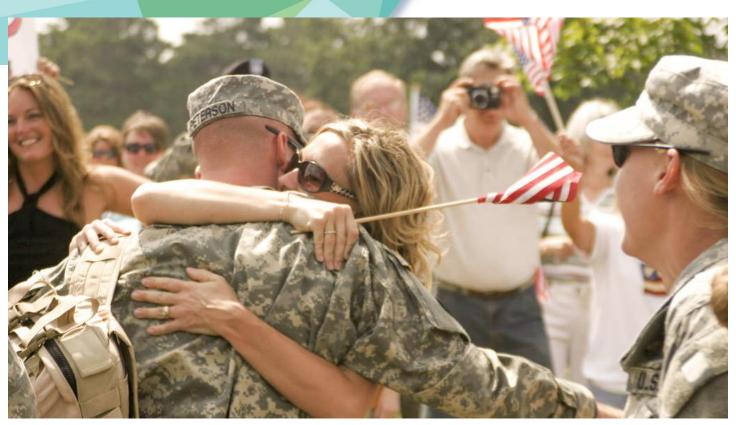


## Plan to Help Our Wounded Warriors

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"Community in Need"
(Our Troops and their Families are the Nation's Most Precious Asset)



The **Problem** is that there are over 150,000 returning soldiers diagnosed with Post-Traumatic Stress Disorder (PTSD) and less than half of them are able to receive needed treatment (NY Times and other sources). Across the US Department of Veterans Affairs (VA)/ Department of Defense (DoD) there is a commitment to care and money for resources, but this particular cohort continues to be the biggest "**Community in Need**" due to health disparities from the shortage of on-demand physicians, researchers and health workers. Contributing to this inadequacy is the fact that needed information at point of care is often not available, the process is fragmented and the turnover for doctors is at a much higher frequency due to our country's participation in multiple wars.

Our proposed **Solution** is to develop a care process and an approach that achieves the following:

- 1. Provides fast and accurate personalized attention to the soldiers
- Provides a compassionate and collaborative environment among the healthcare professionals and support workers on a sustainable basis to help soldiers readjust post combat
- 3. Develops tailored and targeted treatment for every soldier with all the necessary information at point of care
- 4. Assures a streamlined care process which overall provides highest patient safety, drug efficacy and highest quality therapy
- 5. Integrates VA/DOD with the local Healthcare systems and community doctors for increased collaboration and continuity of care
- 6. Develops or integrates informatics systems that ensures the best information integrity at point of care through mobile devices providing evidence based outcomes for patients
- 7. Utilizes simulator technology both as prevention and in treatment to mimic precombat and post-combat environment that has proven results in faster recovery
- 8. Utilizes social networks, alternative and complementary therapies



The Information System should contain patient data on the environment, including location and settings; social, cultural and religion; lifestyle and behavior; clinical, medical and pharmaceutical; and genetic characterization. Building an individualized database for each soldier through Personal Health Record (PHR)/ Electronic Health Record (EHR) integration and delivering this through mobile devices would allow doctors to deliver the best integrated, comprehensive and continuity of care with a focus on prevention, productivity and performance. This individual health solution data collectively will provide basis for epidemiology and other research and analytics will help the community and broader population.

This is an urgent situation and needs immediate action. This is an opportunity for a demonstration project for applying personalized medicine in the community hospitals, where community doctors can act as extension for VA/DOD. This will present a tailored treatment regime and sustainable continuity of care while remaining cost effective for our soldiers who deserve the very best available.

A four to five projects in different community settings will provide faster results and basis for long term solution.