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SUBJ:ARMY RESUMES ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)

REF/A/DOC/DEPSECDEF/28 JUN 02//

APMN/DEPSECDEF MEMO, SUBJ: REINTRODUCTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)//

REF/B/MSG/HQDA/2 JUL 02//

APMN/ALARACT MSG, SUBJ: RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)//

REF/C/DOC/VCSA/24 SEP 02//

APMN/VCSA MEMO, SUBJ: ARMY ANTHRAX VACCINE IMMUNIZATION PROGRAM RESUMPTION EXECUTION PLAN //

SUBJ: ARMY RESUMES ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)

1. THE VCSA APPROVED THE ARMY'S ANTHRAX VACCINE IMMUNIZATION PROGRAM IMPLEMENTATION PLAN 24 SEP 02 AND DISTRIBUTED TO ARMY MACOMS FOR IMMEDIATE EXECUTION. THIS RESUMES VACCINATIONS OF MILITARY AND EMERGENCY-ESSENTIAL DOD CIVILIAN AND CONTRACTOR PERSONNEL ASSIGNED/DEPLOYING TO DESIGNATED HIGHER THREAT AREAS (HTA) FOR GREATER THAN 15 DAYS. THE VCSA'S APPROVAL MEMO AND ARMY PLAN CAN BE READ AND DOWNLOADED FROM

[HTTP://WWW.ANTHRAX.MIL/WHATSNEW/RESUMPTION.ASP](http://www.anthrax.mil/whatsnew/resumption.asp).

2. AS A REMINDER, THE FDA-APPROVED SCHEDULE FOR ANTHRAX VACCINE IS A 6-DOSE SERIES GIVEN: 0, 2, AND 4 WEEKS; THEN 6, 12, AND 18 MONTHS FOLLOWED BY ANNUAL BOOSTERS THEREAFTER. PERSONNEL WHO ARE ELIGIBLE TO RESUME IAW THIS PLAN, WHO PREVIOUSLY BEGAN THE ANTHRAX VACCINE DOSING SERIES, BUT DEFERRED DOSING DURING AVIP SLOWDOWNS, WILL RESUME VACCINATIONS WHERE THEY LEFT OFF. THEY WILL NOT BEGIN THE SIX-DOSE SERIES OVER AGAIN AT DOSE ONE. THIS IS CONSISTENT WITH GUIDANCE FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION'S ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES AND CONSULTATION WITH THE FDA.

3. THE AVIP REMAINS A COMMANDER'S RESPONSIBILITY TO BETTER ENSURE THEIR TROOPS' FORCE HEALTH PROTECTION. THE FOLLOWING ARE IMPORTANT

COMPONENTS OF EXECUTION.

A. IDENTIFY AND VACCINATE ONLY ELIGIBLE PERSONNEL IAW DOD POLICY. THE ARMY WILL VACCINATE PERSONNEL OVER A MULTI-YEAR PERIOD IAW THE FDA-APPROVED DOSING SCHEDULE, AND OSD POLICY.

(1) PRIORITY 1. DESIGNATED SPECIAL MISSION UNITS (SMUS) AND PERSONNEL INVOLVED IN ANTHRAX RESEARCH AND ANTHRAX VACCINE MANUFACTURING. DOD HAS BEEN VACCINATING THESE PERSONNEL SINCE THE JUN 01 SLOWDOWN POLICY. VACCINATION OF THESE PERSONNEL CONTINUES TODAY. COMMANDERS WILL SUBMIT REQUESTS FOR ADDITIONAL PERSONNEL/UNITS TO BE DESIGNATED AN SMU, BECAUSE THEIR DUTIES OR OCCUPATIONS PLACE THEM AT INCREASED RISK FOR EXPOSURE TO ANTHRAX THROUGH MACOMS TO HQDA, OFFICE OF THE SURGEON GENERAL, AVIP AGENCY, 5109 LEESBURG PIKE, FALLS CHURCH, VA 22041 FOR COORDINATION WITH AND APPROVAL BY HQDA, CJCS AND ASD(HA).

(2) PRIORITY 2. FORCES ASSIGNED OR DEPLOYED TO THE HTA FOR GREATER THAN 15 CONSECUTIVE DAYS. *[SECTION DELETED FROM THE WEB VERSION; MILITARY PERSONNEL REFER TO MESSAGE PASSED THROUGH MILITARY CHANNELS]*. OSD APPROVED THIS PRIORITY FOR EXECUTION IMMEDIATELY.

(A) COMMANDERS WILL SUBMIT REQUESTS FOR EXCEPTIONS (FOR EXAMPLE, PERSONS ROTATING INTO HTA REPEATEDLY FOR MORE THAN 15 CUMULATIVE DAYS IN A 12-MONTH PERIOD) THROUGH MACOMS TO HQDA, OFFICE OF THE SURGEON GENERAL, AVIP AGENCY, 5109 LEESBURG PIKE, FALLS CHURCH, VA 22041 FOR APPROVAL AND COORDINATION WITH HQDA, GAINING COMBATANT COMMAND, CJCS AND ASD(HA).

(B) PERSONNEL CURRENTLY DEPLOYED IN THE HTA, BUT DUE TO ROTATE OUT OF THE HTA ON OR BEFORE 4 NOV 02 WILL NOT BEGIN THE ANTHRAX VACCINE SERIES.

(3) PRIORITY 3. DESIGNATED EARLY-DEPLOYING FORCES. NOT OSD APPROVED FOR EXECUTION.

(4) PRIORITY 4. FORCES STATIONED OR ASSIGNED IN KOREA. NOT OSD APPROVED FOR EXECUTION.

(5) AT THIS TIME, OSD HAS APPROVED VACCINATIONS FOR PRIORITIES 1 AND 2 ONLY; ARMY WILL PUBLISH ADDITIONAL EXECUTION GUIDANCE ONCE OSD APPROVES PRIORITIES 3 AND/OR 4.

B. MANDATORY VACCINATION POLICY. MILITARY PERSONNEL UNDER THIS POLICY WILL INITIATE AND COMPLETE THE IMMUNIZATION SCHEDULE, UNLESS SPECIFICALLY EXEMPTED THROUGH AN ADMINISTRATIVE OR MEDICAL EXEMPTION, AS DETAILED IN THE ARMY PLAN, ANNEXES B AND C, RESPECTIVELY. AS WITH ALL IMMUNIZATIONS, MILITARY PERSONNEL DO NOT HAVE THE OPTION TO BE IMMUNIZED. IAW AR 600-20, ARMY COMMAND POLICY, COMMANDERS CAN ORDER THEIR SOLDIERS TO BE IMMUNIZED. ALTHOUGH EACH CASE WILL BE DETERMINED ON ITS OWN MERITS, SOLDIERS REFUSING AN ORDER MAY FACE ADVERSE ADMINISTRATIVE ACTION OR DISCIPLINARY ACTION UNDER THE UNIFORM CODE OF MILITARY JUSTICE. COORDINATE ACTIONS SUBSEQUENT TO ANY VACCINATION REFUSAL WITH YOUR SERVICING JUDGE ADVOCATE OR LEGAL ADVISOR.

C. VACCINE REQUISITION AND DISTRIBUTION. THE U.S. ARMY MEDICAL MATERIEL AGENCY (USAMMA) WILL COORDINATE THE DISTRIBUTION OF THE VACCINE TO THE SUPPORTING MEDICAL SUPPLY ACTIVITIES OF ALL SERVICES. PRIORITY 1 AND 2 INITIAL DISTRIBUTION IS ALREADY IN PLACE. END-USERS WILL DIRECTLY REQUISITION VACCINE IAW USAMMA GUIDELINES IN ANNEX D OF THE ARMY PLAN AS REQUIRED FOR AVIP SUSTAINMENT. POCS AT USAMMA:

(1) USAMMA DISTRIBUTION OPERATIONS CENTER COMM:
301-619-4121/4128/4198, DSN: 343-XXXX, FAX: DSN 343-4468. (2)
WEBSITE: [HTTP://WWW.ARMYMEDICINE.ARMY.MIL/USAMMA](http://www.armymedicine.army.mil/usamma).

D. EDUCATION OF PERSONNEL TO BE VACCINATED. COMMANDERS AND ARMY LEADERS AT ALL LEVELS ARE RESPONSIBLE TO EDUCATE THEIR PERSONNEL BEFORE VACCINATION. AT A MINIMUM, COMMANDERS AND OTHER LEADERS WILL BRIEF THEIR ELIGIBLE PERSONNEL AND PROVIDE THEM A COPY OF THE AVIP INFORMATIONAL TRIFOLD AS OUTLINED IN ANNEX E OF THE ARMY PLAN. YOUR LOCAL MEDICAL TREATMENT FACILITY WILL MAINTAIN A STOCK OF TRIFOLDS FOR YOUR USE. TEAM WITH LOCAL HEALTHCARE PROVIDERS AND OTHER SUBJECT MATTER EXPERTS (E.G. JUDGE ADVOCATE GENERAL AND PUBLIC AFFAIRS OFFICES) TO ASSIST WITH THIS EDUCATION. BE PROACTIVE AND ANSWER QUESTIONS UPFRONT. EDUCATIONAL TOOLS AND BRIEFINGS ARE AVAILABLE AT [HTTP://WWW.ANTHRAX.MIL](http://www.anthrax.mil).

E. ADVERSE EVENT MANAGEMENT. GET PERSONS APPROPRIATE MEDICAL EVALUATION IF THEY EXPERIENCE SYMPTOMS FOLLOWING ANTHRAX VACCINATION. SOME SYMPTOMS OR COMPLAINTS MAY BE CAUSED BY THE VACCINE-OTHERS MAY NOT-BUT EACH DESERVE APPROPRIATE MEDICAL ATTENTION, INDIVIDUAL CONCERN, AND EMPATHY. IF SYMPTOMS PERSIST, PROVIDERS, LEADERS, OR PATIENTS MAY CONTACT THE WALTER REED VACCINE HEALTHCARE CENTER AT 202-782-0411, FOR APPROPRIATE CONSULTATION, ADVICE, AND SPECIALIZED MEDICAL MANAGEMENT. REPORT ADVERSE REACTIONS IAW ANNEX C OF THE ARMY PLAN AND AR 40-562.

F. IMMUNIZATION TRACKING AND COMPLIANCE. ENSURE ALL UNIT IMMUNIZATIONS ARE POSTED AND TRACKED IN THE MEDICAL PROTECTION SYSTEM (MEDPROS), THE HQDA STANDARD FOR TRACKING ALL INDIVIDUAL MEDICAL READINESS INDICATORS IN THE ACTIVE AND RESERVE COMPONENTS. LEADERS AT ALL LEVELS CAN TRACK INDIVIDUAL AND UNIT COMPLIANCE USING MEDPROS, A MODERN, EASY TO USE, WEB-BASED TRACKING SYSTEM, ACCESSED AT [HTTP://WWW.MODS.ARMY.MIL](http://www.mods.army.mil) USERS MAY REQUEST LOGON ID DIRECTLY FROM THE WEB OR BY CALLING THE MODS HELP DESK AT DSN 761-4976 OR 1-888-849-4341. SUCCESSFUL COMMANDERS ASSIGN DESIGNATED PERSONNEL TO ROUTINELY ACCESS MEDPROS TO KEEP THEIR UNITS CURRENT. THE HQDA STANDARD FOR AVIP EXECUTION IS 90% COMPLIANCE OF ELIGIBLE PERSONNEL RECEIVING THEIR ANTHRAX VACCINATION AND 90% COMPLIANCE OF PERSONNEL RECEIVING EACH DOSE WITHIN 30 DAYS OF SCHEDULED DUE DATE. IF YOU GET BEHIND ENTERING/UPDATING IMMUNIZATION DATA, NEED MEDPROS TRAINING, OR NEED HELP GETTING STARTED, CONTACT THE MODS HELP DESK FOR ASSISTANCE.

4. HQDA POCS FOR THIS MESSAGE ARE COL RANDY RANDOLPH, LTC JOHN GRABENSTEIN, OR MR BILL WATSON, 703-681-5101 OR DSN 761-5101, OR EMAIL: AVIP@OTSG.AMEDD.ARMY.MIL.

5. EXPIRATION DATE CANNOT BE DETERMINED.

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