



THE ASSISTANT SECRETARY OF DEFENSE

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WASHINGTON, DC 20301-1200**

HEALTH AFFAIRS

JUL - 7 2014

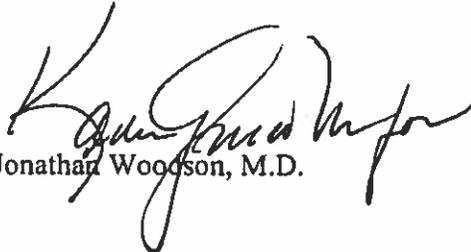
**MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER
AND RESERVE AFFAIRS)
DIRECTOR, JOINT STAFF**

SUBJECT: Treatment of Traumatic Eye Injuries

The Joint Trauma System (JTS) provides the Department of Defense (DoD) with performance data on battlefield treatment. JTS data from 2012 to 2013 demonstrated a 40 percent compliance rate in treating traumatic eye injuries in accordance with DoD ocular trauma treatment guidelines. The JTS Clinical Practice Guidelines, Tactical Combat Casualty Care Guidelines, and the Vision Center of Excellence's recommendations (enclosed) advocate for the use of a rigid eye shield and rapid evacuation to an ophthalmologist when treating traumatic eye injuries. This is the only authorized clinical practice guideline for treating traumatic eye injuries.

There are two major factors contributing to the low compliance rate. First, Service medical doctrine and training are outdated and they instruct the provider to place an eye patch and pressure dressing over the injured eye, in contrast to the current recommendations. Second, Service medical equipment sets and vehicle first aid kits contain eye patches and pressure dressings instead of rigid eye shields for use in the event of a traumatic eye injury.

To prevent additional damage to injured eyes, the Military Services and the Joint Staff should take actions to review and update their doctrine and training to reflect the most current DoD ocular trauma treatment guidelines. The Services should replace the eye patch kit, NSN 6545-00-853-6309 (\$35.00 each), with the rigid eye shield with garter kit, NSN 6515-01-598-1877 (\$2.00 each). Implementation, education, and training costs would be the responsibility of the Military Services. Ms. Elizabeth Fudge is my point of contact for receiving information on plans to implement the current treatment guidelines. She will update me in 60 days from the date of this memorandum. Ms. Fudge may be reached at (703) 681-8295, or at Elizabeth.Fudge@dha.mil.


Jonathan Woodson, M.D.

Enclosure:
As stated

cc:
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force
Medical Officer of the Marine Corps