House Select Committee on Mass Violence Prevention and Community Safety
Testimony by Alan H. Tyroch, MD
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Good morning, Chair Darby and committee members. Welcome to El Paso. My name is Dr. Alan Tyroch. I am the chair of surgery at Texas Tech University Health Science Center-El Paso and the trauma medical director at University Medical Center of El Paso. I am also an appointee to the Governor’s EMS and Trauma Advisory Council.

I am speaking today on behalf of the Texas Medical Association and its 53,000-plus members, as well as the El Paso County Medical Society.

What happened on Aug. 3 was horrific and is hard to even still come to grips with regarding the loss of life and the lives impacted. University Medical Center received 14 patients that Saturday and another patient in transfer the next day – 14 patients in a span of 34 minutes. Unfortunately, one person died in the trauma bay from lethal injuries. Six patients went emergently to the operating room that day. Ages: 5 months to 87 years. Fourteen survived.

I want to emphasize that El Paso is a safe community. What was done that day was done by an outsider.

I must say that I am a firm believer in the Second Amendment, but I believe in responsible gun ownership. For full disclosure, I have no gun (unless you count a BB gun), but I grew up deer and dove hunting in central Texas.

As a surgeon and a physician, I try to rely on facts and data to make a clinical decision, so please bear with me for the next few minutes. What I say may upset or surprise some in the audience. I also try not to use the phrase “gun control” because it stirs up a visceral response. I prefer beginning a conversation on how we can reduce firearm-related violence; in other words, how to reduce death and disability from guns.

There were nearly 40,000 gun-related deaths in 2017. (Centers for Disease Control and Prevention)
  - 60% were due to suicide and another 37% due to murder.

For comparison, there were 70,000 opiate-related deaths and 33,000 motor vehicle crashes that same year.

On the other hand, the rate of gunshot wound deaths is actually lower than in the 1970s.
  - 12 deaths/100,000 population (2017)
  - 16 deaths/100,000 population (1970s)
From a statistical perspective, active shooter incidents are extremely low:
  • <1% of all gun-related deaths

Of concern, they are becoming more frequent and with more casualties.
  • Las Vegas (2017): 58 deaths
  • Orlando (2016): 49 deaths

Texas had three of the worst mass shootings in the top 10 since 2009:
  • Sutherland Springs (2017): 26 deaths
  • El Paso (2019): 22 deaths
  • Fort Hood (2009): 13 deaths

This does not include:
  • Killeen (1991): 23 deaths
  • UT Tower (1966): 18 deaths
  • There have been others. Odessa: seven deaths just four weeks after El Paso

We also need to be realistic with the facts:
  • 30% of Americans own a gun, and another 11% live with someone with a gun.
    o 41% of households in this country have a gun.
  • 48% of adults grew up in a household with guns.
  • 55% have friends who own guns.
  • 72% of us have fired a gun.
  • 66% who own a gun have more than one; 29% have at least five guns.

That is a lot of guns to either confiscate or buy back. Not practical.

This topic is extremely divisive and political. We need to pull back from this rhetoric.

There is also no one solution or easy fix.

Because such senseless tragedies continue to happen across our state, TMA established strong policy in 2019 to address mass violence and firearm injury. Texas must embrace this topic no longer as just a safety concern but also as a public health crisis. Therefore, TMA and the El Paso County Medical Society provide the following recommendations:

1. Prioritize the prevention of firearm injuries and death by educating Texans about firearm safety as well as the potential hazards of firearm ownership.

2. Promote the Texas Hunter Education and Certification Program developed by the Texas Department of Parks and Wildlife.

3. Ensure patient-physician communication is protected so physicians may provide guidance on the dangers of firearm ownership in the clinical setting in an informational, nonjudgmental
manner. As physicians who care for our patients, we should be able to encourage firearm owners to adhere to best practices for reducing the risk of injury and death. This includes ensuring firearms are not accessible to children; adolescents; or people with mental, behavioral, or substance use disorders.

4. Strictly enforce federal and state gun control laws and mandated penalties for crimes committed with a firearm, including illegal possession.

5. Promote the use of trigger locks and locked gun cabinets to help prevent unintentional discharge.

6. Equip and empower the Texas Department of State Health Services to perform unfettered study of issues involving firearms and public health. Texas should participate in national surveillance studies on violence in the U.S., ensuring the state has timely, accurate data on firearm-related mortality and morbidity to guide Texas’ public health prevention activities.

7. Develop an effective process for implementing protective orders to respond to individuals reported to be at high risk of violence to themselves or others.

8. Align Texas law with federal HIPAA allowances on disclosing patient information for safety. The state can give professionals, such as physicians, the ability to disclose confidential patient information to medical or law enforcement personnel if the person determines there is probability of imminent physical injury by the patient to the patient or others or if there is probability of immediate mental or emotional injury to the patient. Legislation that would attain this measure failed last session in Texas House Bill 3519 by Rep. Steve Allison.

TMA applauds the efforts of this select committee to help prevent the tragedy we saw here in El Paso from happening in other Texas communities. We recognize that gun ownership is associated with an individual’s personal freedom, and protection is a key reason why many own firearms. In the same vein of protection, our members remain focused on proven prevention and harm-reduction methods in all areas of public and population health. Physicians accept their role in addressing mass violence and firearm safety, and we are compelled to do all we can to help protect our patients and their families.

Lastly, I want to emphasize that the EMS and trauma system worked that day in El Paso. Thank you so much for helping to build the outstanding trauma system that Texans have today. Texas has come a long way in regards to trauma system development.

In addition to respecting the Second Amendment, I also cherish the First Amendment, so I thank you for giving me the privilege of speaking with you.

Texans are action-oriented. Let’s make this work and show the rest of the nation. Thank you for your time.

EL PASO STRONG!