P 042202Z AUG 05 ZYB ZYW

FM CNO WASHINGTON DC//DNS//

TO NAVADMIN

BT

UNCLAS

NAVADMIN 188/05

MSGID/GENADMIN/CNO WASHINGTON DC/DNS/AUG//

SUBJ/EXTENSION OF EMERGENCY USE AUTHORIZATION TO RESUME ANTHRAX /VACCINATIONS//

REF/A/DOC/FDA/YMD:20050722//

REF/B/MSG/CNO (N09) WASHINGTON DC/201855ZMAY2005//

NARR/REF A IS THE COMMISSIONER OF FOOD AND DRUGS LETTER EXTENDING THE FDA'S EMERGENCY USE AUTHORIZATION (EUA) FOR USE OF ANTHRAX VACCINE. REF B IS NAVADMIN 110/05 INITIATING THE EMERGENCY USE AUTHORIZATION TO RESUME ANTHRAX VACCINATIONS//

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RMKS/1. PER REF A, THE FOOD AND DRUG ADMINISTRATION (FDA) HAS
GRANTED AN EXTENSION TO THE CURRENT EMERGENCY USE AUTHORIZATION
(EUA) FOR DOD'S ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)

- A. THIS MESSAGE EXTENDS REF B, WITHOUT CHANGE.
- B. ON 22 JULY 05 THE FDA APPROVED AN EXTENSION UNTIL 14 JAN 06.
- 2. PER REF B, COMMANDING OFFICERS AND OIC'S SHALL CONTINUE TO:
- A. SUBMIT THE EUA COMPLIANCE AGREEMENT AND WEEKLY REPORTS TO MILVAX AGENCY.
- B. EDUCATE ALL INDIVIDUALS ELIGIBLE FOR ANTHRAX VACCINATION UNDER THE EUA
- C. INFORM ALL INDIVIDUALS ELIGIBLE OF THE OPTION TO REFUSE ANTHRAX VACCINATION WITHOUT PENALTY.
- D. SUPPLEMENT THE TRIFOLD BROCHURE, WHENEVER POSSIBLE, WITH A BRIEF USING STANDARD BRIEFING SLIDES, AVAILABLE ELECTRONICALLY AT WWW.ANTHRAX.MIL/EUA.
- E. MAINTAIN A ROSTER OF ALL INDIVIDUALS PROVIDED THE EUA TRIFOLD BROCHURE AND BRIEF.
- F. ENSURE APPROPRIATE MEDICAL EVALUATION IF INDIVIDUALS EXPERIENCE SYMPTOMS FOLLOWING ANY VACCINATION.
- 3. MEDICAL ACTIVITIES OFFERING ANTHRAX IMMUNIZATIONS SHOULD EXERCISE SPECIAL CARE TO CONFIRM, PRIOR TO ADMINISTERING IMMUNIZATION, THAT THE INDIVIDUAL ELECTS TO RECEIVE ANTHRAX IMMUNIZATION.
- 4. PER REF B, ALL IMMUNIZATIONS WILL BE ENTERED INTO AN APPROVED ELECTRONIC TRACKING SYSTEM (ETS) THAT TRANSMITS DATA TO DEFENSE ENROLLMENT ELIGIBLITY REPORTING SYSTEM (DEERS). APPROVED NAVY SYSTEMS ARE, SHIPBOARD NON-TACTICAL ADP PROGRAM (SNAP) AUTOMATED MEDICAL SYSTEM (SAMS), THE MEDICAL READINESS REPORTING SYSTEM (MRRS) AND COMPOSITE HEALTH CARE SYSTEM VERSION II (CHCS II).
- A. DATA COLLECTED IN SAMS MUST BE TRANSMITTED TO THE NAVY MEDICAL INFORMATION MANAGEMENT COMMAND (NMIMC) FOR FURTHER ENTRY INTO DEERS.
- B. REFUSALS SHALL BE ENTERED INTO THE ETS UNDER THE CODE "MD" FOR "MEDICALLY DECLINED".
- C. IF THESE SYSTEMS ARE NOT ACCESSIBLE, ANNOTATE VACCINATION OR REFUSAL ON SF 600 IN MEMBERS MEDICAL RECORD OR PHS 731 YELLOW SHOT CARD.
- 5. THE AVIP REMAINS A COMMANDER'S FORCE HEALTH PROTECTION RESPONSIBILITY. COMMANDERS WILL CONTINUE TO EXECUTE AVIP ACCORDING TO GUIDANCE IN REF B.
- 6. SERVICE POCS:
- A. ACTIVE POC: OPNAV (N931) LCDR C. DONOHUE, (COMM) 703 601-1716,

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- 7. EXPIRATION DATE FOR THIS MESSAGE IS 14 JAN 06.
- 8. RELEASED BY VADM A. T. CHURCH III, DIRECTOR, NAVY STAFF.//BT