



# El Paso Orthopaedic Surgery Group

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## SPINE CENTER OF EL PASO

## EL PASO PAIN MANAGEMENT CENTER

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Mr. Jon Opelt  
Executive Director  
Texas Alliance for Patient Access  
2301 South Capital of Texas Highway  
Suite J-101  
Austin, TX 78746

Dear Mr. Opelt:

I am the orthopedic trauma director for Del Sol Medical Center in El Paso Texas. Around 20% of our trauma patients are from New Mexico some of whom are brought to our facility via Life Flight and regional ground transportation. These patients are usually victims of high energy auto, motorcycle accidents, stabbings and gunshot wounds. Add to that list patients who are suffering from life threatening medical emergencies such as heart attack and stroke, or women suffering complications of childbirth that require a higher level of care than can be provided in their immediate area.

Survival rates for critically injured trauma patients increase significantly if the patient can be taken to a trauma center within the first hour of the injury. Trauma patients should be treated at the nearest trauma facility regardless of state or county boundaries. Presently helicopters are flown as far as 200 miles from El Paso into New Mexico to bring trauma patients to our facility.

We currently have eighteen highly trained general surgery trauma physicians that rotate to El Paso and staff our trauma center. They spend the night at the hospital are available within ten minutes of call; twenty-four hours a day. The American College of Surgeons (ACG) also mandates that we maintain twenty-four-hour-a-day access to other specialties including a neurosurgeon, orthopedic surgeon, ear nose and throat, plastic surgeons and other surgical subspecialties. To maintain the ACG's highest level of trauma designation requires that these physicians are available to treat a patient within 30 minutes.

Currently only two of the eighteen general surgery trauma surgeons call El Paso their home. The other 16 are independent contractors who fly into El Paso work twelve-hour shifts for one week then they fly home.

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Texas emergency care physicians have liability protections that New Mexico physicians do not. I am very concerned that our liability risk and insurance premiums will increase substantially if the *Montano vs Frezza* decision is upheld. If this were to occur we might have trouble retaining the trauma specialists under contract required to meet the obligations of our regional trauma center and the ACG as was the case in 2003 before Texas passed medical liability tort reform.

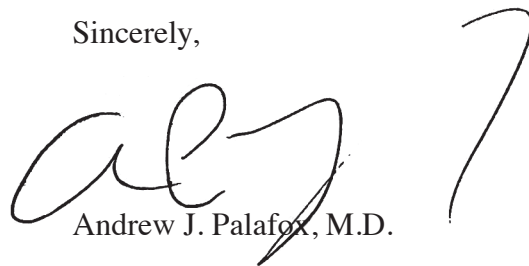
The ripple effects would likely be substantial including the possible diversion of New Mexico trauma patients to Albuquerque for care. That would be beyond unfortunate and yet, that could be a real possibility if Texas doctors are forced to put themselves at unacceptable liability risk when treating New Mexico patients.

The stark reality is this:

1. New Mexico's only Level 1 trauma center is the University of New Mexico Health Science Center in Albuquerque, which is a 270-mile drive from El Paso.
2. Santa Fe, Farmington, Carlsbad and Alamogordo have Level 3 designations. These facilities do not cover major injuries.
3. We see a large volume of patients from Alamogordo (which is roughly one hour and twenty-minute drive from El Paso), Carlsbad (where the drive time is twice that) and from Las Cruces, New Mexico's third largest city.
4. Las Cruces, home of the national trauma hospital association, has no trauma center. The majority of Las Cruces' most severely injured patients are sent to El Paso for critical care.

In closing an adverse ruling in the *Montano vs Frezza* case would place Texas physicians at an unacceptable liability risk. Our ability to provide trauma care would be impaired. Ultimately, that would be a disservice to the residents of the border region including New Mexico who rely on a network of Texas trauma centers for their critical care needs.

Sincerely,



Andrew J. Palafox, M.D.