Authors' Response to Letter to the Editor: "Expanding Perspectives in Emergency Management and Health Care IT Systems"

Clark J. Lee JD, PhD, MPH[1,2] ⬤, Michelle M. Kimball MS[1,2],
Eric C. Deussing MD, MPH[1] and Thomas D. Kirsch MD, MPH[1]

[1]The National Center for Disaster Medicine and Public Health, Uniformed Services University of the Health Sciences, Bethesda, MD, USA and [2]The Henry M. Jackson Foundation for the Advancement of Military Medicine, Inc., Bethesda, MD, USA.

Dear Editor(s):

Muttaqin, Reba, and Prasetya[1] raise fair points in their Letter to the Editor concerning our recent Concepts in Disaster Medicine article on the "Use of Information Technology Systems for Regional Health Care Information-Sharing and Coordination During Large-Scale Medical Surge Events"[2] for its lack of consideration of: (1) international perspectives, (2) user perspectives, and (3) financial factors relating to the use of information technology (IT) systems in health care and emergency management.

The US focus of our article reflects our findings on this topic through the US Department of Defense's National Disaster Medical System Pilot Program ("NDMS Pilot"). We recognize that the issues discussed in our article may not be generalizable or applicable outside of the United States, and we defer to the expertise of others to offer perspectives on how other nation-states use IT systems for regional health care information-sharing and coordination during crises.

We agree that user perspectives of IT systems are critical for effective IT system use. Our article was informed by user perspectives relating to areas for improvement in the use of IT systems during large-scale surge events, although we ultimately chose to emphasize the need for integration among IT systems rather than on the needs of users of these IT systems in our article. The NDMS Pilot's continuing work on military-civilian interoperability and coordination of care during large-scale medical surge events also incorporates user perspectives from various communities of interest.[3] However, we note that the term "user" is broad, as it may refer to individuals, organizations, or multi-organization systems in the private- or public-sectors within a community of interest.

Finally, we believe the importance of understanding "financial coercion" and "the financial effectiveness of IT use and maintenance in supporting health services, while providing accurate data for decision-makers" is situation-dependent. Although financial factors are certainly important considerations for routine, "steady state" health service operations, we suspect financial considerations carry less determinative weight in decision-making regarding national-level health crises during peacetime and especially during wartime.

References

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2. **Lee CJ**, **Kimball MM**, **Deussing EC**, **Kirsch TD**. Use of information technology systems for regional health care information-sharing and coordination during large-scale medical surge events. *Disaster Med Public Health Prep*. 2024; **18**:e1. doi:10.1017/dmp.2023.218
3. **Deussing EC**, **Post ER**, **Lee CJ**, et al. Advancing systematic change in the national disaster medical system (NDMS): early implementation of the US department of defense NDMS pilot program. *Health Secur*. Published online September 24, 2024. doi: 10.1089/hs.2023.0179

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