



## COALITION SUPPORT FOR THE REDEFINITION OF “TRAUMA” LEGISLATION

As organizations representing the trauma care community, we support a revision to the current definition of “trauma” as contained in 42 U.S.C. section 300d-31(4). Under this statutory definition, only injuries “resulting from the exposure to a mechanical force” are considered “trauma.” In addition to this definition, 42 U.S.C. section 300d-61(h)(3) further confuses the situation by defining “trauma” as “any serious injury that could result in loss of life or in significant disability and that would meet pre-hospital triage criteria for transport to a designated trauma center.”

Not only are these two definitions potentially inconsistent, but the former definition is unduly narrow and the latter vague and subjective. Defining “trauma” as only injuries “resulting from the exposure to mechanical force” obscures the close interrelationship between trauma and burn care that exists today. It also excludes burn centers from participating in federal programs designed to support emergency medical care for those suffering from traumatic injuries or to compete for federal research support targeting trauma.

A serious burn injury is commonly considered a “trauma” and burn centers work closely with and sometimes are considered part of a hospital’s trauma department. Burn centers participate in state trauma systems and like level I and level II trauma centers are subject to verification by the American College of Surgeons, as well as the American Burn Association.

The danger of mass casualties resulting from burns is real as events such as 9/11 and the Rhode Island nightclub fire demonstrated. We need to strengthen the burn care infrastructure in this country and ensure that burn and trauma care are closely integrated. As a practical matter, such integration and cooperation is already taking place, but modernizing and providing consistency to the statutory definitions of trauma to include burn injuries would remove an artificial obstacle to such collaboration and foster a more efficient and responsive emergency medical care system.

We strongly support H.R. 3548, the Improving Trauma Care Act of 2013, modernizing the legal definition of “trauma” to include burn injuries and recommend that Congress also replace the other subjective statutory definition of “trauma” with the same updated definition set forth in H.R. 3548.

Sincerely,

The American Burn Association

The American College of Surgeons

The American Association for the Surgery of Trauma

The American Trauma Society

The American College of Emergency Physicians

Trauma Center Association of America

America’s Essential Hospitals