

111TH CONGRESS
1ST SESSION

H. CON. RES. 198

Recognizing Pediatric Acquired Brain Injury as the leading cause of death and disability in the United States for children and young adults from birth until 25 years of age and endorsing the National Pediatric Acquired Brain Injury Plan to develop a seamless, standardized, evidence-based system of care universally accessible for all of these children, young adults, and their families, regardless of where they live in the country.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 13, 2009

Mr. BUTTERFIELD (for himself, Mr. KENNEDY, Mr. MASSA, Mr. MORAN of Virginia, Mr. LEWIS of Georgia, Mr. GRIJALVA, Mr. PAYNE, Ms. BALDWIN, Mr. LANCE, Mr. COHEN, Mr. LOEBSACK, Mr. CARNAHAN, Mr. MICHAUD, Mr. MEEK of Florida, Ms. CORRINE BROWN of Florida, Mr. HASTINGS of Florida, Ms. ROYBAL-ALLARD, Mr. MOORE of Kansas, Mr. ROTHMAN of New Jersey, Mr. PASCRELL, Ms. HERSETH SANDLIN, Mr. HOLT, Ms. HIRONO, Mr. LINCOLN DIAZ-BALART of Florida, Mrs. MALONEY, Mr. WALZ, Mr. LOBIONDO, Mr. BROWN of South Carolina, Mr. RYAN of Ohio, Mr. ISRAEL, Mr. MCGOVERN, Mr. MURTHA, Mr. TIM MURPHY of Pennsylvania, Mr. SALAZAR, Mr. SCHRADER, Mr. COURTNEY, Mr. LYNCH, Mrs. CHRISTENSEN, Mr. MEEKS of New York, Mr. SMITH of New Jersey, Mr. ABERCROMBIE, Mrs. BLACKBURN, Ms. FUDGE, Mr. SNYDER, Mr. BISHOP of Georgia, Mr. WATT, Mr. AL GREEN of Texas, and Mr. CLEAVER) submitted the following concurrent resolution; which was referred to the Committee on Energy and Commerce

CONCURRENT RESOLUTION

Recognizing Pediatric Acquired Brain Injury as the leading cause of death and disability in the United States for children and young adults from birth until 25 years of age and endorsing the National Pediatric Acquired Brain Injury Plan to develop a seamless, standardized,

evidence-based system of care universally accessible for all of these children, young adults, and their families, regardless of where they live in the country.

Whereas Pediatric Acquired Brain Injury (PABI) consists of traumatic causes (PTBI) such as falls, motor and non-motor vehicle incidents, child abuse, sports concussion, blast injury from war, gunshot wounds, and being struck by an object and non-traumatic causes such as brain tumors, strokes, epilepsy, substance abuse, infection, poisoning, hypoxia, ischemia, pediatric AIDS, and meningitis;

Whereas The Centers for Disease Control and Prevention (CDC) reports that an annual average of 12,535 deaths, 80,000 hospitalizations, and 643,000 emergency room visits are attributable to PTBI for children and young adults from birth through age 25 and the Center for Injury Research and Policy (CIRP) estimated more than \$1,000,000,000 in total hospital charges annually are attributable to PTBI up to age 17;

Whereas the World Health Organization (WHO) reports children are 20 times more likely to die from PTBI than from asthma, 38 times more likely to die than from cystic fibrosis, and there were twice as many children who suffered a PTBI than those who received stitches in 2008;

Whereas The Sarah Jane Brain Foundation is one of the leading organizations in the country dealing with PABI and is named after four-year-old Sarah Jane Donohue who was shaken by her baby nurse when she was only five days old, breaking four ribs, both collarbones, and causing a severe brain injury;

Whereas The National Advisory Board of The Sarah Jane Brain Foundation, comprised of the leading experts in the country dealing with PABIs, developed the first-ever PABI Plan to create a seamless, standardized, evidence-based system of care, universally accessible for all PABI children, young adults, and their families regardless of where they live in the Nation;

Whereas the PABI Plan called for the identification of one State Lead Center of Excellence for each of the 50 States in addition to the District of Columbia and Puerto Rico to implement the PABI Plan in their respective State and/or territory and The Sarah Jane Brain Foundation has selected these leading institutions and organizations;

Whereas the PABI Plan organizes the country into seven regions with seven or eight States and/or territories in each region, including the Northeast, Mid-Atlantic, Southeast, Mid-central, South-central, Rocky Mountain, and the Pacific; and

Whereas the PABI Plan identifies seven Categories of Care for specialization within the PABI continuum of care which include prevention, acute care, reintegration, adult transition, mild Traumatic Brain Injury (TBI), rural and tele-health, and the Virtual Sarah Jane Brain Family Center: Now, therefore, be it

1 *Resolved by the House of Representatives (the Senate*
 2 *concurring), That Congress—*

3 (1) recognizes that Pediatric Acquired Brain
 4 Injury (PABI) is the leading cause of death and dis-
 5 ability in the United States for children and young
 6 adults from birth up to 25 years of age;

1 (2) endorses the National Pediatric Acquired
2 Brain Injury Plan as the method to prevent future
3 PABIs and treat all children and young adults suf-
4 fering from a PABI while supporting their families;
5 and

6 (3) encourages all Federal, State, and local gov-
7 ernments to implement the PABI Plan.

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