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May 1, 2007

The Honorable David M. Walker
Comptroller General
Government Accountability Office (GAO)
441 G Street, NW Room 7125
Washington DC 20548

Dear Mr. Walker:

We are writing in regard to a recent request, submitted by nine of our colleagues, for the Government Accountability Office to undertake a review of Department of Defense (DOD) screenings, diagnoses, referrals and treatment of service members who may have Post Traumatic Stress Disorder (PTSD) and other mental health conditions related to their service in Iraq and Afghanistan. We ask that the scope of the inquiry be broadened to provide recommendations for legislation or administrative action to improve DOD mental health care and to capitalize on existing 'best-practices' that you may discover in your investigation.

The treatment of PTSD, traumatic brain injuries (TBI), and mental health conditions among service members and veterans remains one of the most difficult challenges facing our Armed Services, the Department of Veterans Affairs (VA), and our nation as a whole. The conflicts in which we are currently engaged are resulting in injuries that require our medical professionals in the Department of Defense (DOD) and the VA to constantly reevaluate and adjust their procedures and policies for care. We are committed, as are all our Senate colleagues, to providing the resources and tools these medical professionals need to provide the best possible care for our wounded warriors.

Because the challenges of treating PTSD, TBIs, and mental health conditions cut across all services and military installations, we strongly urge the GAO to focus its investigation on all DOD departments. Focusing the investigation solely on a single installation, such as Fort Carson, may result in the faulty perception that these challenges are confined to one installation.

In addition to examining, system-wide, the DOD's screenings, diagnoses, referrals, and treatment of service members for PTSD and mental health issues, as requested by our colleagues, we ask that the scope of the inquiry be expanded to assess ongoing best practices for mental health or brain injury treatment that can be applied DOD-wide through administrative or legislative action. The command staff at Fort Carson, for example, has implemented several key policies which may serve as models for PTSD, TBI, and mental health treatment in the Department of Defense. Fort Carson was among the first Army hospitals in the nation to screen 100% of returning soldiers for TBIs. As a

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result, medical professionals on the post have not only been able to provide improved assessment and treatment—they are completing an unprecedented study of the traumatic brain injuries that are affecting our men and women in uniform. Fort Carson will also soon begin testing a new scanning camera that uses gamma rays and radioisotopes to detect TBIs, marking the first time that the Army will extensively use neuroimaging equipment for TBI detection. If successful, the Department of Defense should provide this screening tool to medical facilities across the services.

In addition to improving screening for brain injuries, the medical staff at Fort Carson is working to reduce the stigma associated with mental health issues, a common barrier to service members seeking and receiving treatment. The medical staff on post has been conducting training sessions with enlisted officers and non-commissioned officers with higher risk platoons to improve their awareness of the signs and symptoms of PTSD, TBIs, and mental health issues, and to make them aware of the tools available to their soldiers. Fort Carson also includes its pre- and post-deployment mental health screenings as part of its routine health screen and conducts its initial mental health screenings, evaluations, counseling, and treatments in its Soldier Readiness Center, rather than at an Army hospital. These efforts reduce the stigma associated with visiting a hospital for a mental health issue.

In conclusion, we request that if the GAO identifies best practices at Fort Carson or elsewhere that should be shared with other DOD healthcare facilities, they be included in its report.

We remain committed to ensuring that the DOD has the tools and resources it needs to provide the healthcare our men and women in uniform have earned. We hope that the GAO investigation recently requested by our colleagues will yield recommendations for policies or legislation that can improve treatment of PTSD, TBIs, and mental health issues across the Department of Defense.

Sincerely,

Ken Salazar

Senator Ken Salazar

Wayne Allard

Senator Wayne Allard