

THE ASSISTANT SECRETARY OF DEFENSE WASHINGTON, DC 20301-1200

MAY 01 1996

MEMORANDUM FOR: SECRETARY OF THE ARMY

SECRETARY OF THE NAVY

SECRETARY OF THE AIR FORCE

CHAIRMAN OF THE JOINT CHIEFS OF STAFF

SUBJECT: Revised Policy Regarding Civilian Blood Collections on Military Installations, Leased Facilities and Aboard Ships

Reference: ASD(HA) Policy Memorandum of 10 August 1988

Effective immediately the above reference is canceled and replaced by the following revised policy.

The Department of Defense (DoD) blood donor population plays an important role in the peacetime and contingency operations of the Military Health Services System (MHSS). In view of the frequently conflicting demands made for the DoD donors, the following priorities for donor availability are established: 1) support of MHSS contingency and wartime operations; 2) support of MHSS daily operations; 3) support of other government blood banking facilities; 4) support of local community based blood banks with reciprocal agreements; and, 5) support of other requests.

To ensure that civilian blood collections from the DoD donor pool do not reduce the MHSS' capability, commanders and commanding officers will, through appointed command blood program coordinators, oversee all civilian blood collections on their installations/activities/ships. In order to assist them in managing this important MHSS resource, Memoranda of Understanding(s)(MOU) must be developed with any civilian blood collection agency(ies) which the commander or commanding officer allows to collect on the installation/activity/ship. The local Armed Services blood donor center(s) must be an active participant in developing the contents and terms of the MOU and must be a signatory of the document. To ensure overall Service compliance, the Armed Services blood donor center's Service Blood Program Officer must review and approve all MOUs prior to obtaining final signatures. A MOU can be developed for a single installation/activity/ship or developed for a geographical region by the local Armed Services blood donor center(s) provided each commander or commanding office affected agrees to the contents and terms of the MOU.

In any case, all MOUs must include a provision to grant credits in exchange for access to donors. The credits are to be used to obtain blood and blood products which may be used within the MHSS, may be provided to the Department of Veterans Affairs, or otherwise used as the Services' blood program officers may determine. Due to local and regional economic differences in establishing a pricing structure for blood and blood products, the credit structure can be established locally, regionally, or by the Service's Blood Program Office.

Commanders and commanding officers will inform local civilian blood collection agencies that:

- 1. Blood collection on military installations/ activities/ships is not permitted without prior approval of, and scheduling with, the command's blood program coordinator and local Armed Services blood donor center.
- 2. The total number of units of blood drawn after each day of collection must be promptly reported (broken down into active duty and civilian) to the command's blood program coordinator and local Armed Services blood donor center.
- 3. Permission to come on base may be suspended at any time for failure to comply with the requirements described above or with the contents and terms of their current MOU. Suspension may also apply for military contingency or wartime requirements, or if it is determined that the overall or local peacetime Armed Services Blood Program blood quotas for medical readiness requirements are not being met due to the competition by the civilian blood agency(ies).

Since blood is a community and national medical resource, commanders and commanding officers must ensure that all civilian blood collection agencies are afforded equal access, provided the overall or local peacetime Armed Services Blood Program blood requirements are being met. Civilian blood collection agencies will not be allowed to compete with the local Armed Services blood donor center(s) to the detriment of the Armed Services Blood Program.

It is essential that military departments disseminate these requirements through both installations and medical channels. Steps must be taken to notify all appropriate commands of these guidelines and to incorporate them into respective military department and, where necessary, unified command blood program regulations.

Stephen C. Joseph, M.D., M.P.H.

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