



INTERNATIONALE AKADEMIE FÜR PATHOLOGIE
DEUTSCHE ABTEILUNG e.V.
INTERNATIONAL ACADEMY OF PATHOLOGY
GERMAN DIVISION INC.

IAP, Deutsche Abt. e.V., Auguststraße 19-29, D-53229 Bonn

Brigadier General Sue Ellen Turner, USAF
Commissioner
Base Closure and Realignment Commission
2521 S. Clark Street, Suite 600
Arlington, VA 22202
U.S.A

BRAC Commission

Präsident

Prof. Dr. med. Dr. h.c. Dietmar Schmidt

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Received

Dear Mrs. Turner:

"The Pentagon's 2005 recommendations for Base Realignment and Closure (BRAC) include the "disestablishment" of the Armed Forces Institute of Pathology, located on the campus of Walter Reed Army Medical Center in Washington, DC. This action would eliminate the consultation and education missions of the AFIP and their unique value to the military, the nation, and ultimately, the world.

In 1976, recognizing the unique value of the AFIP, Congress enacted Public Law 94-361, charging the AFIP with serving both the civilian and military sectors in pathology education, consultation, and research. The AFIP has carried out this mission so vigorously and successfully that today, most people around the world have been touched either directly or indirectly by the Institute's efforts in the diagnosis of rare and emerging diseases and its dissemination of health-related information to the world's physicians. Furthermore, the AFIP's decades-long role as one of the World Health Organization's International Reference Centers has bolstered America's image in the international medical community. Yet despite this extraordinary accomplishment and world service, the DoD is proposing closure of an institution-an Organisation that has likely contributed more to medicine than any other DoD healthcare facility, one that ranks with the world's finest and most prestigious medical institutions.

We suggest that there are alternatives to disestablishing the AFIP, and many compelling reasons to do so. The obvious alternative is to transfer the AFIP from the military to the civilian sector. There is a relevant precedent for such a move; in 1957, the National Library of Medicine splintered from the AFIP and moved to the civilian sector. As a civilian National Institute of Pathology, the AFIP would be even better positioned to serve the entire nation, solving the DoD's dilemma and maintaining the Institute's place at the forefront of pathology, radiology, and laboratory medicine. While the mechanics of such a transfer need further study, the obvious first step is to remove the AFIP from the BRAC proposal, allowing it to continue its vital work and retain critical staff while other options are pursued.

The benefits of preserving the AFIP are obvious. First, military and civilian pathologists around the world routinely consult with the experts at the AFIP, helping to ensure correct diagnosis and proper treatment for their patients. As a result, the AFIP has accumulated the world's largest repositories of rare and complex cases, and its professional staff has developed unmatched expertise and insight into diagnostic criteria and disease prevalence around the world. By training pathologists and radiologists in the United States and around the world, the AFIP is helping to alleviate medical and educational disparities and shortages. Because of its precarious position on the BRAC list, immediate, decisive action to preserve the core functions of the AFIP should be taken (virtual and live courses and Workshops, point-

order to retain the critical mass of expertise necessary to ensure the quality and integrity of their products.

Second, repositioning the Institute within the federal government would not only ensure that its products remain available to the DoD and their contributors around the United States and the world, but would provide greater leverage to expand its capabilities. Alignment with HHS, for example, would enhance opportunities to partner with US academic institutions, especially in underserved areas, reducing disparities in medical education and improving access to first-rate healthcare.

Third, repositioning the AFIP as a National Institute of Pathology would allow it to maintain its current program support for the Department of Veterans Affairs. Each year, the VA sends the AFIP over 13,000 cases for primary diagnosis, consultation, or quality assurance. A reinvigorated AFIP within the civilian sector could expand collaborations with VA medical centers through telepathology and radiology consultation, and participate in clinical trials and other research activities.

Finally, preserving the AFIP as a federal civilian entity would create numerous opportunities to improve healthcare and education for underserved populations in the United States of America and around the world. The AFIP's vast experience and expertise in medical informatics, distance learning, and electronic consultation could be put to use in streamlining national health information technology by implementing electronic medical records, consultation, and medical education. Altogether, the AFIP's significant and growing expertise in managing, mining, and distributing healthcare information would strengthen national efforts to increase access to quality healthcare, expand research on racial, ethnic, and geographic disparities in healthcare, increase the diversity of health professionals, and promote healthcare education to the underserved. Furthermore, preserving and expanding the AFIP's diagnostic support to developing countries staggering under the weight of HIV/AIDS, malaria, and other emerging diseases is a humanitarian and political imperative.

With kind regards,

A handwritten signature in black ink, appearing to read "D. Schmidt". The signature is fluid and cursive, with a large initial "D" and a stylized "Schmidt".

Prof. Dr. Dr. h. c. Dietmar Schmidt

President of the International Academy of Pathology,

German Division Inc.