DoD Military Vaccine (MILVAX) Programs & Policy Update

Presented to:

Defense Health Board

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Director, Military Vaccine Agency

3 May 2007

UNCLASSIFIED

BRIEFING OUTLINE

PURPOSE: To provide the Defense Health Board with an update on the Military Vaccine Agency mission, current immunization policies and ongoing initiatives with the Department of Defense.

1. MILVAX Mission
2. Anthrax Vaccination Program
3. Smallpox Vaccination Program
4. Other Vaccines
5. Initiatives / Challenges
6. Questions

Vaccines Are Different !

Executive Agent Responsibilities

DoD Directive 6205.02E (dated 19 Sep 06) directs "The Secretary of the Army shall serve as Executive Agent for the military immunization program…"

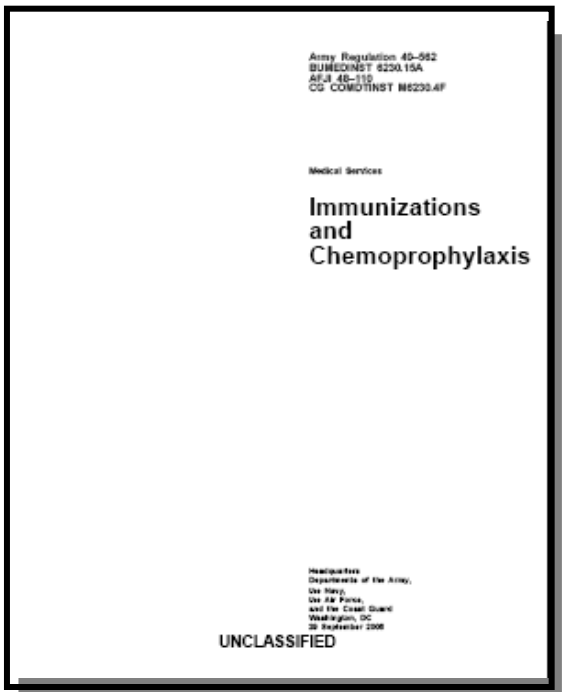
Also…

*"Establish a **MILVAX Office** to synchronize, integrate, and coordinate efforts in immunization services for all DoD Components. The purpose of these efforts is to facilitate and promote the quality of immunization policy, implementation, education, distribution, risk communication, administration, clinical services, safety surveillance, and program evaluation."*

Immunizations and Chemoprophylaxis

AR 40–562, BUMEDINST 6230.15A, AFJI 48–110, CG COMDTINST M6230.4F (Approved 29 Sep 06)

- Role for the Military Vaccine Office (para 1-4*d*).
- Standards for military immunization delivery, including quality improvement mechanisms (para 2-1 and app B).
- Establishes that electronic immunization tracking systems are the preferred record for immunization data (para 2-7).
- managing lost immunization records (para 2-7*c*).
- Procedure for immunization during initial military training (para 3-1).


Army Regulation 40–562
BUMEDINST 6230.15A
AFJI 48–110
CG COMDTINST M6230.4F

Medical Services

Immunizations and Chemoprophylaxis

Headquarters
Departments of the Army,
the Navy,
the Air Force,
and the Coast Guard
Washington, DC
29 September 2006

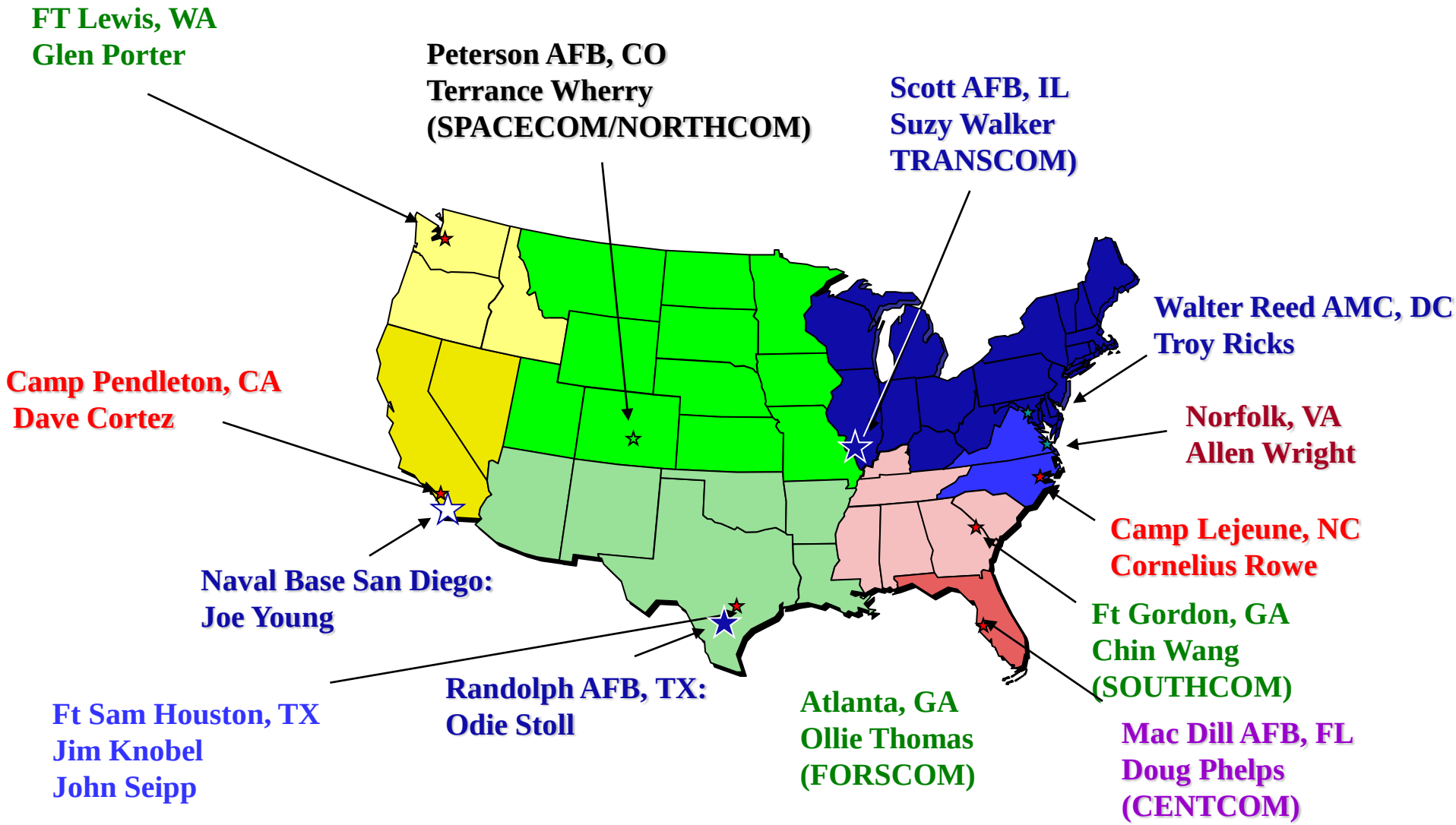
UNCLASSIFIED

MILVAX MISSION

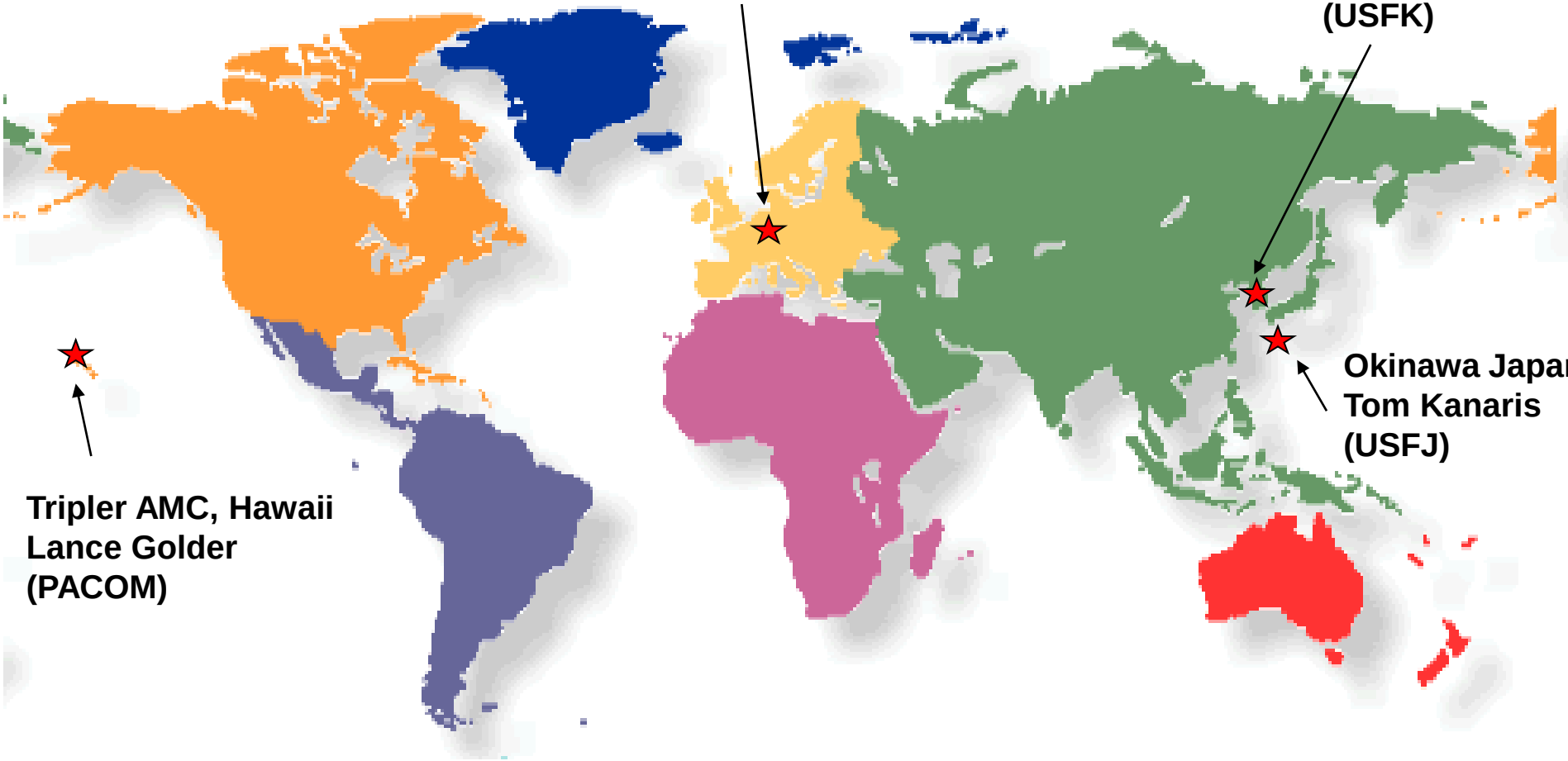
- Synchronize information, deliver education, and coordinate U.S. military immunization programs worldwide
- Assist senior leaders with policy development
- Promote quality in immunization delivery
- Enhance scientific understanding of vaccines

MILVAX REGIONAL ANALYSTS

17 Sites Worldwide



MILVAX ANALYSTS



ANTHRAX VACCINE IMMUNIZATION PROGRAM - The Official DoD Anthrax Information Web Site - Microsoft Internet ...

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Address http://www.anthrax.mil/ Go

http:// www.anthrax.mil

AVIP anthrax vaccine immunization program

search/sitemap
contact us

a matter of health. a matter of trust. a matter of national security.

THE THREAT | THE DISEASE | THE VACCINE | education toolkit | resource center

adverse event info | what's new | email sign-up

Your health and safety are our #1 concerns.

The anthrax vaccine is safe and effective.

The threat from anthrax is deadly and real.

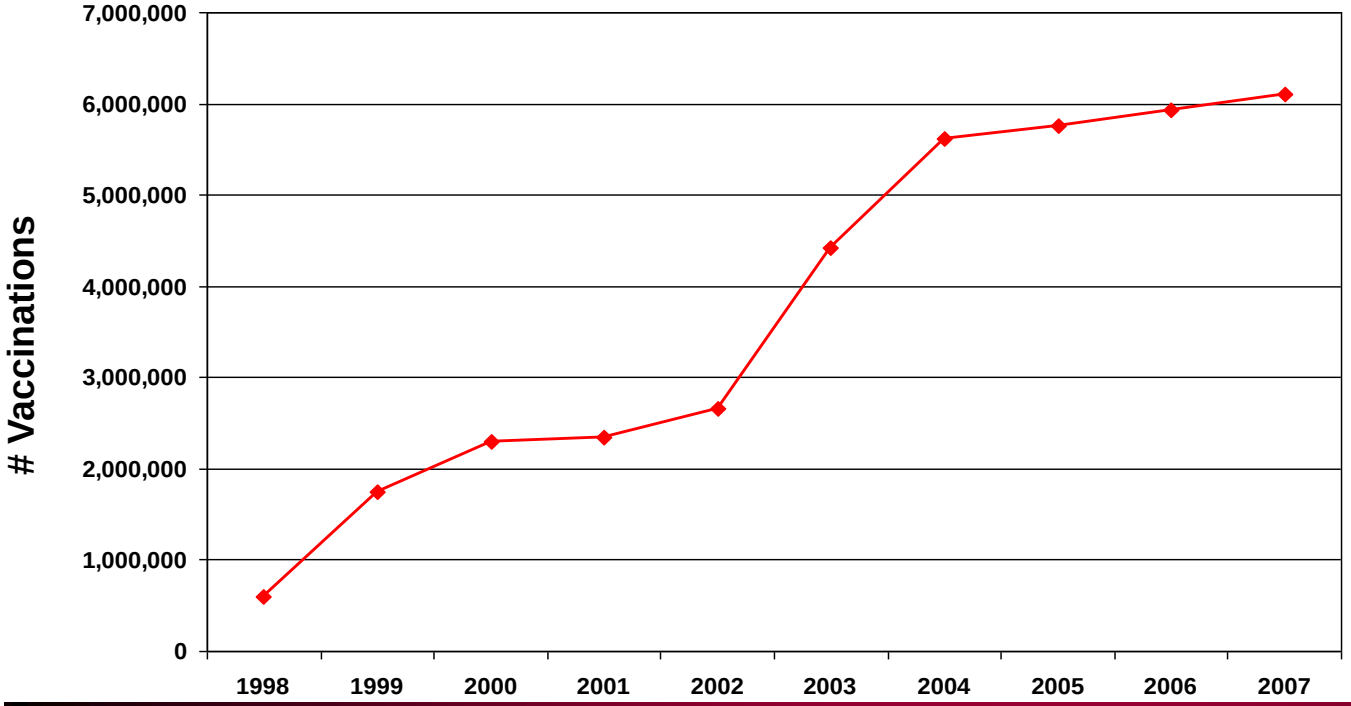
Vaccination offers a layer of protection in addition to antibiotics and other measures needed for certain members of the Armed Forces.

ANTHRAX VACCINATION PROGRAM POLICY

- Start Mar 98; resume Sep 02; expand Jun 04
- Injunction Oct 04;
  Emergency Use Authorization (EUA) Jan 05;
  FDA issued Final Order Dec 05
- DoD Policy Review between Dec 05 – Oct 06
- **DEPSECDEF announced new policy on 12 Oct 06:**
  - **<u>Mandatory</u> anthrax vaccinations for personnel deploying to higher risk areas (U.S. Central Command and Korea) and for other select units with unique missions. Includes some emergency-essential contractors and DoD civilians**
  - **<u>Voluntary</u> anthrax vaccinations for family members; other U.S. civilians in higher risk areas; and anyone that received one or more doses since 1998**
- ASD(HA) approved Service plans on 8 Feb 07

ANTHRAX VACCINATION PROGRAM

- Over 6 million doses to over 1.5 million personnel since March 1998
- FDA-approved vaccine production steady, inventory accumulating
- Safety: 26 published studies, on-going studies, plus concurrence of eight independent reviews
- Pending dose-reduction / Route change (FDA)



Cumulative Anthrax Vaccinations Since 01 Mar 98

DEERS data as of 25 Apr 07

MIL VAX - Microsoft Internet Explorer

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Address http://www.smallpox.army.mil

SMALLPOX VACCINATION PROGRAM

contact us

- THE DANGER
- THE VACCINE
- THE PRIORITY
- THE STRATEGY
- adverse event info
- education toolkit
- resource center

MIL VAX

- Smallpox is contagious, deadly, and would disrupt military missions.
- Smallpox vaccine prevents smallpox and we will use it carefully.
- Preserving the health and safety of our people is our top concern.
- The Defense Department's smallpox vaccination program is part of our national strategy to safeguard Americans against smallpox attack.

DoD Begins Smallpox Vaccination Program | SVP Online Proficiency Training | DoD's Smallpox Vaccination Lessons Learned | MM

Security Notice and External Link Disclaimer

Last Updated 01/24/2003

SMALLPOX VACCINATION PROGRAM

- Policy: Reviewed – Remains deploying individuals to higher threat areas and special response teams
- Status:
  - Screened: 1,276,581 – Vaccinated: 1,176,573
  - Primary: 80% – Male: 89%
- Exemption process working well
  - Eczema vaccinatum - 1 Progressive vaccinia - 0
  - VIG treatments more rare than expected - 6: Burn - 1, eye - 2, eczema vaccinatum - 1, unconfirmed eczema vaccinatum – 1, contact transmission - 1
- Education working well, but we can do better
  - Contact transfer vaccinia - 58: Family - 25, intimate - 20, friend - 13, patient – 0 *"Don't let guard down at home."*
  - Myo-pericarditis -137 - *data as of 21 March 2007*

A CASE OF ECZEMA VACCINATUM

- On 8 Mar 07, the Vaccine Healthcare Center was consulted by physicians from the University of Chicago Children's Hospital who identified a case of eczema vaccinatum (EV) in a 28-month-old male child and a less severe case of contact transfer in his mother.

- Child had a history of atopic dermatitis, a known risk factor for EV.

- Route of exposure - Father received smallpox vaccination on 26 Jan 07 at an Army Soldier Readiness Center. Due to a delay in deployment, he returned home from 16 – 20 Feb 07.

LESSONS LEARNED FROM A CASE OF ECZEMA VACCINATUM

- Screening is important – continuity training for clinicians is equally important

1. Do you NOW HAVE or have you EVER HAD Eczema or Atopic Dermatitis? (Usually this skin condition involves an itchy, red, scaly rash that lasts more than 2 weeks. It often comes and goes.) ● Yes ○ No ○ Unsure

5. Do you LIVE WITH anyone who NOW HAS or EVER HAD Eczema or Atopic Dermatitis? (Usually this skin condition involves an itchy, red, scaly rash that lasts more than 2 weeks. It often comes and goes.) ○ Yes ○ No ● Unsure

- Education is vital – It has to be routinely reemphasized
- Vaccine Healthcare Centers are valuable assets for DoD's unique vaccination programs
- Interagency cooperation requires education about military operational concerns

SOMEBODY IN YOUR HOUSEHOLD JUST GOT VACCINATED AGAINST SMALLPOX

What should you do?

Your mother was right: wash your hands ...
Good Hygiene is the Key!

By following the simple steps below, you can help keep your household safe.

1. **Bandages (to prevent touching the site)**
2. **Sleeves (long enough to prevent scratching)**
3. **Hand washing (with soap and hot water)**

What's going on?

Smallpox vaccine contains vaccinia virus. This virus cannot cause smallpox. The same vaccine was given to millions of Americans, including service members during World War II and up to 1990. Smallpox vaccine has been used for more than 200 years.

But this virus stays near the skin's surface for about 2 to 4 weeks, until the scab falls off. It spreads by touch. This means other people can pick up the vaccine virus and get infected. The vaccine virus is NOT spread by coughing, sneezing, or sexual contact.

Vaccinated people can prevent problems with three simple steps: use bandages, wear sleeves long enough to prevent scratching, and hand washing.

INFLUENZA VACCINATION PROGRAM

- Continue to protect the force – greater emphasis with pandemic concerns
- Status 2006-2007 season: 83%
- DoD sites used seasonal flu drive for “Mass Vaccination” training (pandemic preparedness – lessons learned)
- Vaccine procurement and distribution - Defense Supply Center Philadelphia (DSCP)
- FluMist® storage for 2007-2008 season more operationally supportive

Military Vaccine Agency (MILVAX) Overview

MilVax - Microsoft Internet Explorer

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Back Search

Address http://www.vaccines.mil/

www.vaccines.mil -or-

www.vaccines.army.smil.mil

MILVAX

Monday, April 30, 2007 5:20:25 PM ET

What's New | Quick Reference | Contact Us | Site Map

- Vaccines · Diseases
- Resource Center
- Education Toolkit
- Safety/Adverse Event
- Imz University

RSS

DoD Resumes Mandatory Anthrax Vaccinations for Select Groups

On 12 Oct 06, the DEPSECDEF directed a resumption of mandatory anthrax immunizations for higher threat areas and voluntary resumption of the anthrax immunization series in all Service members only partially immunized. DoD personnel will resume mandatory anthrax immunizations consistent with the FDA-licensed dose schedule (0, 2, and 4-weeks, and at 6, 12 and 18-months) and current standards for medical practice. On 6 Dec 06, the USD(P&R) issued Department of Defense implementation guidance. On 8 Feb 07, the ASD(HA) approved the Service implementation plans.

Mandatory vaccinations for all Services have been resumed.

more...

Immunization Training Available

Register to become the local subject matter expert on DoD vaccination programs, including anthrax & smallpox. Learn about program implementation and administration within your unit, electronic tracking systems, adverse

FDA Licenses First H5N1 Influenza Vaccine

On 17 Apr 07, the FDA licensed the 1st influenza vaccine against H5N1 made by Sanofi Pasteur. This vaccine was produced under contract to the U.S. Department of Health and Human Services as part of national pandemic preparedness initiatives.

Influenza Virus Vaccine, H5N1, is indicated for active immunization of persons 18 through 64 years of age at increased risk of exposure to the H5N1 influenza virus subtype contained in the vaccine.

more...

DoD Vaccine Price List

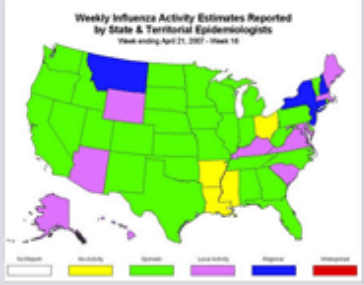
Review a consolidated price list for DoD vaccines, updated 05 Mar 07, to help ensure your organization is getting the best bang for their vaccine bucks. This summary list will help you identify quantity breaks, and other efficiencies when you purchase vaccines.

All About Anthrax

Have fun learning about vaccines and vaccine preventable diseases with our monthly crossword puzzle, brought to you by Immunization University.

more...

2006-07 Flu Season



more...

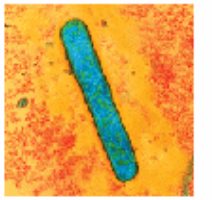
DoD Pandemic Influenza Resources

Home
Vaccines · Diseases
General Vaccine
Adenovirus
Anthrax
Botulism
Chickenpox
Diphtheria
DTaP, Td, Tdap
Haemophilus B
Hepatitis A
Hepatitis B
Human Papillomavirus
Influenza (pandemic)
Influenza (seasonal)
Japanese encephalitis
Lyme Disease
Measles
Meningococcal
Mumps
Pertussis
Plague
Pneumococcal
Polio
Rabies
Rotavirus
Rubella
Shingles
Smallpox
Tetanus
Tuberculosis (TB)
Tularemia
Typhoid
Yellow Fever
Resource Center

Anthrax

Bacillus anthracis

www.anthrax.mil AVIP



stain of anthrax

Anthrax is an acute infectious disease of animals that can be secondarily transmitted to humans. It is caused by a bacterium (Bacillus anthracis) that primarily affects sheep, horses, hogs, cattle, and goats and is almost always fatal in animals. The bacillus produces toxins that kill cells and cause fluid to accumulate in the body's tissues. Anthrax spores, which can survive for decades, are found in the soil, and animals typically contract the disease while grazing. Transmission to humans normally occurs through contact with infected animals but can also occur through eating meat from an infected animal or breathing air laden with the spores of the bacilli. The disease is almost entirely occupational, i.e., restricted to individuals who handle hides of animals (e.g., farmers, butchers, and veterinarians) or sort wool.

VIS | PACKAGE INSERTS | BROCHURES | INFO PAPER

NEWS

more...

- Reuters 31 Jul 06
  Western Canada anthrax outbreak worst in decades
- Washington Post 08 Jun 06
  Anthrax Victim Says He's Ready to Perform

POLICIES

more...

- Continuation of the Anthrax Vaccine Immunization Program (AVIP) *PDF* 22 Dec 05
  Author: Winkenwerder
- DoD Immunization Program for Biological Warfare Defense AFEB 2005-06 *PDF* 22 Aug 05
  Author: Armed Forces Epidemiological Board
- Exception to Policy for Anthrax Vaccination *PDF* 16 Aug 05
  Author: Chu
  Exception to Policy for Anthrax Vaccination of Forwarded Deployed Naval Forces (FDNF) and III Marine Expeditionary Force (III MEF) in the Resumption of the Anthrax Vaccination Program (AVIP) under the Emergency Use Authorization (EUA)

Rx CLINICAL

more...

- Safety Review *PDF* 06 Mar 06
  Detailed Safety Review of Anthrax Vaccine Adsorbed
- Anthrax Basics 29 Jan 04
- The National Academy of Sciences: The Anthrax Vaccine: Is It Safe? Does It 28 Jan 04

AC IP ACIP GUIDELINES

more...

- Use of Anthrax Vaccine in the United States *PDF* 15 Dec 00
  Recommendations of the Advisory Committee on Immunization Practices (ACIP)

AF EB AFEB RECOMMENDATIONS

more...

- DoD Immunization Program for Biowarfare Defense 22 Aug 05
  Recommendations of the Armed Forces Epidemiological Board (AFEB)

POLICIES

QUICK REFERENCE CHART | **POLICIES** | SERVICE MESSAGES | VACCINE RECOMMENDATIONS

	DoD	Army	Navy	Marines	Air Force	Coast Guard
General Vaccine	X	X	X		X	X
Adenovirus						
Anthrax	X	X	X	X	X	X
Botulism						
Chickenpox	X	X				
Diphtheria	X					
DTaP, Td, Tdap		X				
Haemophilus B						
Hepatitis A	X	X				
Hepatitis B	X	X			X	
Human Papillomavirus						
Influenza (pandemic)	X					
Influenza (seasonal)	X	X	X		X	
Japanese encephalitis						
Lyme Disease						
Measles		X				
Meningococcal						
Mumps						
Pertussis		X				
Plague						
Pneumococcal						
Polio	X					
Rabies						
Rotavirus		X				
Rubella		X				
Shingles						
Smallpox	X	X	X	X	X	X
Tetanus	X	X				
Tuberculosis (TB)		X				
Tularemia						
Typhoid						
Yellow Fever						

QUICK REFERENCE CHART | POLICIES | SERVICE MESSAGES | **VACCINE RECOMMENDATIONS**

DoD Vaccine Requirements for US Central Command Area of Responsibility (29 APR 05) Print

CENTCOM | EUCOM | USFK | By Age | By Military Segment

Vaccine	Infectious Hazard	Disease Effects	Microbe	Common Vaccine Side Effects	Required in CENTCOMAOR?	Dosing Schedule	Manufacturer	Vaccine Type	License Status
Anthrax (AVA, ANT)	Bioweapon	Skin infection, Death (common)	Bacillus anthracis (bacteria)	Injection-site swelling	As per DoD Policy	0, 2, 4w, 6, 12, 18m	BioPort	Inactivated	FDA Licensed
Hepatitis A	Food- or water-borne	Liver infection, death (rare)	Hepatitis A virus	Sore arm	All countries	0 + 6-18 m later	GSK, Merck	Inactivated	FDA Licensed
Hepatitis B	Blood-borne	Liver infection, chronic illness, death (rare)	Hepatitis B virus	Sore arm	Medical forces	0, 1, 6 m	GSK, Merck	Inactivated	FDA Licensed
Influenza A&B	Respiratory disease, especially in close quarters	Incapacitation, death (rare)	Influenza A and influenza B viruses	Sore arm	During fall-winter	each fall	SP, Chiron; MedImmune	Inactivated or Live	FDA Licensed
Measles-mumps-rubella (MMR)	Respiratory diseases	Incapacitation, death (rare)	Measles virus, mumps virus, rubella virus	Sore arm	If missed in basic training	1 dose	Merck	Live	FDA Licensed
Meningococcal A, C, Y, W-135 (MGC)	Respiratory disease, outbreaks in mid-Africa, Arabia	Meningitis, death (moderate)	Neisseria meningitidis (bacteria) (4 types)	Sore arm	African countries of CENTCOM	1 dose within 3 y	SP	Inactivated	FDA Licensed
Poliovirus inactivated (IPV)	Food- or water-borne, close to eradication	Paralysis, death (rare)	Polioviruses (3 types)	Sore arm	If missed in basic training	1 booster dose	SP	Inactivated	FDA Licensed
Rabies	Threat from infected animals, including bats	Death (common)	Rabies virus	Sore arm	Veterinarians, Special Ops	Pre: 3 doses + boosters	SP, Chiron	Inactivated	FDA Licensed
Smallpox (Vaccinia)	Bioweapon	Incapacitation, scars, death (common)	Variola virus	Itching, swollen lymph nodes, rash	All countries	1 dose, by DoD policy	Wyeth	Live	FDA Licensed
Tetanus-diphtheria (Td)	T--spores in soil, D--Respiratory	Paralysis, death (rare)	Clostridium tetani, Corynebacterium diphtheriae (bacteria)	Sore arm	All countries	1 dose, every 10 y	SP	Inactivated	FDA Licensed
Typhoid (Vi injectable or oral capsules)	Water-borne	Diarrhea, dehydration, death (rare)	Salmonella typhi (bacteria)	Sore arm	All countries	IM, 2y. Caps, 5 y.	SP; Berna	Inactivated or Live	FDA Licensed
Yellow fever (YF)	Mosquito-borne	Encephalitis, death (moderate)	Yellow fever virus	Sore arm	Horn of Africa	every 10 y	SP	Live	FDA Licensed

IMMUNIZATION UNIVERSITY

Informal collection of resources to enhance the skills of professionals and paraprofessionals. "Imz U" offers training through distance learning and on-site classes.

- **Training Resources**
  - **Project Immune Readiness (50 hours)**
  - **Immunization-Allergy Technician Course**
  - **Immunization Toolkit**
  - **Immunization Tracking Systems**
  - ***et cetera***
- **Clinic Quality Improvement Program (CQIP)**
- **"Six-Sided" Training & Competency Files**
- **Policies & Procedures (prototype SOPs)**
- **Communication Tools**
- **Clinical Guidelines for Managing Adverse Events**
- **Directory of Immunization Clinics**

Don't reinvent the wheel, learn from those around you…

PROJECT IMMUNE READINESS

>50 seat hours of CE credit: http://www.vhcinfo.org

https://www.projectimmunereadiness.amedd.army.mil/

CLINIC QUALITY IMPROVEMENT PROGRAM

	Clinic Self-Assessment Program				
	date:				
#	**Topic**	**Response**		**Comment**	**Tools, References, Resources**
1	**Immunization Availability**				
	What are your usual hours of operation? Which days of the week				
2	**Information and Education**				
a.	Show me the VISs you give to troops and beneficiaries.		a	If clinic personnel cannot show you these forms, it indicates need to either gather them or educate staff member on where the forms are located. Forms can be photocopied for distribution or laminated and placed on bulletin board.	http://www.cdc.gov/nip/publications/VIS/default.htm
3	**Storage and Handling**				
i.	What does your SOP say about Mass vaccination? What does it say about pre-drawing of vaccines into syringes and storage during the vaccination process?		i	Pre-drawing is not prefered, but can be done if certain conditions are met	http://www.usamma.army.mil/anthrax/info.htm
4	**Indications and contraindications to immunization**				
a.	What questions do you ask people before vaccinating them?		a	How do you feel today? Have you had prior adverse reactions to vaccinations?	http://www.immunize.org/catg.d/p4065scr.htm http://www.immunize.org/catg

MILVAX TRAINING

MILVAX conducts CONUS and OCONUS, no-cost, on-site training:

- **Immunization Leaders Course** – *3 day* (Four National Capital Region; Three Regional; Four OCONUS annually)
- **Immunization Basic Course** – *1 day*
- Regional Analysts perform local **site visits** at military clinics and **information briefings** for Servicemembers and leaders

ACCESSION SCREENING AND IMMUNIZATION PROGRAM (ASIP)

AFEB recommended on 16 April 2004 that the **Services screen for pre-existing immunity to vaccine-preventable diseases individualize immunizations administered at initial entry training locations.**

Status: Air Force program working; Army implemented program in Nov 05 with standardizes screening and immunization delivery at Army Basic Combat Training posts (Ft. Benning, Ft. Sill, Ft, Jackson, Ft. Knox, and Ft. Leonard Wood); Navy program in consideration.

Importance of Initiative: Optimizes medical care by reducing unnecessary immunizations, and improves readiness through better use of medical resources. Provides significant estimated cost avoidance (For the Army, estimated $40M by end of FY11),

MILITARY VACCINE MONITORING SYSTEM (MVMS)

- Continue to refine application to best support passive surveillance of H5N1 vaccinees
- Pursuing redundant (back-up) data entry methods

VACCINE HEALTHCARE CENTER (VHC) NETWORK

- On 8 Nov 06 the DoD Force Health Protection Committee (FHPC) approved the alignment of the Vaccine Healthcare Centers Network under MILVAX
- Congressional interest - National Defense Authorization Act 2007, Sec 732: *Prohibits the SecDef from downsizing or restructuring the Vaccine Healthcare Centers during FY07 and requires that funding for the centers be provided by each Military Department.*
- GAO review of VHC out-brief scheduled for 11 May 07

FOCUSED EFFORTS

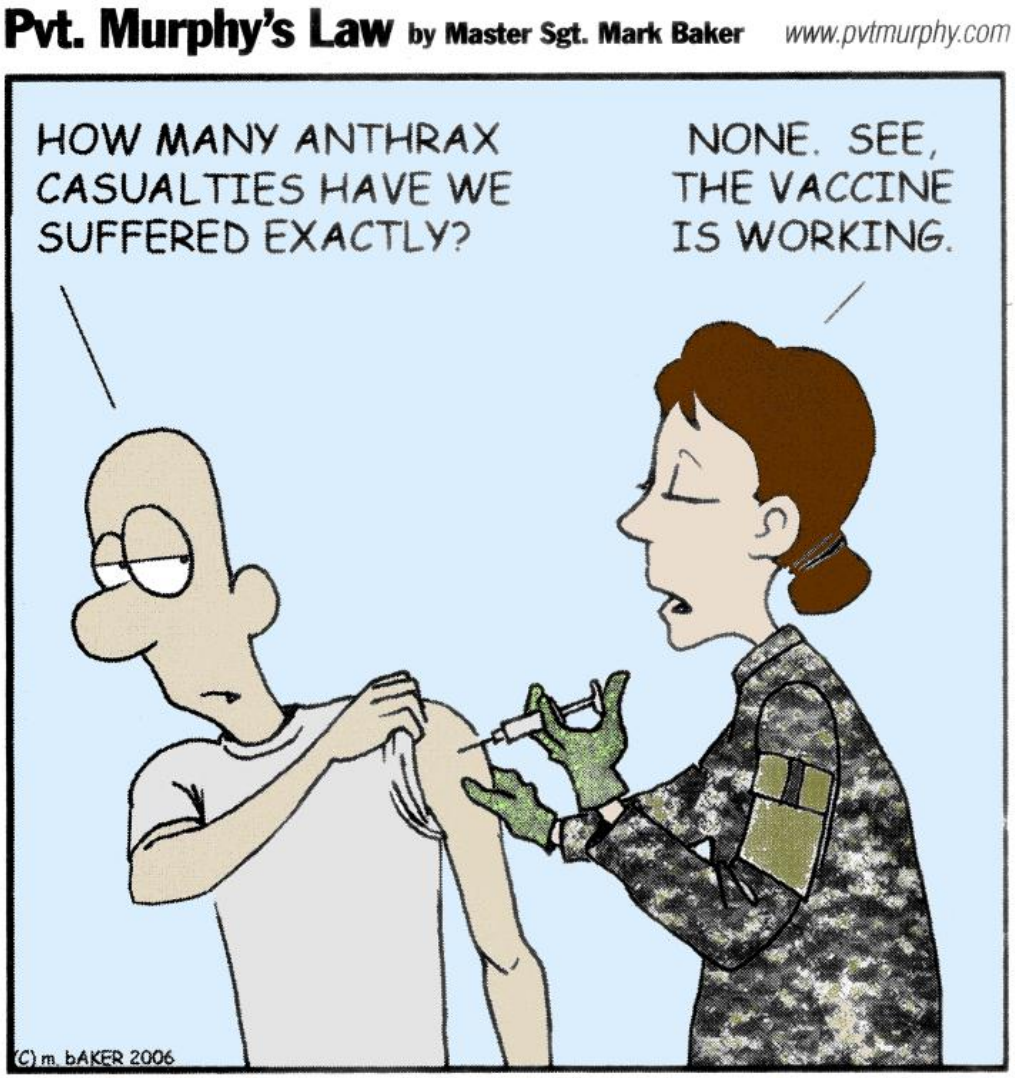
- Ensure immunizers are trained and providing the best vaccinations services possible
- Develop education outreach products that optimize the benefits of technology
- Change the leadership culture about exemptions
- Educate DoD and healthcare providers about the Vaccine Healthcare Center (VHC) and their services
- ACAM2000 Pharmacovigilance Plan w/ Acambis/JVAP/CDC/FDA (~Dec 07)
- Improve standardized immunization tracking and readiness reporting

CONCLUSION

- The threat continues
- Key leader support is critical to continued success
- Documentation is essential
- Education, risk communication, and continuous quality assurance are key
- Up-to-date vaccinations improve Force Readiness and are combat multipliers

QUESTIONS

QUESTIONS


Pvt. Murphy's Law by Master Sgt. Mark Baker
www.pvtmurphy.com
HOW MANY ANTHRAX CASUALTIES HAVE WE SUFFERED EXACTLY?
NONE. SEE, THE VACCINE IS WORKING.
(C) m. bAKER 2006

BACKUP SLIDES

Endemic Disease Threats (universal, occupational, +/or geographic)

- Hepatitis A
- Hepatitis B
- Influenza A & B
- Japanese Encephalitis
- Measles, Mumps, Rubella
- Meningococcal A,C,Y,W-135
- Papillomavirus (HPV)
- Poliomyelitis
- Rabies
- Tetanus, Diphtheria, Pertussis
- Typhoid Fever
- Varicella (chickenpox)
- Yellow Fever

Bioweapon Threats

Anthrax

Smallpox (vaccinia)

Desirable:

Adenovirus types 4, 7

Botulism

Meningococcal Group B

Plague

Malaria

AIDS

… Et cetera

On-line Shot Record (DD Form 2766C)

AKO – My Medical Readiness

Army Knowledge Online - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address https://www.us.army.mil/suite/portal/index.jsp

The 2007 Medical Command Training Guidance is now available on AKO - click here to download.

The CTG outlines a number of individual training requirements

JVM in your IE browser click Tools in the browser menu, then look for an entry for Sun Java Console. To determine if you have Flash go to the Macromedia site.

Deployment Health Assessments

MEDPROS
DEPLOYMENT HEALTH ASSESSMENTS
PRE POST PDHRA

Soldiers deploying or redeploying from theater can now complete their portion of the Pre, Post or Post Deployment Health Reassessment online before their scheduled deployment processing at which time a medical provider will complete the assessment with the Soldier. **Do not complete online unless instructed to do so by your Chain of Command.** Click here (Deployment Health Assessments) to begin your assessment.

Post Deployment Health Re-Assessment (PDHRA)

MEDPROS
POST DEPLOYMENT HEALTH REASSESSMENT

Soldiers deployed to a combat zone for more than 30 days are eligible to complete the Post Deployment Health Reassessment (PDHRA) 90-days after redeployment/de-mobilization. ** As a

According to the Medical Protection System (MEDPROS), you are being reported as not having a Medical Non-Deployable Profile. If this information is incorrect, please contact your unit MEDPROS Data Entry Clerk to have your status updated.
View Detailed Information

Medical Protection System (MEDPROS), you have a further action is required.
mation

GREEN: Dental Readiness
Your next Annual Dental Exam is due 3/27/2007.
View Detailed Information

GREEN: HIV
Your next HIV Test is due 11/26/2007.
View Detailed Information

GREEN: Immunization Profile
According to the Medical Protection System (MEDPROS), you are current on all of your Routine Adult Immunizations. You can download your Electronic Immunization Record (DD Form 2766C) after clicking on the View Detailed Information link located in the Immunization Alert. If the information on the DD Form 2766C is incorrect, please contact your unit MEDPROS Data Entry Clerk to have your status updated. You may be asked to provide copies of paper immunization records to support requested changes.
View Detailed Information

GREEN: Limited Duty Profile
According to the Medical Protection System (MEDPROS), you are being reported as not having a Limited Duty Profile that would preclude you from deploying. If this information is incorrect, please contact your unit MEDPROS Data Entry Clerk to have your status updated.
View Detailed Information

GREEN: Physical Readiness

Done Internet

Start 6:18 PM

Army Executive Agent Responsibilities

DoD Directive 6205.02E (dated 19 Sep 06)

The Secretary of the Army shall serve as Executive Agent for the <u>military immunization program</u>, funded through the centralized Defense Health Program. The Executive Agent shall:

- Establish a **MILVAX Office** to synchronize, integrate, and coordinate efforts in immunization services for all DoD Components. The purpose of these efforts is to facilitate and promote the quality of immunization policy, implementation, education, distribution, risk communication, administration, clinical services, safety surveillance, and program evaluation.

- Provide a comprehensive access point for information, education resources, and coordination of immunization-related activities for the Military Services.

- Monitor resources used in performing assigned responsibilities and functions.

- Develop uniform procedures to identify, report, and evaluate vaccine-associated adverse events.

Army Executive Agent Responsibilities

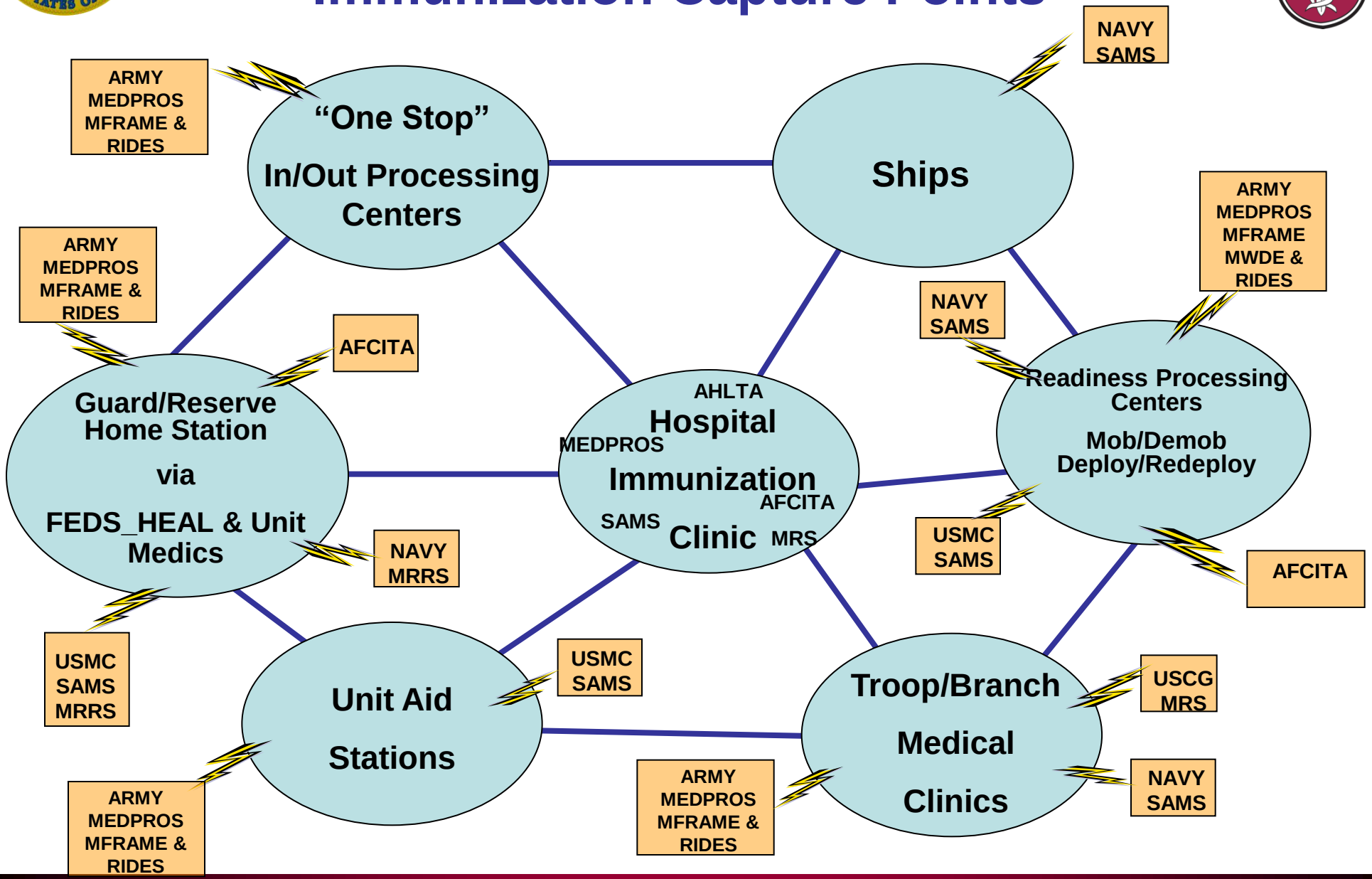
The Executive Agent shall (continued):

- In cooperation with the other Military Services, **develop metrics** to assess implementation of the military immunization program. These metrics shall be developed as indicators of readiness, effectiveness, safety, and compliance with overall policies.

- In cooperation with the other Military Services, **establish joint clinical quality standards** for immunization delivery, for immunization healthcare, and for the education and training of personnel involved in immunization healthcare. The goals of these standards are to promote clinical excellence and decrease practice variability.

- Periodically **report to the ASD(HA) and the AFEB** on the status of the military immunization program.

Immunization Capture Points



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