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Sent: Tuesday, December 08, 2009 2:59 PM
To: Dr. Geneie Everett
Cc: Wesch, Jerry Dr CIV USA MEDCOM CRDAMC
Subject: Letter of support for TFA

To Whom It May Concern:

I am familiar with the Trauma First Aide process and find it to be a well-designed acute intervention for persons with active trauma. As an intervention tool for “first responders”, I find it simpler and as affective as other more elaborate crisis intervention tools. I use it as a part of the training for PTSD soldiers in our clinic as a pre-cursor to other self-regulation techniques used to manage intrusive memories and triggers. The TFA procedures allow the soldiers to feel empowered quickly. We intend to do the training more formally in the future.

I would certainly support research on TFA as a tool. It is a very well designed process and the training is efficient and effective. I can think of several settings where TFA research would be interesting. For example:

- 1) ER staff – for self care and interventions with acute patients.
- 2) Combat Stress Teams – compare outcomes of TFA vs. current procedures
- 3) Psychiatric Units – examine impact on use of restraints, sedation and seclusion events on inpatients
- 4) Other “first responder” situations – EMT’s, police (MP’s), Combat Medics
- 5) Look at stress chemistry and neuro-imaging in pre-post intervention settings – pick one. PTSD triggers would be good.

In summary, I like this well-packaged mind-body tool and would like to see it used in many more settings. Some adequate research on its effects and utilization would be helpful in further refining the technique and moving it into the “main stream” crisis response world.

JW

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