112TH CONGRESS 1ST SESSION H.R. 168

To direct the Secretary of Veterans Affairs to improve the prevention, diagnosis, and treatment of veterans with chronic obstructive pulmonary disease.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 5, 2011

Mr. STEARNS introduced the following bill; which was referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to improve the prevention, diagnosis, and treatment of veterans with chronic obstructive pulmonary disease.

1 Be it enacted by the Senate and House of Representa-

2 tives of the United States of America in Congress assembled,

3 SECTION 1. IMPROVEMENT OF PREVENTION, DIAGNOSIS,

4 TREATMENT, AND MANAGEMENT OF CHRON-5 IC OBSTRUCTIVE PULMONARY DISEASE.

6 (a) TREATMENT OF COPD.—Subject to the avail7 ability of appropriations provided for such purpose, the
8 Secretary of Veterans Affairs shall—

1 (1) develop treatment protocols and related 2 tools for the prevention, diagnosis, treatment, and 3 management of chronic obstructive pulmonary dis-4 ease; and

5 (2) improve biomedical and prosthetic research
6 programs regarding chronic obstructive pulmonary
7 disease.

8 (b) PILOT PROGRAMS.—Subject to the availability of 9 appropriations provided for such purpose, the Secretary 10 of Veterans Affairs, in coordination with the Director of the Centers for Disease Control and Prevention, the Direc-11 12 tor of the Indian Health Service, and the Administrator 13 of the Health Resources and Services Agency, shall develop pilot programs to demonstrate best practices for the 14 15 diagnosis and management of chronic obstructive pulmonary disease. 16

17 (c) Smoking Cessation.—

18 (1) IN GENERAL.—Subject to the availability of 19 appropriations provided for such purpose, the Sec-20 retary of Veterans Affairs, in coordination with the 21 Director of the Centers for Disease Control and Pre-22 vention, shall develop improved techniques and best 23 practices for assisting individuals with chronic ob-24 structive pulmonary disease in successfully quitting 25 smoking.

1	(2) Unique needs of copd patients.—In
2	carrying out paragraph (1), the Secretary—
3	(A) shall identify subpopulations of individ-
4	uals with chronic obstructive pulmonary disease
5	that have unique needs with respect to quitting
6	smoking; and
7	(B) may conduct research to determine
8	whether the techniques and best practices devel-
9	oped under paragraph (1) are different from
10	techniques and best practices used to assist in-
11	dividuals with other chronic diseases in success-
12	fully quitting smoking.

 \bigcirc