

HUSCH BLACKWELL

Crystal M. Bloom
Partner

One Congress Street, Suite 3102
Boston, MA 02114
Direct: 617.598.6783
Fax: 617.598.6790
crystal.bloom@huschblackwell.com

March 12, 2026

Via Email

Stephen Davis, Director
Division of Health Care Facility Licensure and Certification
Massachusetts Department of Public Health
67 Forest Street
Marlborough, MA 01752

Re: Brigham and Woman's Hospital – Inpatient Burn Service Essential Services Finding (2341-X53)

Dear Mr. Davis:

We write on behalf of Brigham and Women's Hospital ("BWH") in response to the Department of Public Health's (the "Department") letter, dated March 2, 2026, concerning the closure of 10 inpatient burn beds located at 75 Francis Street, Boston, MA 01830. The closure will result in consolidation of burn services historically provided at BWH and Massachusetts General Hospital (MGH) to one location- the Sumner M. Redstone Burn Center at MGH. BWH offers the following information in response to the Department's questions.

1. Competency of Staff: In your response dated February 19, 2026, you stated that the MGH burn service is staffed by highly specialized trained caregivers. Our letter dated February 4, 2026, asked how Brigham and Women's Hospital intends to maintain staff competency once the burn unit has closed. The Department requests the Hospital answer this question regarding competency of staff at Brigham and Women's Hospital, not MGH. The Hospital's response should include but is not limited to staff competency to stabilize and transfer a patient experiencing burns that require intensive care and to provide burn-related care for contingency, crisis and catastrophic burn care in a mass casualty incident situation.

Patients requiring intensive care for burns that arrive at the BWH emergency department (ED) will be treated and stabilized then transferred to MGH for inpatient burn services. All BWH ED nurses must be Trauma Nursing Core Course (TNCC) certified. Burn education is a standard component of TNCC so all nurses in the BWH ED will continue to maintain their competency in treating and stabilizing patients with burns. In the event of a mass casualty incident where demand exceeds capacity at MGH, patients, including those arriving at BWH, will be triaged and transferred as appropriate in accordance with the regional Burn Mass Casualty Incident (BMCI) Response Plan and guidance established by the American Burn Association. In such an event, BWH patients will be stabilized in the ED where staff are TNCC certified.

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Massachusetts Department of Public Health
March 12, 2026
Page 2

2. Utilization of Inpatient Burn Services: In your response dated February 19, 2026 you provided a chart showing the average daily census for patients with primary diagnoses of burns from September 1, 2025 to presumably present. Our letter dated February 4, 2026 asked for information on utilization of the services prior to proposed closure, including patients admitted to this service's beds and patients admitted to the Hospital with a burn diagnosis. The Department requests the Hospital answer this question by providing the counts of patients with any diagnoses of burn-related injuries (ICD CM-10th Ed. T20-T32 or Diagnostic Related Grouping 927-935) as well as the mean and median length of stays for both the previous two fiscal years (FY 2024 and FY 2025) as well as this fiscal year to date (FY 2026) .

BWH's fiscal year is October 1 through September 30. Accordingly, fiscal year data provided in BWH's February 19, 2026 letter reflects that time period. For FY2026, fiscal year to date for October 1, 2025-January 31, 2026.

The following table provides the newly requested information.

BWH	FY 2024	FY 2025	FYTD 2026 ¹
Admissions ²	138	111	25
Average (mean) Length of Stay (days)	10.66	14.94	9.01
Average (mean) Length of Stay (days)	7.00	8.79	5.70

Please contact me if you have any questions.

Sincerely,



Crystal Bloom

cc: T. Smith, DPH
W. Mackie, DPH
J. Gagne, DPH
M. Callahan, DPH
T. McNamara, DPH
A. Sousa, DPH
K. Fillo, DPH

¹ October 1, 2025- January 31, 2026.

² Based on Diagnostic Related Grouping 927-935.