

CHRIS VAN HOLLEN
8TH DISTRICT, MARYLAND

COMMITTEE ON
WAYS AND MEANS

COMMITTEE ON OVERSIGHT AND
GOVERNMENT REFORM

Congress of the United States
House of Representatives
Washington, DC 20515

1707 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-5341

DISTRICT OFFICES:
51 MONROE STREET, #507
ROCKVILLE, MD 20850
(301) 424-3501

SUITE C-201
6475 NEW HAMPSHIRE AVENUE
HYATTSVILLE, MD 20783
(301) 891-6982

www.vanhollen.house.gov

July 21, 2010

Thomas R. Frieden, MD, MPH
Director
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30333

Dear Dr. Frieden:

I am writing to express my interest in current and planned efforts by the Centers for Disease Control and Prevention (CDC) regarding the Hemovigilance Module of the National Healthcare Safety Network (NHSN).

This program was brought to my attention by the American Association of Blood Banks (AABB), which is located in my Congressional District. As you know, AABB is a national resource in advancing transfusion medicine and optimizing patient and donor care and safety. I understand that AABB was integrally involved in setting up the Module and it, along with other transfusion medicine experts, would like to take an active role in analyzing the data collected and to identify optimum interventions to improve transfusion safety.

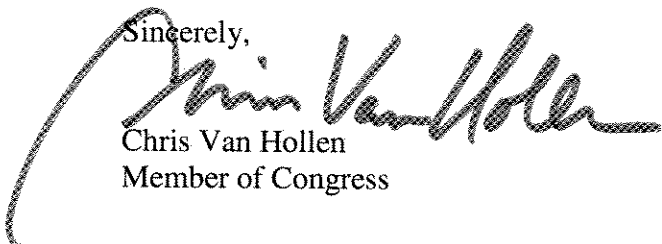
I believe that the Hemovigilance Module is an important effort within CDC to improve blood safety through hospital reporting of adverse events and errors that occur during a blood transfusion. My understanding is that the development of the module was a true public-private partnership effort, where CDC worked closely with private sector experts in transfusion medicine as well as other agencies within the Department of Health and Human Services. This collaborative approach should be continued and enhanced so that the transfusion data can be fully analyzed and interventions can be developed and implemented to maximize the effectiveness of this program.

The House Labor, HHS, and Education Appropriations Subcommittee included report language in the House FY 2010 Labor-HHS Appropriations bill in support of this program moving forward in collaboration with private sector organizations. The report language identified several activities – hospital recruitment, staff training, and most importantly, data analysis – that would be most effective if performed by private sector transfusion medicine experts. My understanding is that CDC to date has not engaged the private sector in these activities.

With the Hemovigilance Module launched nationally in February, CDC should initiate these efforts as quickly as possible and fund qualified organizations that can carry out these functions. The transfusion medicine community is highly motivated and its involvement in hospital recruitment and education will increase hospital participation and improve the quality of the data reported. These experts can improve upon CDC's aggregate data reporting by providing a more in-depth clinical analysis of the surveillance data and identifying effective systems changes and interventions to improve hospital transfusions.

Working in partnership with private sector experts will greatly enhance this important surveillance program and improve transfusion safety nationally. I am very interested in learning of CDC's plans for implementing the Hemovigilance Module and partnering with experts from the transfusion medicine community. Thank you for your attention to this matter.

Sincerely,



Chris Van Hollen
Member of Congress