

## **GUIDELINES FOR VOLUNTEER SURGEONS**

Thank you for your interest in participating in the Faces of Honor program sponsored by the American Academy of Facial Plastic and Reconstructive Surgery. With this note, we hope to provide you with the essentials of this program as well as a concise guide to safely and painlessly harness your talent and goodwill to the benefit of our military members and veterans.

### **1. Overview**

The Faces of Honor Program proposes to offer pro bono medical and surgical expertise to veterans who were injured while deployed in support of the war in Iraq or Afghanistan. Our motivation is simply to provide a “thank you” to the brave men and women who have served our country. These men and women have probably already received treatment in a military hospital or facility.

Following their care, some may have been relocated to their home bases while still on active duty, others may have been honorably discharged from active duty and returned to their home state, some may be in the National Guard or reserve, others may be separated from a VA facility and some may simply want an additional caregiver consultation. Even though most wounded veterans have received medical and surgical care through a military, VA or other medical facility, there may be circumstances where additional evaluation and care is requested by certain veterans. We hope that our physician volunteer members can supplement and compliment their care.

### **2. Finding a doctor**

It is expected that most eligible veterans will learn about the Faces of Honor program and self- refer. Once this program becomes more visible, other sources and entities may refer veterans to individual surgeons or even to the central office who then can assist in locating suitable volunteer surgeons. Efforts will be made to ask media to assist in getting the initial word out and the

Academy will try to “partner” with other veteran-friendly organizations to help in publicizing the activation of the Faces of Honor project site. The Academy’s new web site is now available for veterans and others and this includes a new web site link with a national map enabling a veteran to click on a state to find the nearest volunteer surgeon.

The veteran will then contact the doctor’s office to set up a consultation.

### **3. Evaluation**

The purpose of the consultation will be to assist the surgeon in determining if the wounded veteran’s injury has a reasonable chance of improvement following a procedure. Not every volunteer surgeon will be trained in every aspect of facial reconstruction nor is it likely that every veteran will present with a problem that can be improved. Like any physician-patient relationship, each patient will be evaluated on a case-by-case basis. The surgeon will be asked to use his/her best medical and interpersonal judgment about the appropriateness of proceeding with some type of treatment.

A second consultation or the acquisition of additional medical information or records may be necessary before a decision is made. In cases where the severities of the injury exceed the skills of the initial surgeon, it would be helpful to the veteran for the initial surgeon volunteer to try to refer to a second surgeon volunteer who has identified themselves as trained in the appropriate procedure and is located (hopefully) in a fairly regional location.

### **4. Eligibility**

Active duty military service members or veterans who were

injured while deployed to Iraq or Afghanistan and have facial or neck injuries sustained either in combat or non-combat/support activities are our target beneficiaries. These individuals should be able to provide medical documentation of care rendered by the military for their war related injuries. This can include paper work from Landstuhl Regional Medical Center or any other Military or VA facility as well as other documents which will be listed later in this document.

In summary, the eligibility requirements are as follows:

- 1) Veterans of Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF) with honorable discharge (veterans who have served in other regions of the Middle East will be eligible, too)
- 2) Sustained a war related injury (Either in combat or through combat related/support activity)
- 3) Member of the United States Armed Forces (or DOD eligible NATO/coalition forces) either Active Duty, or Active Reserve (activated and deployed in support of OIF or OEF).

## **5. Required Documentation**

The veterans/military service member should be able to produce some or all of the following in order to support their eligibility for this program:

- 1) Military Identification for Active Duty Members or Active Reserve Members
- 2) Form DD 214 if discharged honorably from Active Duty
- 3) Form DD 2527 (Statement of Personal Injury) if available
- 4) Purple Heart Citation where applicable
- 5) Copies of medical treatment record for related injury if available
- 6) Referral letter from referring physician if applicable and available

## **6. Application process**

The veteran or service member will fill and submit our standardized intake form which will identify the member as a potential recipient. This form is available on our website. It will be submitted preferably to the volunteer. We hope that the information provided on our website as well as our able staff will ensure that the veteran/ service member ends up at the doorstep of the appropriate surgeon as our volunteer surgeons have a wide array of capabilities and areas of expertise.

A note about prior medical records: The veteran will be responsible for obtaining his/her own medical records from previous medical facilities where care was delivered. This will greatly help facilitate care from our volunteer surgeons. Ideally veterans will present to the volunteer surgeon with a copy of prior medical records brought to the initial consultation.

The consultation will enable the volunteer surgeon to determine if the wounded veteran's injury has a reasonable chance of improvement from a procedure recommended by the surgeon or to determine if a different surgeon would be a more appropriate.

## **7. Payment Guidelines**

This is a pro bono program. However a veteran may have medical insurance coverage, including government TriCare or other plans, and it is not improper to bill for a legitimate reconstructive procedure or service. Balance billing the veteran would be discouraged, as would be collecting a co-pay or deductible, subject to legalities. (Some billing rules suggest that co-payments and deductibles must be asked for but legally do not have to be collected.) However, when insurance is an option, it does make utilization of a surgical facility and anesthesia service more obtainable.

When surgery requires sedation or general anesthesia,

arrangements should be made for pro bono services from the surgical facility and anesthesia provider so that the veteran does not get billed. If outside laboratory or pharmacy expenses could be in part provided at a reduced rate, this would be desirable but it may be that the veteran would be responsible for fees outside of the surgeon, facility and anesthesia provider fees. Again, if insurance is present, there would be no prohibition to use it. (It would be undesirable for the veteran to undergo a pro bono reconstructive surgery under the Faces of Honor banner, and then later receive an unexpected medical or surgical bill, and even worse for a collection agency to send threatening letters related to the “overdue balance.”)

## **8. Liaison with VA hospital facilities**

Faces of Honor is not in competition with VA medical services nor does it suggest that the care a veteran has received or is receiving is inadequate. We seek to simply assist veterans by providing an additional complementary service as a means of expressing our gratitude to them. Our goal is to work alongside those VA caregivers whenever possible. It is natural to expect that some VA medical facilities will be better equipped to provide reconstructive surgery than some others, and this may be influenced by factors such as caseload, number of reconstructive surgeons on staff and proximity to specialists and ancillary services.

Volunteer surgeons of the Academy are strongly encouraged to communicate with and meet the reconstructive medical and clinical staff of their nearest VA facility, offering their services in a non-competitive manner. Some volunteers will be able to serve on staff at that VA hospital and offer surgery on -site as a member of that VA surgical team. As expected, the specialty services traditionally offered at a VA facility or hospital may include plastic surgery, otolaryngology, ophthalmology, dermatology, psychiatry, neurology and neurosurgery as well as other medial services. It would be hoped that all specialty services would be cooperative in

helping each veteran achieve the best care available.

Other volunteer surgeons will offer their services at their usual office setting.

As background, leaders of the Academy did meet with the Secretary of the VA in fall of 2008 requesting their support. With the new administration in January 2009, and a new Secretary of the VA, communications with that office indicated that the best way of working with the VA would be from the “ground up” rather than “top down”.

## **9. Concomitant medical issues**

Note that the signature injury of the Iraq and Afghanistan wars has been IED blast injuries. These are often associated with neurological sequelae such as traumatic brain injury. One cannot underestimate the psychological stress of these war experiences on our veterans and post-traumatic stress issues and emotional difficulties are among the expected after effects. Although academy volunteer surgeons are not expected to serve as neurologists, internal medicine specialists, psychiatrists or physical therapists, a close relationship with the existing VA facility staff or military treatment facility is vital for re-referral when necessary for these issues. There will likely be circumstances where the surgeon cannot meet the needs or expectations of an individual wounded veteran, and the earlier in the process that this can be identified, the better. Our goal, as in medicine, is to assist the patients and help them get better.

## **10. Follow-up and Record Keeping**

Post operatively; follow-up until healing is complete is desirable, just like with all patients. Appropriate photographs for

documentation is strongly recommended. Ongoing record keeping is important in order for the Academy to track the number of veterans who may access the project, meet with a surgeon, and undergo a procedure or surgery. Assessing the satisfaction of both the surgeon and veteran patient with the Faces of Honor project is important in order to make it better each year.

Volunteer surgeons are encouraged to evaluate the process of referral and the relative success of each veteran encounter. Both positive and less than positive feedback to our central office and chairmen of Faces of Honor committee is encouraged in order for us to learn how to improve this program. We solicit helpful suggestions that will be shared in turn with the committee and board of directors.

### **11. Academy's Role**

The Faces of Honor Program is coordinated by the American Academy of Facial Plastic and Reconstructive Surgery and its affiliated Foundation (together "the Academy"). The Academy's role is to serve as a resource to help find surgeons willing to provide surgery to qualified veterans without a surgical fee to the patient. The Academy does not provide medical or surgical care. Consequently, the Academy does not enter into a physician/patient relationship with anyone. Not all Academy members perform all procedures included in the field of facial plastic and reconstructive surgery. The Academy makes no warranties or representations about the skills of individual physicians or surgeons or their abilities. Inclusion of a surgeon on the list of volunteers for this program does not indicate that the surgeon is qualified to perform the surgery needed. The Academy does not provide medical advice, and no one should rely on the Academy's statements in this document as providing such advice. Patients should rely exclusively on their physicians and surgeons for such advice.

## **12. Conclusion**

Faces of Honor is an opportunity for you to serve your country by taking care of it's heroes of war. Your participation in this program would be greatly appreciated by them and in turn acknowledge their sacrifices for the freedom we all enjoy of living in the United States of America and practicing the art and science of medicine. Please feel free to consult our volunteer handbook on our website for further information or contact our staff if you have further questions.