

Study shows Walter Reed's value within Maryland's trauma system

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Credit: United States Army

Whether on the battlefield or within local communities, the minutes following a traumatic injury are crucial in saving lives.

Army 2nd Lt. Matthew McDonough and ret. Army Col. (Dr.) Kyle Remick, from the Uniformed Services University (USU), sought to further close the time gap between injury and [treatment](#) within the National Capital Area with the potential addition of the Walter Reed National Military Medical Center (WRNMMC) to the Maryland trauma system, testing its inclusion with their new study, "Geospatial Assessment to Improve Time to Treatment (GAITT)" published online ahead of print in the *Journal of Surgical Research*.

WRNMMC is an American College of Surgeons-verified Level 2 [trauma center](#) and one of the largest hospitals in the Military Health System (MHS), serving as a long essential resource for [trauma care](#).

Using geographic information system mapping technology and testing at various simulated times, distances from treatment centers, and days, the study aimed to find any potential benefit to including WRNMMC for civilian treatment, hypothesizing that its inclusion would increase timely aid for a large portion of the local Washington, DC, metro area population.

The study found that not only could WRNMMC provide vital aid to its surrounding citizens, especially those within a 15-minute radius of the hospital, but GAITT also emphasized the military's benefits for including this hospital in the tightly controlled trauma system of Maryland.

"Without a small role in civilian trauma care, it is difficult for WRNMMC to maintain readiness of its trauma program," wrote McDonough and Remick. "The inclusion of military hospitals in civilian trauma systems is a national priority dating back to the 2017 National Defense Authorization Act...serving a dual-purpose of aiding local citizens and sustaining readiness of MHS trauma programs and deploying personnel."

Furthermore, GAITT found that "...much of the benefitting population is composed of low income and historically marginalized populations, highlighting a theme in health care disparities occurring in Maryland and across the country."

Ultimately, GAITT reveals that not only could WRNMMC's inclusion to Maryland's [trauma](#) system save lives and offer continuous medical practice for [military personnel](#), but it could also work to fill in gaps of proper health care between marginalized populations and those with adequate community resources.

More information: Matthew M. McDonough et al, Geospatial Assessment to Improve Time to Treatment (GAITT), *Journal of Surgical Research* (2023). [DOI: 10.1016/j.jss.2023.07.025](https://doi.org/10.1016/j.jss.2023.07.025)

Provided by Uniformed Services University of the Health Sciences (USU)

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