

INFORMATION PAPER

Department of Defense/Department of Veterans Affairs (DOD/VA) Post-Deployment Health Evaluation and Management Clinical Practice Guideline

KEY POINTS:

- In early 1999, the ASD (HA) and the Under Secretary for Health (VA) initiated development of a Post-Deployment Health Evaluation and Management (PDH) Clinical Practice Guideline (CPG) for evaluation of armed forces personnel and veterans returning from deployment. The established objectives for this initiative were:
 - Achieve satisfaction & positive attitudes regarding post-deployment medical care
 - Identify and support decision-making for elements of care essential to all post-deployment evaluations
 - Support patient education and communication
 - Optimize data collection
 - Prevention in subsequent deployments
 - Provider education
- PDH CPG development activities finished with a pilot test of the PDH CPG implementation at three sites (one from each Service) within the DoD in early 2001. The pilot test was conducted with the assistance of MEDCOM Quality Management and the RAND Corporation and was preceded by PDH CPG metric measurement and tool development activities. RAND conducted field demonstrations to test and improve methods for effectively implementing the post-deployment evaluation guideline within the DoD, including evaluation of the effects of guideline introduction on measurable service delivery activity and outcomes. Working with the process evaluation findings from the demonstration, RAND developed recommendations for effective system-wide implementation of the PDH CPG.
- PDH metrics were developed. The National Quality Management Program Scientific Advisory Panel reviewed proposed metrics and prioritized their implementation during FY02.
- Toolkit development for the PDH CPG was completed. Key items within the tool kit include clinical tools and linked resources—particularly the Post Deployment Health web site <http://www.pdhealth.mil> maintained by the DoD Deployment Health Clinical Center (DHCC) at Walter Reed—which will support the use of the guideline by primary care providers throughout the DoD.
- The PDH CPG will be implemented system-wide on 31 January 2002. A DoD/VA-wide satellite broadcast on 30 January 2002 will kick off implementation. Successful system-wide implementation will allow transition from current Comprehensive Clinical Evaluation Program (CCEP) to the PDH CPG.

BACKGROUND:

- In response to potential health concerns among Gulf War veterans, the Department of Veterans Health Affairs (VHA) initiated the Gulf War Health Examination Registry (PGR) on November 4, 1992.
- The Department of Defense (DoD) initiated a similar program, the Comprehensive Clinical Evaluation Program (CCEP), on June 7, 1994. The CCEP expanded upon routine medical care of Gulf War veterans and provided a more systematic evaluation strategy modeled after the VHA PGR.

- The Institute of Medicine (IOM) conducted a review of DoD and VA post-Gulf War health initiatives in 1998. The IOM emphasized the need to focus care at the primary care level, both to enhance the continuity of care and to foster the establishment of an ongoing therapeutic relationship.
- Rather than naming a special deployment-specific registry, the IOM concluded that veterans should receive evaluation and care as needed, with evaluation, follow-up, and patient management focused in the primary care setting, using to the extent possible, evidenced-based clinical practice guidelines. The IOM's recommendations serve as the basis for the *Clinical Practice Guideline for Post-Deployment Health Evaluation and Management* and other supporting management CPGs.
- Upon receiving the IOM recommendations, the VA and DoD convened a group of experts to review the recommendations and develop a plan for implementation. The consensus of the group was to pursue development of an evidence-based CPG to assist health care providers (in the primary care setting) in screening and evaluating service member health concerns post-deployment, and to develop specific treatment CPGs for those conditions recognized as most important.
- To develop and implement the Post-Deployment Health (PDH) Evaluation and Management guideline, HA sought assistance from the AMEDD's CPG project contained within the Quality Management (QM) Directorate at the Army Medical Command (MEDCOM). MEDCOM QM had experience in guideline development through its work with the VA in developing CPGs under the direction of the DoD/VA CPG Working Group and had experience in CPG implementation through its work with the RAND Corporation in developing a model for CPG implementation in the AMEDD. HA has fully funded the CPG development and implementation initiatives that the AMEDD has facilitated.
- PDH guideline development commenced in December of 1999 with clinical experts from the VA, Navy, Air Force, Army and HA. Lieutenant Colonel Charles Engel, Chief of the Deployment Health Clinical Center (DHCC), Walter Reed Army Medical Center, is the DoD champion of the PDH guideline. The guideline provides a structure allowing primary care providers to evaluate and manage patients with deployment related health concerns. The guideline also applies to individuals who were not deployed, but relate their concerns to a deployment; for example, family members of recently deployed personnel.
- The expert panel involved in the development of the PDH CPG recommended that additional guidelines in the areas of chronic fatigue syndrome (CFS) and fibromyalgia (FM) be developed to assist in the evaluation, assessment and treatment of the medically unexplained physical symptom (MUPS) complexes that are often seen post-deployment. CFS and FM CPG development was initiated in July of 2000 and continues. Additionally, the panel recommended development of a Post-Traumatic Stress Disorder (PTSD) guideline. The DoD/VA CPG Working Group scheduled the PTSD guideline for development in 2001. The VA is funding the development of the CFS, FM and PTSD guidelines. Other related guidelines are anticipated in following years.

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