UNCLE SAM WANTS YOU TO ASK PATIENTS ABOUT MILITARY HISTORY!

RYAN CASARELLA; DHIMITER KONDILI; JAMES STRASSNER; ELIZABETH TERHUNE, RN; LAURA TING; ELIZABETH TOMKINSON, RN; SHANELL VANCE, RN FACULTY ADVISORS: LINDA CRAGIN, DIRECTOR, MASSAHEC NETWORK; TINA RUNYAN, PHD, ABPP CLINICAL ASSOCIATE PROFESSOR; JANET HALE, PHD, RN, FNP

WHO ARE VETERANS?

- VETERANS INCLUDE ANYONE WHO HAS SERVED OR CURRENTLY SERVES IN THE MILITARY, REGARDLESS OF WHETHER HE OR SHE SAW COMBAT.
- BRANCHES OF SERVICE: U.S. ARMY, NAVY, MARINE CORPS, AIR FORCE, COAST GUARD, NATIONAL GUARD, AND RESERVES.
- •TOTAL U.S. VETERAN POPULATION: 22, 328, 000 •MASSACHUSETTS: VETERANS COMPRISE 6.2% OF THE STATE POPULATION.
- •WORCESTER: VETERANS COMPRISE 7% OF THE CITY POPULATION.
 - •10% OF VETERANS ARE FEMALE
 - •70% OF MALE VETERANS ARE >55 YEARS OLD.
 - •THERE ARE 1, 429, 995 ACTIVE MEMBERS, WITH AN ADDITIONAL 884, 880 SERVING IN RESERVE COMPONENT.

VETERANS HEALTH CARE: EQUAL PLAYERS AT THE TABLE

75% OF VETERANS DO NOT RECEIVE THEIR CARE AT THE VA.

VA

CARE

NON-VA

CARE

OCCUPATIONAL

THERAPISTS

NUTRITIONISTS & DIETICIANS

PHYSICIANS, PHYSICIAN ASSISTANTS,

VETERANS SERVE IN MANY

DIFFERENT CAPACITIES

ANY ONE COULD BE A VETERAN,

NEVER MAKE ASSUMPTIONS

VETERANS COMPRISE A
COMPLEX, VULNERABLE
POPULATION WITH MANY
NEEDS EFFECTIVELY. VETERANS
HAVE ACCESS TO PARALLEL HEALTH
SYSTEMS; HOWEVER, CLINICIANS IN

HAVE ACCESS TO PARALLEL HEALTH

NURSE PRACTITIONERS, AND NURSES

SYSTEMS; HOWEVER, CLINICIANS IN

THE PRIVATE SECTOR LACK ACCESS TO PATIENT RECORDS FROM THE VETERANS' AFFAIRS (VA) HEALTH

THE PRIVATE SECTOR LACK ACCESS TO PATIENT RECORDS FROM THE VETERANS' AFFAIRS (VA) HEALTH SYSTEM AND VICE VERSA. INTERPROFESSIONAL COMMUNICATION GAPS, LIKE THESE, IMPEDE EFFECTIVE, TIMELY CARE FOR VETERANS.

REFERENCES:

- GOLUB A., VAZAN P., BENNET A. S., AND LIBERTY, H. J. 2013. UNMET NEED FOR TREATMENT OF SUBSTANCE USE DISORDERS AND SERIOUS PSYCHOLOGICAL
- DISTRESS AMONG VETERANS: A NATIONWIDE ANALYSIS USING THE NSDUH. MILITARY MEDICINE, 178(1): 107-114
- THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION WEBPAGE ON MILITARY FAMILIES (<u>HTTP://www.samhsa.gov/militaryfamilies/</u>)
 THE NATIONAL COALITION FOR HOMELESS VETERANS (<u>HTTP://www.ncv.org</u>)
- US DEPARTMENT OF VETERANS' AFFAIRS (WWW.VA.GOV)

WHY ASK ABOUT VETERAN STATUS

- VETERANS COMPRISE 7% OF THE TOTAL US POPULATION.
- 75% OF VETERANS SEEK CARE IN THE PRIVATE HEALTHCARE SETTING
- VETERANS HAVE UNIQUE MEDICAL NEEDS DUE TO UNIQUE EXPOSURES

HIGH RISK FOR SUICIDE:

- 22 DEATHS EVERY DAY ARE VETERAN SUICIDES.
- 950 VETERANS ATTEMPT SUICIDE EACH MONTH.
- MORE VETERANS DIE FROM SUICIDE THAN SOLDIERS LOST IN COMBAT.
- SUICIDE RATES ARE HIGHEST AMONG THOSE

 NEVER DEPLOYED AND THOSE ONE YEAR POST
 DEPLOYMENT.

ELEVATED RISK FOR SUBSTANCE

ABUSE DISORDERS:

- UNTREATED SUBSTANCE ABUSE AMONG VETERANS MAY BE AS HIGH AS 16%
- ALCOHOL IS THE PRIMARY SUBSTANCE OF ABUSE ACCOUNTING FOR 50.7% OF VETERAN SUBSTANCE ABUSE ADMISSIONS TO THE ER.

HIGH INCIDENCE OF TBI:

- TBI AMONG VETERANS IS MUCH HIGHER THAN AMONG CIVILIANS
- OVER 80% OF VETERAN TBI DID NOT OCCUR IN THE DEPLOYED SETTING.

INCIDENCE OF POST TRAUMATIC STRESS DISORDER:

- VIETNAM VETERANS: 30.9% OF MEN, 26.9% OF WOMEN
- GULF WAR VETERANS: 10.1%OIF/OEF/OND VETERANS: 13.8%

ELEVATED RISK FOR HOMELESSNESS:

- CURRENTLY, OVER 60,000 VETERANS ARE HOMELESS.
- 50% OF HOMELESS VETERANS ARE OVER 50 YEARS OLD AND 41% ARE BETWEEN THE AGES OF 31-50.
- 1.4 MILLION VETERANS ARE CONSIDERED AT RISK FOR HOMELESSNESS.

THEATER SPECIFIC CONDITIONS:

- VIETNAM-ERA VETERANS ARE AT RISK FOR DIABETES, LYMPHOMA, AMONGST OTHER CONDITIONS DUE TO AGENT ORANGE EXPOSURE.
- PROPHYLACTIC PYRIDOSTIGMINE HAS BEEN LINKED TO GULF WAR SYNDROME.
- BURNING OF RUBBER, TRASH, AND FECES IN COMBAT ZONES HAS BEEN LINKED TO RESPIRATORY PROBLEMS.

HOW TO ASK - MILITARY BACKGROUND AS PART OF THE SOCIAL HISTORY

- 1. HAVE YOU EVER BEEN IN THE MILITARY?
 - A. WHAT BRANCH? (ARMY, NAVY, AIR FORCE, MARINES, COAST GUARD, AS WELL AS RESERVES AND NATIONAL GUARD)
 - B) WHAT THEATER? (WW II, VIETNAM, KOREAN WAR, GULF WAR, OEF/OIF/OND)
 - C) WHAT MOS? (I.E. THEIR JOB, OR MILITARY "SPECIALTY")
- 2. ARE YOU ENROLLED IN THE VA?
- 3. IS THERE ANYTHING RELATED TO YOUR SERVICE THAT YOU'D LIKE TO SHARE WITH ME?
- 4. DID YOU SEE COMBAT?
- 5. MANY PEOPLE I KNOW WHO HAVE A MILITARY BACKGROUND HAVE SEEN SOME REALLY TERRIBLE THINGS. I'M WONDERING WHETHER THAT MIGHT BE TRUE FOR YOU TOO?
- . HOW HAVE YOU FOUND THE ADJUSTMENT TO BEING BACK HOME?
- 7. HAS ANYONE IN YOUR FAMILY SERVED IN THE MILITARY?

REMEMBER TO ALSO SAY:
THANK YOU SO MUCH FOR YOUR SERVICE!

IMPORTANT VETERAN RESOURCES:

PTSD SUPPORT:

- NATIONAL CENTER FOR PTSD (WWW.MASS.GOV/VETERANS)
- MAKE THE CONNECTION (WWW.MAKETHECONNECTION.NET/PTSD)
- · HOME BASE PROGRAM (WWW.HOMEBASEPROGRAM.ORG)

HOUSING ASSISTANCE:

- SHARP: STATEWIDE HOUSING ADVOCACY REINTEGRATION PROGRAM (WWW.MASS.GOV/VETERANS)
- NATIONAL CENTER FOR HOMELESS VETERANS (1-877-4AID-VET)
- NEW ENGLAND CENTER FOR HOMELESS VETERANS (WWW.NECHV.ORG)

SUICIDE PREVENTION:

- SAVE: STATEWIDE ADVOCACY FOR VETERANS' EMPOWERMENT (WWW.MASS.GOV/VETERANS)
- · VETERANS CRISIS HOTLINE (1-800-273-8255 EX. 1)

ADVOCACY FOR VETERANS:

- NATIONAL ORGANIZATION OF VETERANS' ADVOCATES (WWW.VETADVOCATES.ORG)
- MASSACHUSETTS VETERANS ADVISOR (WWW.MASSVETSADVISOR.ORG)

KEY POINTS

ASK YOUR PATIENTS ABOUT MILITARY SERVICE:

- VETERANS COMPRISE 6.2% OF THE STATE POPULATION, BUT ROUGHLY 25% OF VETERANS RECEIVE CARE THROUGH THE VA, YOU WILL SEE SOME OF THE REMAINING 75% OF VETERANS IN YOUR PRACTICE.
- IMPORTANT SERVICE RELATED ISSUES TO ADDRESS WITH YOUR VETERAN PATIENT INCLUDING: PTSD, TBI, AND CHRONIC PAIN.
- VETERANS ARE AT HIGH RISK FOR SUBSTANCE ABUSE, HOMELESSNESS, AND SUICIDE – ASK ABOUT THEIR ADJUSTMENT TO CIVILIAN LIFE.
- THERE ARE 22 DEATHS A DAY FROM VETERAN SUICIDE.
- FEW VETERANS HAVE EVER BEEN ASKED ABOUT THEIR MILITARY SERVICE BY THEIR PRIVATE HEALTHCARE PROVIDERS.

ACKNOWLEDGEMENTS:

ADDITIONAL THANKS FOR SHARING THEIR EXPERTISE AND EXPERIENCES WITH THE CLERKSHIP:

• PAUL BRADLEY, SEAN COLLINS, BILL DAVIDSON, ROBIN DAVIDSON, BARRY FELDMAN, BRENT FRENCH,
DAVID FITZGERALD, JANET HALE, STEVEN KESSLER, SARAH LEE, DAN LIBBY, KRISTIN MATTOCKS, BETH
MAZYCK, TINA RUNYON, ELLEN SPARROW, JONATHAN PAOLINO, DAVID SMELSON, AND MIKE SPIROS

STATEWIDE HOMELESSNESS AND REINTEGRATION PROGRAM (SHARP)

STATE ADVOCACY FOR VETERANS' EMPOWERMENT (SAVE)
 SECRETARY COLEMAN NEE, MASSACHUSETTS DEPARTMENT OF VETERANS' SERVICES

SECRETART COLEMAN NEE, MASSACHUSETTS DEPARTMENT OF VETERANS SERVI
 AMERICAN LEGION POSTS, NORTHBOROUGH AND WESTBOROUGH

VETERANS INC., WORCESTER, MASSACHUSETTS, ESPECIALLY DALE PROULX AND JOHN RANDALL

PAT BRUCHMANN, RN, DEPARTMENT OF PUBLIC HEALTH, WORCESTER, MA
 DEPARTMENT OF VETERANS AFFAIRS, EDITH NOURSE ROGERS MEMORIAL HOSPITAL, BEDFORD, MA

DEPARTMENT OF VETERANS AFFAIRS, EDITH NOURSE ROGERS MEMORIAL HOSPITAL, BEDFORD, M
 BEDFORD NODE OF THE VA NATIONAL CENTER FOR HOMELESSNESS AMONG VETERANS
 THE CHELSEA SOLDIER'S HOME, CHELSEA, MA





























