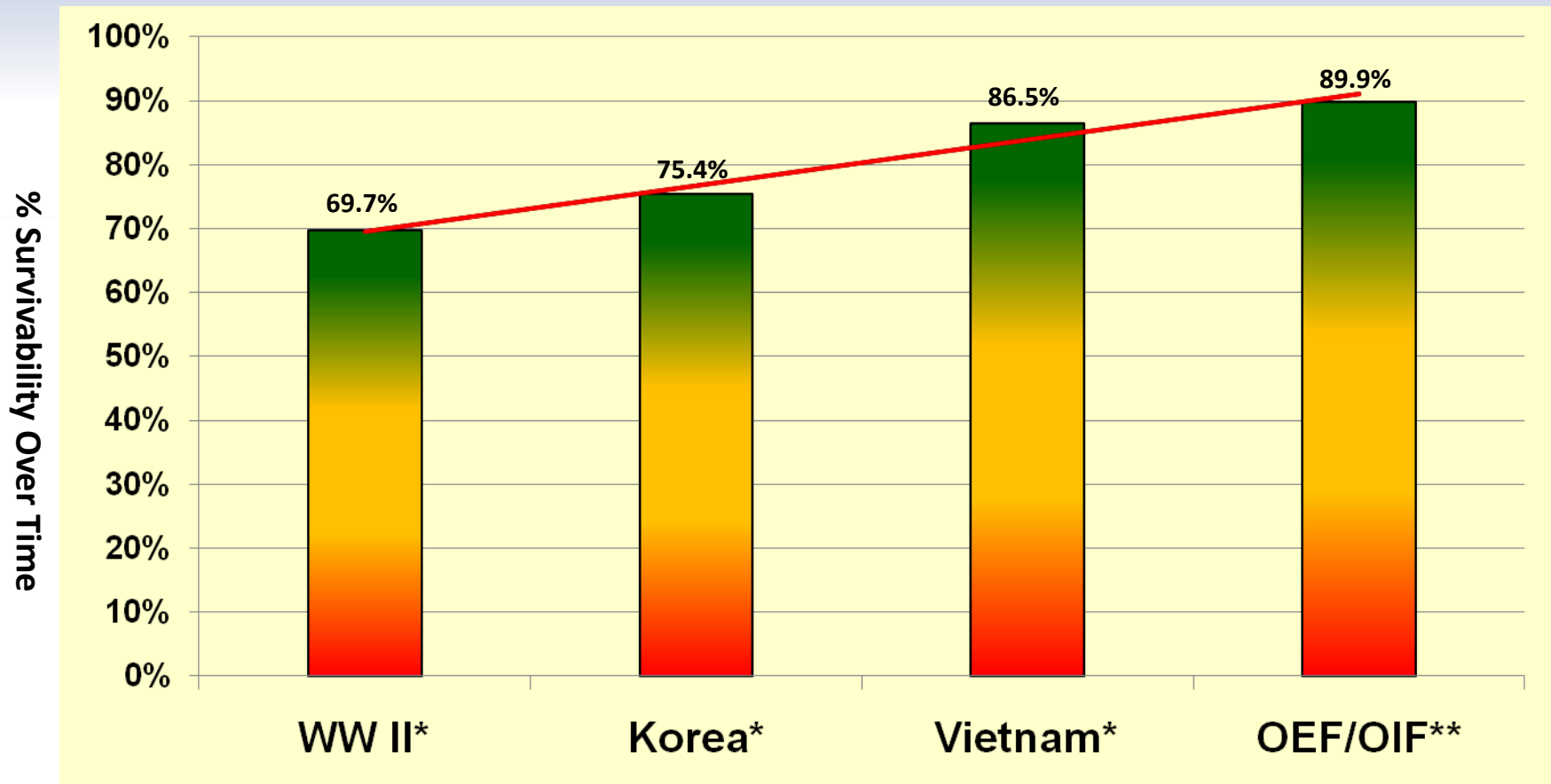


***“Americans should not expect one battle, but a lengthy campaign, unlike any other we have ever seen.”***

***President George W. Bush  
Address to a Joint Session of Congress  
September 20, 2001***



# Improved Survival Over Time



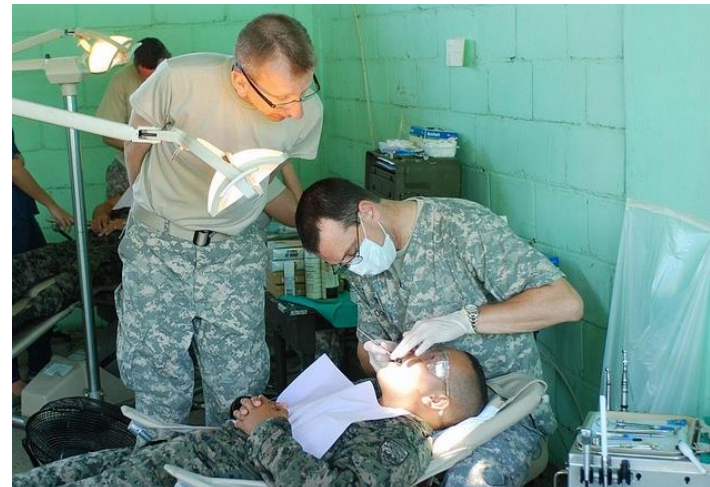
\* May 2008 DoD Data

\*\*3 June 2010 DoD Data

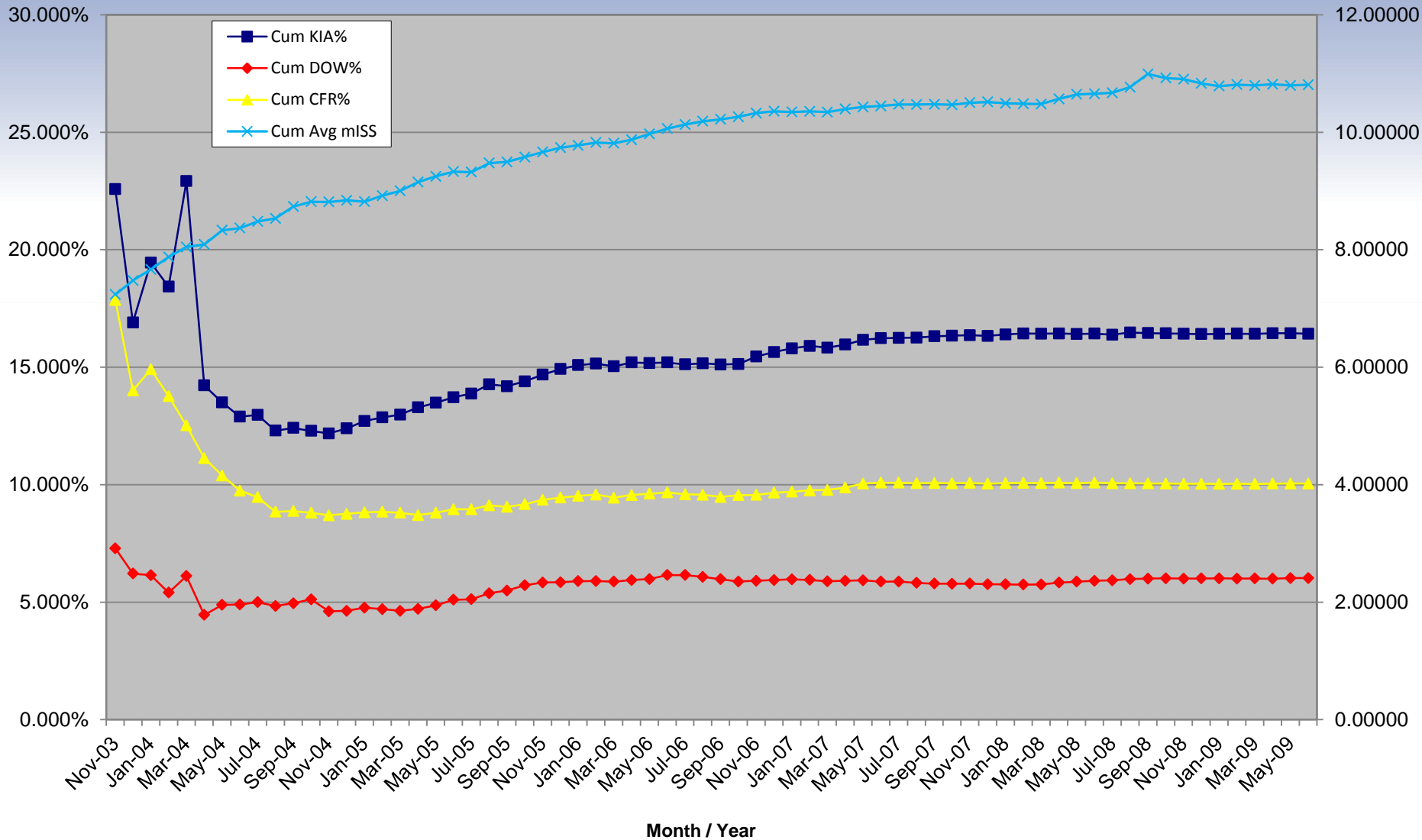
[Wounds Not Mortal / (Battle Deaths + Wounds Not Mortal)] \* 100



# Protecting the Force



# Died of Wounds Rate Remained Stable Despite Steadily Rising Military Injury Severity Scores



Produced by the Joint Theater Trauma Registry

Data Source: JTR v.3 data extract supplemented by data provided by DMDC Statistical Analysis Division & US Pentagon OSD



# Improvements in Warrior Care



- **Improvements on the battlefield**
  - Better trained medics
  - Improved equipment
  - Far forward emergency & surgical care
- **Improvements in in-theatre (tactical) evacuation**
- **Improvements in between-theatre (strategic) evacuation**



# Medics and Corpsmen







# IFAK: Saved Countless Lives & Limbs





# Improved Field Medical Equipment



One of Army's "Top Ten Greatest Inventions of 2004"



HemCon Bandage

**HemCon**



QuikClot

One of Army's "Top Ten Greatest Inventions of 2008"



Combat Gauze

**Z-Medica**

One of Army's "Top Ten Greatest Inventions of 2005"



Combat Application Tourniquet (CAT)

**North American Rescue**



# Evacuation: Tactical and Strategic



# Transformed Strategic Evac System: *One Trauma System...*

*Three Continents...*

*7,000 miles...*





# Portable Infusion Pump for Regional Anesthesia and Pain Control



**ambIT Infusion Pump**



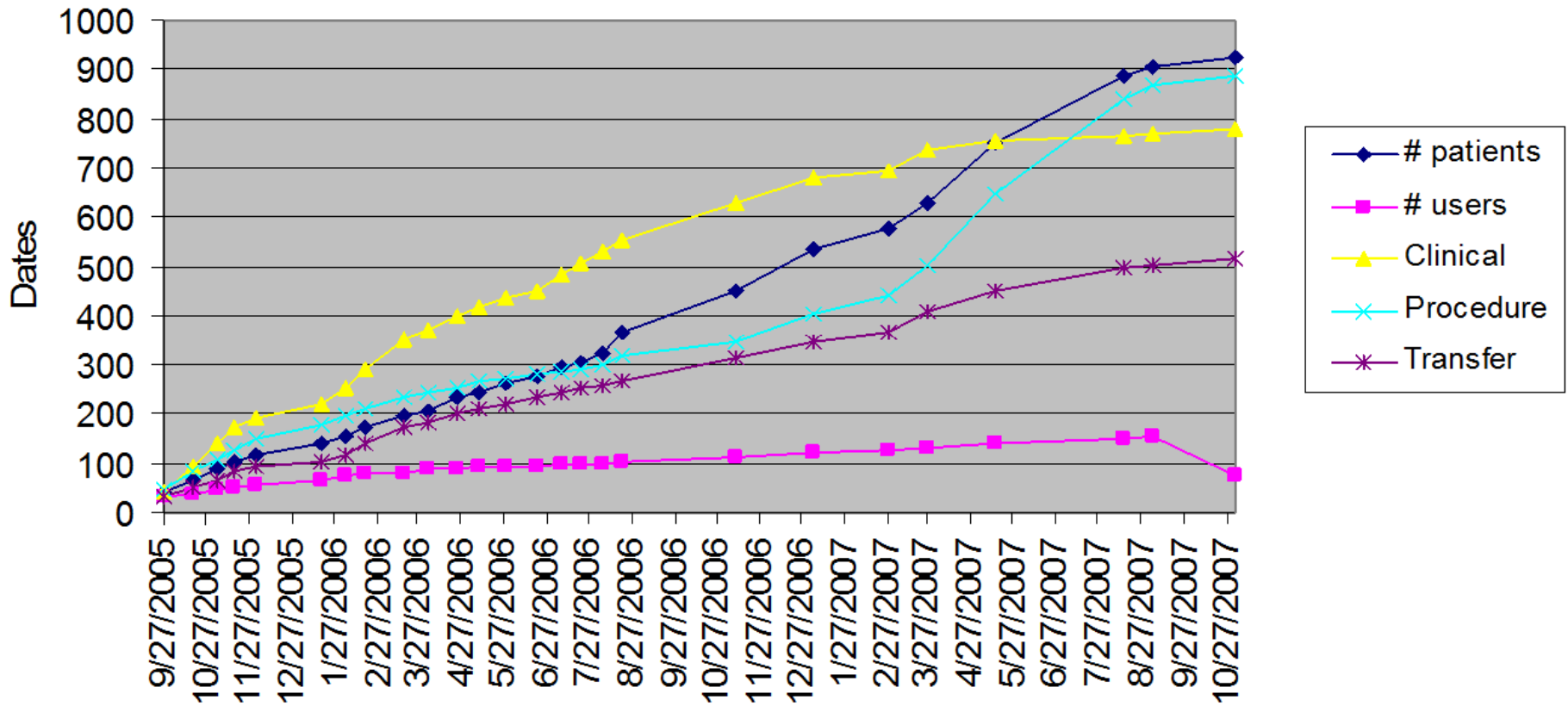
**Army SPC Brian Wilhelm—the first patient treated with regional anesthesia in combat by COL (Dr.) Trip Buckenmaier in 2003**



# Rapid Adoption by Providers and Relief for Patients



RATS patient progression





# “To stay a Soldier...”





# Changes in Combat Wounds



**Better Battle Field Tactics and Personal Protective Equipment  
Results in Greater Survivable Battle Injuries**



**WW II: 1:1 ratio of wounded  
to fatality**

**OIF/OEF: 9:1 ratio of  
wounded to fatality**



	% Body Area	WWII	Korea	Vietnam	OIF/OEF
Head & Neck	12%	21%	21%	16%	29% ↑
Chest	16%	14%	10%	13%	6% ↓
Abdomen	11%	8%	8%	9%	11%
Extremities	61%	58%	60%	61%	54%





# Top 10 Gaps to Restore Function



Rank	Capability Gap
1	Treatment of Extremity Injury
2	Pain Management
3	Rehabilitation of Neuromuscular Injuries
4	Treatment of Craniofacial Injury
5	Treatment of Skin Injury (burns and scars)
6	Visual system Regeneration
7	Orthotics, Prosthetics & Robotics
8	Visual system Rehabilitation
9	Auditory System Regeneration
10	Treatment of TBI associated dysfunction



Blast Injury from Exploding Ordnance



Workshop at the Walter Reed Amputee Center



TBI Suffered in Iraq

**Effective treatment requires rehabilitation strategies to support regenerative medicine technologies**



# AFIRM Partners & Proud Sponsors



DoD, Army, Air Force, VA, NIH





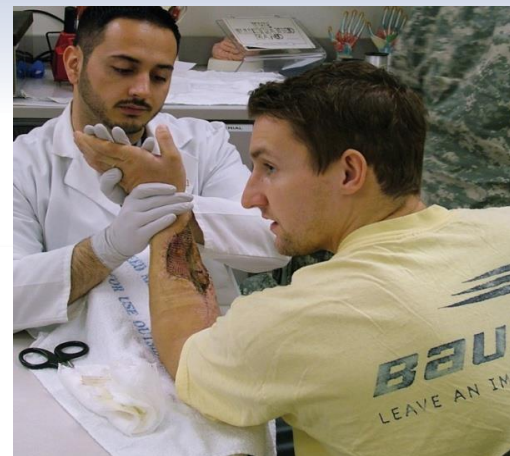
# AFIRM Areas of Emphasis



Craniofacial Reconstruction



Burn Repair



Scarless Healing



Limb and Digit Salvage



Compartment Syndrome



# Industry Opportunities



## US Army Medical Materiel Agency US Army Medical Research and Materiel Command

<https://www.dmsb.mil/VDay/vendorDay.asp>

<http://mrmc-npi.amedd.army.mil/>

**MILITARY HEALTH SYSTEM (MHS)  
VENDOR DAY**

Bringing together Vendors, Products, and the DoD Medical Materiel Community.

**2015 VENDOR DAYS**

- 19 March 2015\*
- 15 April 2015\*
- 13 May 2015\*
- 10 June 2015
- 09 Sept 2015
- 14 Oct 2015
- 17 Nov 2015

(\* clickable link to Registration)

**QUICK LINKS**

- FAQs
- USAMRMC New Products and Ideas (NPI) System
- USAMRMC Website
- Ft. Detrick Office of Small Business Programs
- [Directions to Ft. Detrick's Visitor's Gate \(Old Farm Gate\)](#) \*Add'l directions to the event venue will be provided in your welcome packet
- [Local hotels near Ft. Detrick](#)

**VENDOR DAY IS A COOPERATIVE VENTURE BY THE  
MILITARY SERVICE MEDICAL LOGISTICS AGENCIES  
LOCATED ON FORT DETRICK**

**U.S. ARMY MEDICAL DEPARTMENT  
MEDICAL RESEARCH AND MATERIEL COMMAND**

**USAMRMC NPI | NEW PRODUCTS & IDEAS**

The United States Army Medical Research and Materiel Command's (USAMRMC) mission is to provide medical solutions to protect and sustain the health and performance of the force across the continuum of military operations by (1) conducting research, developing health care solutions and enhancing the delivery of health services for the warfighter; and (2) providing medical logistics support to the Army and to the acquisition of medical materiel.

USAMRMC is seeking medical solutions for the battlefield with a focus on various areas of biomedical research, including military infectious diseases, combat casualty care, military operational medicine, medical chemical and biological defense, and clinical and rehabilitative medicine. To learn more about the Command's mission and interests, go to <http://mrmc.amedd.army.mil>.

**WHAT IS THE PURPOSE OF NPI?**

The intent of the New Products and Ideas (NPI) system is to provide USAMRMC with visibility of new products and ideas that support our mission, either as currently configured or with additional development. The NPI provides a means for our subject matter experts to assess these products and ideas, evaluate their applicability to USAMRMC's mission, and provide feedback to the submitter. It provides the vendor an opportunity to showcase their product or idea without needing to travel to Fort Detrick and without giving anyone an unfair competitive advantage.

Submission to the NPI is not a substitute where other vehicles are more appropriate, such as responding to Requests for Proposals (RFPs), the Broad Agency Announcement (BAA) or Program Announcements (PAs), nor does it take the place of a pre-proposal that may be required by a BAA or PA.

For new products or ideas related to programs, treatments, research, and devices for psychological health and traumatic brain injury, please consider visiting the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) Concept Submission Program (CSP) website at <http://www.dcoe.health.mil/ConceptSubmissionProgram.aspx>.

The goal of the DCoE Concept Submission Program is to gather

**Please Read!**

This website uses SSL encryption on all pages except the Home page. There is an issue with most commercial Web browsers (IE, Firefox, etc.) that might display a certificate security warning when you try to reach an SSL-protected page.

If you get this warning, you are **NOT** at risk on the MRMC-NPI website.

You can either (1) proceed at the certificate warning -- this creates a security exception and prevents the warning from appearing again in that browser for that site, or (2) install DoD root certificates to permanently resolve the issue. More detailed instructions for both options are included on the MRMC page, [Problem with this Website's Security Certificate?](#)

**NPI User Login**

If you are already registered, enter your login information here. Your User ID is typically your email address.

User ID:

Password:

Forgot your password or wish to reset it? [Forgot Password](#)

Click 'Forgot Password' button to generate a new password, which will be emailed to the PI and POC email addresses.

**NPI User Registration**

By registering, you will be allowed to **save** your Submission Form at any time before submitting your information.





**Thank you! Questions?**

