

## Philadelphia Veterans Affairs Medical Center Update



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The Veterans Administration is the single largest health care system (122 medical facilities) supporting graduate medical education in the United States. It is the second largest funding source for resident training (31,000 resident physicians) after the Centers for Medicare and Medicaid Services. It is affiliated with 107 of the nation's 125 medical schools.

The mission of the Veterans Administration Medical Service is: "To

Care for Him Who Shall Have Borne the Battle". More than two hundred years ago George Washington commented, "The willingness with which our young people are likely to serve in any war, no matter how justified, shall be directly proportional to how they perceive the veterans of earlier wars were treated and appreciated by our nation."

The Philadelphia Veterans Administration Medical Center is a tertiary referral center with more than 135 acute care beds and total yearly operating budget of more than \$326 million dollars.

The University of Pennsylvania Orthopedic rotation at the Philadelphia VAMC allows our PGY2 and PGY5 residents to care for veterans in an intensive general orthopedic practice under the direct supervision of Drs. Bernstein, Bora, Ecker, Esterhai, Garino, Hebela, and Steinberg. Dr. John Kelly should join us this year bringing renewed expertise in complex sports medicine and shoulder surgery. Patients who require care at a level of sophistication that we cannot provide are referred to subspecialists within the University of Pennsylvania Health System at Pennsylvania Hospital or Penn-Presbyterian Medical Center.

In addition to their dedication to direct patient care and resident education, Drs. Bernstein, Esterhai, Garino, Hebela, and Steinberg have each applied for or been awarded research funding through the Veterans Administration competitive grant system. They collaborate actively with intra and extra mural physicians and basic scientists including Drs. Jonathan Black, Jason Burdick, Paul Duchyene, Dawn Elliott, Russell Huffman, Robert Mauck, and Lou Soslowsky.

Mitchell Staska and Bill Shultz, our superb Physician Assistants, continue to provide seamless, exemplary, and tender care from initial patient referral through appropriate triage, outpatient evaluation, scheduling of appropriate testing and consultations, surgery scheduling, and post hospitalization care. They provide for immediate, timely interaction with referring physicians and outside consultants.

We have patient office hours on Mondays, Wednesdays, and Fridays allowing us to provide more than 5000 patient visits each year. New patients are scheduled within thirty days of their primary physician's request for consultation. The Emergency

Room is very busy. We perform surgery three days each week, averaging more than 425 procedures yearly. Almost every year, Orthopedics performs more surgery than any of the other twelve subspecialty surgery services provided at the PVAMC. None of this would be possible without the professional expertise and wisdom of the Vice President for Surgery and Anesthesia, John Wylie, and the nurses, administrative support personnel, and physician staff of the PVAMC.

One of President Obama's initiatives is to implement the Electronic Medical Record (EMR) across all of American health care. The Veterans Administration has been a leader in this regard for more than a decade. The EMR at the PVAMC allows for timely communication and coordination of care between providers and hospital services locally and can retrieve records and images from across the country within moments. It alone has greatly improved the quality of the care that we can provide.

Today, one in tenAmericans is an armed forces veteran. More than 3.6 million have served during the period of time that we have been directly involved in the Middle East. President Ronald Reagan, speaking at Arlington National Cemetery on Veterans Day, November 11, 1985, noted that many Americans think of veterans as old men. "But most of them were boys" when they were wounded or died. He commented that many had given up two lives: the one they were living and the one they would have lived. He concluded: "All we can do is remember."

Many of the veterans for whom we care at the PVAMC commute a long distance from central and northeastern Pennsylvania, southern New Jersey and Delaware. Many have significant co-morbidities such as HCV, HIV, and difficult psycho-social day to day environments. Many have had multiple operations making surgical approaches and wound healing more difficult. Not infrequently they have had a difficult time reintegrating into society after their military service. Providing Philadelphia level, state of the art, complication free, compassionate care requires extra special diligence on the part of all involved.



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