

Office of the Attending Physician, U.S. Congress: Background Information and Response to Public Health Emergencies

May 14, 2020

Establishment and History

The [Office of the Attending Physician \(OAP\)](#) was established in 1928, after the House agreed to a resolution on December 5, 1928, requesting the Secretary of the Navy detail a medical officer to the House (H.Res. 253, 70th Congress).

On April 7, 1930, the Senate agreed to a concurrent resolution (S.Con.Res. 14, 71st Congress) extending the services of the Attending Physician to both chambers. Although the House never considered the concurrent resolution, the OAP began serving both the House and the Senate at that time.

Since the initial appointment in 1928, the Attending Physician, and other medical assistants in the office, have continued to be assigned from the Department of the Navy. Seven Navy Medical Corps physicians have served as Attending Physician: George Calver (1928-1966), Rufus Pearson (1966-1973), Freeman Carey (1973-1986), William Narva (1986-1990), Robert Krasner (1990-1994), John Eisold (1994-2009), and [Brian Monahan](#) (2009-present). The Attending Physician has generally held the rank of Rear Admiral.

Current Services

The OAP is responsible for providing emergency medical assistance to Members of Congress, Justices of the Supreme Court, congressional staff, and the millions of visitors to the Capitol each year.

Care may range from performing minor first aid services to administering treatment until a patient may be transported to a local hospital. In addition, the OAP provides flu vaccinations for Members of Congress and congressional staff, offers CPR and first aid courses, provides travel immunization advice for official congressional travel, administers allergy shots (but does not provide the serum), maintains lactation suites, conducts occupational exams and certifications, operates an Environmental and Occupational Health Section, and provides medical support for major congressional events. The office also participates in the planning for, and response to, disasters that could affect the congressional community.

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The office can write prescriptions, but it does not sell prescription drugs (2 U.S.C. §4121).

Service Fees

Members may also obtain additional services for an annual fee. Services include routine exams, consultations, and certain diagnostic tests. The office does not provide vision or dental care. The fee covers services for the Member only, not dependents.

The annual fee was first instituted in 1992, following increased attention to, and criticism of, congressional benefits (S.Res. 286 and H.Res. 423, 102nd Congress; 2 U.S.C. §4122 and §6515).

Care in Military Treatment Facilities

Current Members of Congress (but not former Members or dependents) are also authorized to receive medical and emergency dental care at military treatment facilities. This courtesy has been extended to Members of Congress for most of the OAP's history (see also 32 C.F.R. §728.77).

Funding and Staffing

The “Joint Items” section of the annual legislative branch appropriations acts contains funding for “medical supplies, equipment, and contingent expenses,” allowances for the Attending Physician and his assistants, and reimbursement to the Navy. The FY2020 appropriations act (P.L. 116-94), for example, provided \$3.87 million. The CARES Act (P.L. 116-136) provided OAP an additional \$400,000 “to prevent, prepare for, and respond to coronavirus, domestically or internationally.”

The FY2020 appropriations act specified varying allowances for the Attending Physician, a Senior Medical Officer, three medical officers, and up to 13 additional assistants. Allowances have been provided since the office's establishment (H.Res. 279, 71st Congress).

Reimbursement to the Navy “for expenses incurred for staff and equipment assigned to the Office of the Attending Physician” began in 1975 (P.L. 94-32).

Authority, Coordination, and Selected Actions Related to Public Health Emergencies

Throughout its history, the OAP has played a role in preparing the Capitol Complex for public health emergencies and responding to such emergencies when they have occurred.

The OAP's activities were codified with language included in the FY2004 Consolidated Appropriations Act, which states that the Attending Physician has the “the authority and responsibility for overseeing and coordinating the use of medical assets in response to a bioterrorism event and other medical contingencies or public health emergencies occurring within the Capitol Buildings or the United States Capitol Grounds” (P.L. 108-199; 2 U.S.C. §4123).

In this role, the OAP may coordinate with House and Senate leadership, House and Senate committees, the House and Senate Sergeant at Arms, the Capitol Police, the Architect of the Capitol, and other legislative branch officers and officials.

Response to Anthrax and Ricin Attacks

Following the discovery of anthrax in the Hart Senate Office Building on October 15, 2001, OAP coordinated the testing and treatment of affected Members, staff, and visitors. According to [H.Res. 536](#) (107th Congress), this effort included testing 6,000 individuals for exposure to anthrax, 28 of whom tested positive, and providing 1,000 individuals with antibiotics as a precaution.

The OAP also assisted in the emergency response following the discovery of ricin in the Dirksen Senate Office Building on February 2, 2004.

Response to the Coronavirus (COVID-19) Pandemic and Previous Disease Outbreaks

As information related to the coronavirus (COVID-19) pandemic became available, the OAP worked to inform the congressional community. On February 28, 2020, the Committee on House Administration issued a “Dear Colleague” letter announcing two videos recorded by Dr. Monahan with information about the coronavirus. Additional letters subsequently issued by CHA and the House Sergeant at Arms providing additional information related to the pandemic, as well as a communication from the Senate Majority Leader, also referenced the OAP (e.g., letters announcing procedures for votes in the House that occurred on Friday, March 27, 2020, and on April 23, 2020; [press release](#) of May 1, 2020). The Attending Physician also testified regarding the coronavirus at a [hearing on March 3, 2020](#). The [OAP website](#) has also provided information on testing and CDC recommendations related to social distancing, face coverings, hygiene, and disinfection.

The ongoing work of the OAP follows its efforts during prior disease outbreaks (e.g., [H1N1 pandemic influenza \[Swine Flu\] in 2009](#) and [Ebola in 2014-2016](#); the office also administered a [smallpox immunization program](#) for certain emergency personnel in 2003).

Additional Resources

- CRS Report R43194, *Health Benefits for Members of Congress and Designated Congressional Staff: In Brief*, by Ada S. Cornell
- House offices only: <https://housenet.house.gov/campus/personal-services/attending-physician>

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