Presentation 14 – Drew Helmer

WRIISC Clinical Program

Prior Conflict Evaluations

Goal

• To provide a comprehensive, multidisciplinary clinical evaluation of veterans with medically unexplained, debilitating deployment-related health problems

Referral Process

- Routed through Environmental Agents Service in VA Central Office
- Require referral from VHA primary care provider
- Home VA Medical Center pays half of travel expense

Screening

- Three exclusion criteria (delay evaluation)
 - Substance abuse (untreated) in past 6 months
 - Unsafe to travel
 - Homeless
- · Review VHA and other medical records
 - Work with referring PCP to complete work up of medically unexplained symptoms

Numbers/Access

- 700,000 US troops deployed to PG
- 80,000 evaluated through VA or DoD registries
- 100 referred to WRIISC through VACO or local template
- 52 evaluated

Demographic Characteristics

- Gender
- Age
- Deployment
- Branch
- Component
- Referred by VACO

Clinical Characteristics

- · Functional Status/Quality of Life
- Symptoms
- Diagnoses
- Disability/service connection

Exposure Concerns

- Reported
- Most common specific-concerns

Follow up/Satisfaction

- Exit interview
- Comprehensive Summary
- 3 week follow up phone call
- 6 month follow up survey

Summary of Experience

- · Multidisciplinary evaluation works
 - Patient feedback
 - $-\operatorname{PCP}$ feedback
 - New diagnoses/treatment recommendations
- Access is a problem
 - "There is no such thing as a war-related illness center."

Future Directions

- Disseminate WRIISC program approach appropriately to VHA PCP's
 - Provider education
 - Patient education
- Improve access for veterans, especially PGW veterans