

110TH CONGRESS  
1ST SESSION

# H. R. 3673

To require the Secretary of Defense to establish a National Trauma Institute.

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## IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 26, 2007

Mr. GONZALEZ (for himself and Mr. RODRIGUEZ) introduced the following bill;  
which was referred to the Committee on Armed Services

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## A BILL

To require the Secretary of Defense to establish a National  
Trauma Institute.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “National Trauma In-  
5       stitute Act”.

6       **SEC. 2. FINDINGS.**

7       Congress finds the following:

8               (1) Wars have always generated technological  
9       and medical advances.

10              (2) Trauma is the number one killer of the Na-  
11       tion’s fighting soldiers, having caused over 20,000

1 injuries and over 3500 deaths in the Global War on  
2 Terror.

3 (3) In the United States, civilian trauma is the  
4 leading cause of death from ages 1 to 44 and is re-  
5 sponsible for over 160,000 deaths annually.

6 (4) Each year trauma accounts for 37 million  
7 emergency department visits and 2.6 million hospital  
8 admissions.

9 (5) Trauma is a disease affecting all ages of  
10 people, and the impact of life years lost is 4 times  
11 greater than heart disease or cancer.

12 (6) Injuries in a single year will ultimately cost  
13 the United States \$406 billion, with \$326 billion in  
14 lost productivity and \$80.2 billion in medical costs  
15 (representing approximately 6 percent of total an-  
16 nual health expenditures).

17 (7) By the year 2020, injury will equal or sur-  
18 pass communicable diseases as the number one  
19 world-wide cause of disability-adjusted life years lost.

20 (8) While the mechanisms of injury are dif-  
21 ferent, military and civilian trauma casualties are  
22 treated similarly, thus improvements gained by fo-  
23 cused, relevant trauma research in each group will  
24 benefit both.

1           (9) Despite these alarming facts, within the  
2 context of years of potential life lost, the National  
3 Institutes of Health support ratio for HIV is \$3.51,  
4 for cancer is \$1.65, and for trauma is \$0.10 cents.

5           (10) Despite a mandate to promote research di-  
6 rected toward specific health issues relevant to the  
7 military forces, the Peer Reviewed Medical Research  
8 Program within the Congressionally Directed Med-  
9 ical Research Programs has spent less than a third  
10 of funding on trauma research.

11           (11) Among more than two dozen research in-  
12 stitutes at the National Institutes of Health, none is  
13 devoted to trauma. The National Trauma Institute  
14 (NTI) in San Antonio, Texas, can fill the gap by  
15 setting a comprehensive research agenda to award  
16 grants to the best researchers in the country.

17           (12) By 2011, two NTI partners, Brooke Army  
18 Medical Center and Wilford Hall Medical Center will  
19 combine through the base realignment and closure  
20 process to become the largest military trauma re-  
21 search center in the world.

22           (13) NTI, as a consortium of civilian and De-  
23 partment of Defense centers, is the natural starting  
24 point to translate battlefield innovations to civilians  
25 at home.

1           (14) NTI, as a centralized institute to coordi-  
2           nate a national trauma research agenda, will sub-  
3           stantially reduce the number of injuries and deaths  
4           to the Nation's soldiers on the battlefield and civil-  
5           ians at home.

6 **SEC. 3. ESTABLISHMENT.**

7           (a) ESTABLISHMENT.—The Secretary of Defense  
8           shall establish a National Trauma Institute in San Anto-  
9           nio, Texas.

10          (b) PURPOSES.—The purposes of the Institute shall  
11          be—

12                (1) to develop and implement revolutionary  
13                medical technologies to improve injury prevention  
14                and diagnosis, survival, and quality of life for vic-  
15                tims of trauma and burn injury; and

16                (2) to implement a multidisciplinary, multi-cen-  
17                ter collaborative research effort, including coordina-  
18                tion of trauma research carried out at—

19                        (A) Wilford Hall Medical Center, San An-  
20                        tonio, Texas;

21                        (B) University Hospital, the University of  
22                        Texas Health Science Center, San Antonio,  
23                        Texas; and

24                        (C) Brooke Army Medical Center, San An-  
25                        tonio, Texas.

1           (c) TRAUMA RESEARCH.—The activities of the Insti-  
2 tute shall include research on the following:

3           (1) Injury prevention and education.

4           (2) More effective triage.

5           (3) Resuscitation.

6           (4) Early, effective treatment of compressible  
7 and non-compressible bleeding.

8           (5) Improved burn care.

9           (6) Head injury.

10          (7) Tissue engineering and regenerative medi-  
11 cine.

12          (8) Orthopedics.

13          (9) Improved intensive care unit treatment and  
14 management.

15          (10) Enhanced rehabilitation and recovery.

16          (11) Outcomes.

17 **SEC. 4. AUTHORIZATION OF APPROPRIATIONS.**

18          There is authorized to be appropriated to the Sec-  
19 retary of Defense \$100,000,000 for fiscal year 2009 for  
20 purposes of carrying out the activities of the National  
21 Trauma Institute as described in this Act. Such funds  
22 shall not be available for general administrative expenses  
23 of the Secretary of Defense.

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