



DEPARTMENT OF THE ARMY  
US ARMY MEDICAL RESEARCH AND MATERIEL COMMAND  
504 SCOTT STREET  
FORT DETRICK, MD 21702-5012

REPLY TO  
ATTENTION OF

MCMR-ZB

6 JUN 2007

MEMORANDUM FOR Commander, U.S. Army Medical Command, 2050 Worth Road,  
Suite 3, Fort Sam Houston, Texas 78234-6003

SUBJECT: Charter for Program Coordinating Office for Medical Research for  
Prevention, Mitigation, and Treatment of Blast Injuries

1. Request approval of the enclosed Charter for the Program Coordinating Office for  
Medical Research for Prevention, Mitigation, and Treatment of Blast Injuries.

2. Background:

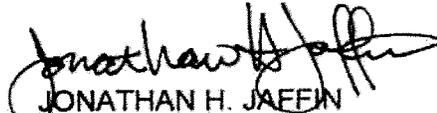
a. DoDD 6205.21E designates Executive Agent (EA) responsibility to the Department  
of the Army. The EA responsibility has been delegated to the Assistant Secretary of the  
Army for Acquisition, Logistics, and Technology and further delegated to the  
Commander, U.S. Army Medical Command.

b. Enclosed Charter identifies rationale for establishment of the Program  
Coordinating Office at the U.S. Army Medical Research and Materiel Command  
(USAMRMC).

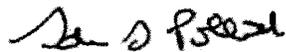
c. Paragraph 5 of the Charter describes responsibilities and functions of the Program  
Coordinating Office in support of the DoD EA.

3. The point of contact for this request is Colonel Jerry Pierson, USAMRMC, 301-619-  
7645, email: jerry.pierson@amedd.army.mil.

Encl

  
JONATHAN H. JAFFIN  
Colonel, MC  
Acting Commander

~~Approved~~ Disapproved

  
GALE S. POLLOCK  
Major General  
Commanding

**PROGRAM COORDINATING OFFICE  
FOR  
MEDICAL RESEARCH FOR PREVENTION, MITIGATION, AND TREATMENT OF  
BLAST INJURIES**

**CHARTER**

**1. Name of Office:** US Army Medical Research and Materiel Command (USAMRMC) Program Coordinating Office (PCO) for Medical Research for Prevention, Mitigation, and Treatment of Blast Injuries, hereafter referred to in this document as the PCO.

**2. Background:**

a. Section 256 of the National Defense Authorization Act for Fiscal Year 2006, Public Law 109-163, provides that the Secretary of Defense shall designate an executive agent to be responsible for coordinating and managing the medical research efforts and programs of the Department of Defense (DoD) relating to the prevention, mitigation, and treatment of blast injuries. The Department issued DoD Directive (DoDD) 6025.21E "*Medical Research for Prevention, Mitigation, and Treatment of Blast Injuries*" on 5 July 2006 in compliance with Section 256 of Public Law 109-163. The DoDD 6025.21E designates the Secretary of the Army as the DoD Executive Agent (DoD EA), assigns responsibilities governing coordination and management of Medical Research for Prevention, Mitigation, and Treatment of Blast Injuries, and directs the Armed Services Biomedical Research Evaluation and Management Committee to facilitate coordination and prevent unnecessary duplication of effort within DoD biomedical research and development and associated enabling research areas.

b. The Secretary of the Army delegated the authority and assigned the responsibility to the Assistant Secretary of the Army for Acquisition, Logistics and Technology (ASA (ALT)) to execute the EA responsibilities, functions and authorities on 4 January 2007. The ASA (ALT) further delegated on 16 January 2007 to the Commander, US Army Medical Command, the authority to execute the relevant DoD research efforts and programs. The US Army Medical Command's major subordinate command responsible for executing the relevant DoD medical research efforts and programs for the prevention, mitigation, and treatment of blast injuries is the USAMRMC.

**3. Establishment:**

a. This charter establishes the PCO within the USAMRMC as a permanent office located at Fort Detrick, Maryland, effective 30 March 2007.

b. This charter establishes policy for the management and administration of resources necessary to assist the DoD EA in fulfilling its designated responsibilities and functions regarding medical research efforts and DoD programs related to prevention, mitigation, and treatment of blast injuries.

c. This charter addresses the responsibilities and functions of the DoD Components (DoD EA and participating) in the areas of resource support (including staffing), and coordinating activities related to planning, program analysis and evaluation, programming, budgeting, and

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execution in accordance with (IAW) DoDD 6025.21E. It identifies the Program Coordinator's (PC) authority and delineates the relationships, responsibilities, and functions of the relevant DoD Components participating in the PCO. It also establishes administrative and executive policies and practices by which the PCO will function.

**4. Mission:** The mission of the PCO is to assist in fulfilling the DoD EA responsibilities and functions IAW DoDD 6025.21E by the coordination and management of relevant DoD medical research efforts and programs related to the prevention, mitigation and treatment of blast injuries.

**5. PCO Core Responsibilities and Functions in Support of the DoD EA:** Coordinate and manage relevant DoD research efforts and programs, specifically:

a. Maintain a DoD technology base for medical research related to blast injuries and based on the Design Development Research and Engineering (DDR&E)-approved program for the DoD Components.

b. Perform programming and budgeting actions for all blast-injury research to maintain the Research & Engineering programs based on DDR&E-approved priorities of the DoD Components.

c. Program and budget for blast-injury research based on program analysis and evaluation and prioritization of needs of the DoD Components.

d. Execute the approved DoD blast-injury research program consistent with DoD guidance and availability of annual congressional appropriations.

e. Provide medical recommendations with regard to blast-injury prevention, mitigation, and treatment standards to be approved by the Assistant Secretary of Defense (Health Affairs).

f. Coordinate DoD blast-injury-research issues with the staffs of the relevant DoD Components.

g. Support the development, maintenance, and usage of a joint database for collection, analysis, and sharing of information gathered or developed by the DoD Components related to the efficacy of theater personal protective equipment (including body armor, helmets, and eyewear) and vehicular equipment designed to protect against blast injury.

h. Ensure that information is shared as broadly as possible except where limited by law, policy, or security classification and that data assets produced as a result of the assigned responsibilities are visible, accessible, and understandable to the rest of the Department as appropriate.

**6. Authority:** The PCO is established at the direction of the Commander, USAMRMC.

**7. PCO Organization and Staffing:**

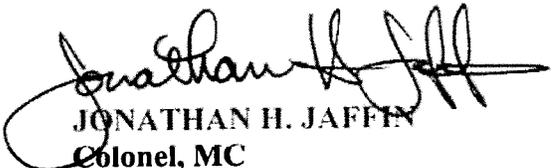
- a. The PC will be a Colonel (O-6) and the Principal Deputy PC will be a GS-15, or equivalent, appointed by the Commander, USAMRMC.
- b. Deputy PCs will be an O-5 and/or GS-13 through 14, or equivalent, one each from the Departments of the Air Force and Navy. They will assist in coordinating and managing the program as directed by the PC and ensure that Service concerns are adequately addressed. Request for Service support will be IAW DoDD 6025.21E, paragraph 5.4.3.
- c. Program support will consist of one budget analyst, two program analysts, one information management/information technology specialist, and one secretary. Program support may be outsourced.
- d. The PC may appoint Functional Program Managers to function as subordinate managers for the medical research program management categories of: Surveillance; Traumatic Brain Injury; Injuries to Other Tissues and Organs; Modeling, Simulation, Test, and Evaluation; Injuries to the Extremities; Face and Eye Injury; and Auditory Injury. Functional Program Managers may be outsourced.
- e. Representatives from the relevant DoD Components may be appointed to augment the PCO IAW the appropriate stipulations of DoDD 6025.21E.

**8. Integrated Product Teams (IPTs):** The Integrated Product and Process Development process, using joint program IPTs, will be employed by the PCO to the maximum extent for relevant planning, programming, budgeting and execution activities, and other functional program needs. Working IPTs will be organized to ensure communications between relevant DoD Components.

**9. Performance Evaluations of Personnel:** The PC will provide performance evaluations for the Principal Deputy PC, Deputy PCs and Functional Program Managers, as appropriate. The senior rater for these positions will be designated by each Service. Performance evaluations for members of the PCO will follow the internal organizational relationships of authority as determined by the PC.

**10. Correspondence:** Correspondence to the PCO should be addressed to Headquarters, US Army Medical Research and Materiel Command, Office of the Principal Assistant for Research and Technology, (MCMR-ZB-DR/COL Jerry Pierson), Fort Detrick, MD 21702.

**11. Date Charter Filed:** 30 March 2007

  
**JONATHAN H. JAFFIN**  
**Colonel, MC**  
**Acting Commander**