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MARADMIN 190/07

MSGID/GENADMIN/CMC WASHINGTON DC PPO PLN// SUBJ/RESUMPTION OF THE MANDATORY ANTHRAX VACCINE /IMMUNIZATION PROGRAM (AVIP)//  
REF/A/MSGID:MSG/CMC/230010ZJAN2006//  
REF/B/MSGID:DOC/DSD/12OCT2006//  
REF/C/MSGID:DOC/OSD PR/06DEC2006//  
REF/D/MSGID:MSG/CMC/261400ZJUL2006//  
REF/E/MSGID:MSG/CMC/281800ZJUL2005//  
REF/F/MSGID:MSG/CMC/161700ZMAY2005//  
REF/G/MSGID:DOC/ASD (FMP)/25JUN2001//  
REF/H/MSGID:DOC/ASD (NSCP)/26NOV1993//  
REF/I/MSGID:DOC/ASD (FMP)/10APR1992//  
REF/J/MSGID:DOC/ASD (FMP)/26JAN1996//  
REF/K/MSGID:DOC/OSD PR/22SEP2004//  
REF/L/MSGID:DOC/OSD PR/06AUG2002//  
REF/M/MSGID:DOC/OSD PR/06AUG2002//  
REF/N/MSGID:DOC/ASD (HA)/YMD:20060802//  
REF/O/MSGID:MSG/CMC/211717ZDEC2004//  
REF/P/MSGID:MSG/CMC/291717ZOC2004//  
REF/Q/MSGID:MSG/CMC/201615ZSEP2002//  
REF/R/MSGID:DOC/SECNAVINST 6230.4/28APR1998// REF/S/MSGID:DOC/BUMEDINST 6230.15A/29SEP2006// NARR/NARR/REF A IS MARADMIN 033/06 DIRECTING CONTINUATION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP).  
REF B IS DEPSECDEF MEMO DIRECTING IMPLEMENTATION OF THE MANDATORY ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP).  
REF C IS USD (P&R) MEMO DIRECTING IMPLEMENTATION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP).  
REF D IS MARADMIN 346/06, UPDATE TO MEDICAL READINESS REPORTING SYSTEM (MRRS) MARINE CORPS IMPLEMENTATION PLAN.  
REF E IS MARADMIN 342/05, EMERGENCY USE AUTHORIZATION (EUA) FOR ANTHRAX IMMUNIZATIONS EXTENDED.  
REF F IS MARADMIN 230/05, RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP) UNDER THE EMERGENCY USE AUTHORIZATION (EUA).  
REF G IS ASD (FM&P) MEMO NOTIFYING EMERGENCY-ESSENTIAL EMPLOYEES REGARDING ANTHRAX IMMUNIZATION REQUIREMENTS.  
REF H IS DOD DIRECTIVE 6205.3, DOD IMMUNIZATION PROGRAM FOR BIOLOGICAL WARFARE DEFENSE.  
REF I IS DOD DIRECTIVE 1404.10, EMERGENCY-ESSENTIAL (E-E) DOD U.S. CITIZEN CIVILIAN EMPLOYEES.  
REF J IS DOD INSTRUCTION 3020.37, CONTINUATION OF ESSENTIAL DOD CONTRACTOR SERVICES DURING CRISIS.  
REF K IS USD (P&R) MEMO DIRECTING EXPANSION OF FORCE HEALTH PROTECTION ANTHRAX AND SMALLPOX IMMUNIZATION PROGRAMS FOR EMERGENCY-ESSENTIAL AND EQUIVALENT DOD CIVILIAN EMPLOYEES.  
REF L IS USD (P&R) POLICY ON ADMINISTRATIVE ISSUES RELATED TO THE AVIP.  
REF M IS USD (P&R) ADMINISTRATIVE AND CLINICAL EXECUTION GUIDANCE FOR REINTRODUCTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP).  
REF N IS ASD (HA) POLICY ON CLINICAL ISSUES RELATED TO ANTHRAX VACCINATION.  
REF O IS MARADMIN 559/04, REVISED ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP) AND SMALLPOX VACCINATION PROGRAM (SVP) REPORTING REQUIREMENTS.  
REF P IS MARADMIN 479/04, ANTHRAX VACCINE IMMUNIZATION PROGRAM PAUSE.  
REF Q IS MARADMIN 502/02, REINTRODUCTION OF THE ANTHRAX VACCINE.

REF R IS SECNAVINST 6230.4, DEPARTMENT OF THE NAVY (DON) ANTHRAX VACCINATION IMPLEMENTATION PROGRAM (AVIP).

REF S IS BUMEDINST 6230.15A, IMMUNIZATION AND CHEMOPROPHYLAXIS.// GENTEXT/REMARKS/ 1. THIS MARADMIN DISSEMINATES GUIDANCE REGARDING THE MANDATORY RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP) FOR DESIGNATED PERSONNEL AND VOLUNTARY RESUMPTION OF AVIP FOR ELIGIBLE PERSONNEL.

## 2. BACKGROUND

A. ON 15 DEC 05, THE FOOD AND DRUG ADMINISTRATION (FDA) ISSUED A FINAL RULE AND FINAL ORDER ON THE LICENSURE OF ANTHRAX VACCINE ADSORBED (AVA) DETERMINING THAT AVA IS LICENSED FOR THE PREVENTION OF ANTHRAX, REGARDLESS OF ROUTE OF EXPOSURE. FOLLOWING PUBLICATION OF THE FDA FINAL RULE AND FINAL ORDER, THE DEPARTMENT OF DEFENSE (DOD) UNDERTOOK A REVIEW OF BIODEFENSE VACCINATION PROGRAMS. ON 12 OCT 06, THE DEPUTY SECRETARY OF DEFENSE DIRECTED A RESUMPTION OF MANDATORY AVA IMMUNIZATION FOR PERSONNEL ASSIGNED TO DESIGNATED GEOGRAPHIC LOCATIONS (HIGHER THREAT AREAS) OR TO SPECIAL MISSION UNITS AND VOLUNTARY AVA IMMUNIZATION FOR ALL SERVICE MEMBERS ONLY PARTIALLY IMMUNIZED PER REF (B).

B. ON 6 DEC 06, THE UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS (USD (P&R)) ISSUED DETAILED INSTRUCTIONS (REF (C)) TO IMPLEMENT THE RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP).

C. THE DOD WILL RESUME AVA IMMUNIZATIONS CONSISTENT WITH THE FDA LICENSED DOSE SCHEDULE (0-, 2-, AND 4-WEEKS, AND 6-, 12- AND 18-MONTHS AND ANNUAL BOOSTERS) AND CURRENT STANDARDS FOR MEDICAL PRACTICE.

3. CMC INTENT. IMPLEMENT THE DOD RESUMPTION OF THE MANDATORY AND VOLUNTARY AVIP AS SOON AS PRACTICABLE IOT PROTECT PERSONNEL AND PRESERVE COMBAT EFFECTIVENESS IN THE EVENT OF AN ANTHRAX ATTACK. WHILE THE THREAT OF AN ANTHRAX ATTACK CANNOT BE QUANTIFIED, THE EARLY VACCINATION OF OUR FORCES REMAINS THE MOST EFFECTIVE FORCE PROTECTION MEASURE.

## 4. EXECUTION

A. THE MARINE CORPS WILL RESUME MANDATORY ANTHRAX VACCINATIONS FOR ITS DESIGNATED PERSONNEL AND NOTIFY THEM OF THE CHANGES IN ACCORDANCE WITH REFS (B) AND (C). THE INTENT OF THIS AUTHORIZATION IS TO PRESERVE THE EFFECTIVENESS OF THE COMMAND, AS WELL AS PROTECT INDIVIDUALS, AGAINST WEAPONIZED ANTHRAX. COMMANDERS WILL MANAGE IMMUNIZATION REFUSALS AS THEY WOULD ADDRESS ANY REFUSAL TO OBEY A LAWFUL ORDER.

### B. APPLICABILITY AND SCOPE

(1) MANDATORY. THE FOLLOWING PERSONNEL WILL RESUME MANDATORY ANTHRAX IMMUNIZATIONS, EXCEPT AS PROVIDED UNDER MEDICAL AND ADMINISTRATIVE EXEMPTION POLICIES. BECAUSE BIOTHAX IS LICENSED FOR THE PREVENTION OF ANTHRAX DISEASE IN 18- TO 64-YEAR OLD PERSONNEL, VACCINATION CANNOT BE MADE MANDATORY FOR PERSONS UNDER THE AGE OF 18, OR OVER THE AGE OF 64. IAW REF (S), USE OF THIS VACCINE IN SUCH INDIVIDUALS MAY ONLY BE PRESCRIBED BY A PRIVILEGED PROVIDER, AND ONLY ON A VOLUNTARY, CASE-BY-CASE BASIS, WHERE BENEFITS ARE JUDGED TO OUTWEIGH RISKS.

(A) MILITARY PERSONNEL SERVING IN U.S. CENTRAL COMMAND (USCENTCOM) AREA OF RESPONSIBILITY (AOR), ASHORE AND AFLOAT, FOR 15 OR MORE CONSECUTIVE DAYS.

(B) U.S. PACIFIC COMMAND FORWARD DEPLOYED NAVAL FORCES AND III MARINE EXPEDITIONARY FORCE (III MEF) ASSIGNED OR DESIGNATED AS EARLY DEPLOYERS (C-DAY TO C+20) TO THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS.

(C) U.S. MARINE CORPS FORCES SPECIAL OPERATIONS COMMAND (MARSOC); DESIGNATED SPECIAL MISSION UNITS; DESIGNATED UNITS WITH HOMELAND

DEFENSE MISSIONS; AND OTHER UNITS EXPLICITLY DESIGNATED BY THE ASD (HA).

(D) SELECTED MARINE CORPS RESERVE (SMCR) UNITS AND INDIVIDUAL AUGMENTEES THAT WILL BE ASSIGNED TO THE USCENTCOM AOR OR KOREA WILL HAVE THEIR ANTHRAX VACCINATIONS PROVIDED BY THE GAINING FORCE COMMANDER IF THE CONCEPT OF DEPLOYMENT ACCOMMODATES THE INTEGRATION OF FORCES PRIOR TO DEPLOYMENT.

(E) SMCR UNITS THAT DEPLOY DIRECTLY INTO A HIGH THREAT AOR ARE AUTHORIZED TO EXECUTE VACCINATIONS IAW INSTRUCTIONS PROVIDED IN THIS MARADMIN WHEN DIRECTED BY COMMARFORRES.

(F) DOD CIVILIAN EMPLOYEES. IAW REFS (G) THROUGH (K), ANTHRAX VACCINATION FOR EMERGENCY-ESSENTIAL AND EQUIVALENT DOD CIVILIAN EMPLOYEES, ASSIGNED OR DESIGNATED EARLY DEPLOYERS (C-DAY TO C+20) SERVING IN USCENTCOM AOR OR THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS IS MANDATORY, SUBJECT TO ESTABLISHED MEDICAL AND ADMINISTRATIVE EXEMPTION POLICIES. CONTACT LOCAL CIVILIAN PERSONNEL ADVISORY CENTERS FOR GUIDANCE ON MEETING LABOR-RELATIONS OBLIGATIONS. "EQUIVALENT DOD CIVILIAN EMPLOYEES" ARE DOD EMPLOYEES WHOSE DUTIES MEET ALL THE REQUIREMENTS OF 10 USC 1580, BUT WHO HAVE NOT BEEN DESIGNATED AS "EMERGENCY ESSENTIAL."

(G) CONTRACTORS. IF VACCINATION AND RELATED CARE ARE REQUIRED IN RELEVANT CONTRACTS, UNIT LEADERS WILL PROVIDE ANTHRAX VACCINATIONS TO MISSION-ESSENTIAL CONTRACTED WORKERS SERVING IN USCENTCOM AOR AND ON THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS. OTHER INDIVIDUALS APPROVED BY ASD (HA) CONSISTENT WITH REF (B).

(H) COMMANDERS WILL SUBMIT REQUESTS FOR EXCEPTION TO POLICY THROUGH MARFOR/MEF AND HQMC, HEALTH SERVICE (HS) TO HQDA, OFFICE OF THE SURGEON GENERAL, MILITARY VACCINE AGENCY, 5113 LEESBURG PIKE, FALLS CHURCH, VA 22041 FOR APPROVAL AND FOR COORDINATION WITH GAINING COMBATANT COMMAND, CJS AND ASD (HA).

(2) VOLUNTARY. BECAUSE BIOTHRAX IS LICENSED FOR THE PREVENTION OF ANTHRAX DISEASE IN 18- TO 64-YEAR OLD PERSONNEL, VACCINATION IS VOLUNTARY FOR PERSONS UNDER THE AGE OF 18, OR OVER THE AGE OF 65. IAW REF (S), USE OF THIS VACCINE IN SUCH INDIVIDUALS MAY ONLY BE PRESCRIBED BY A PRIVILEGED PROVIDER, AND ONLY ON A VOLUNTARY, CASE-BY-CASE BASIS, WHERE BENEFITS ARE JUDGED TO OUTWEIGH RISKS. THE FOLLOWING CATEGORIES OF INDIVIDUALS, NOT SUBJECT TO MANDATORY VACCINATION, ARE ELIGIBLE FOR VOLUNTARY VACCINATIONS:

(A) UNIFORMED ACTIVE DUTY OR SMCR PERSONNEL, REGARDLESS OF CURRENT DUTY ASSIGNMENT, IF THEY PREVIOUSLY RECEIVED AT LEAST ONE DOSE OF ANTHRAX VACCINE DURING OR AFTER 1998 AND IF THEY ARE NOT CURRENTLY SUBJECT TO MANDATORY VACCINATION. FOR THESE INDIVIDUALS, CONTINUING THE DOSING SERIES IS RECOMMENDED BUT NOT REQUIRED.

(B) DOD CIVILIAN EMPLOYEES AND U.S. CITIZEN CONTRACTOR PERSONNEL OTHER THAN THOSE REFERED TO IN PARAGRAPHS 4B(1)(F) AND 4B(1)(G), ASSIGNED FOR 15 OR MORE CONSECUTIVE DAYS TO THE U.S.CENTRAL COMMAND AREA OF RESPONSIBILITY AND KOREA INCLUDING DESIGNATED EARLY DEPLOYERS C-DAY TO C+20.

(C) ADULT FAMILY MEMBERS, 18-65 YEARS OF AGE ACCOMPANYING DOD MILITARY AND CIVILIAN PERSONNEL FOR 15 OR MORE CONSECUTIVE DAYS TO THE USCENTCOM AOR OR KOREA.

(D) U.S. CITIZEN ADULT FAMILY MEMBERS, 18-65 YEARS OF AGE ACCOMPANYING U.S. CONTRACTOR PERSONNEL FOR 15 OR MORE CONSECUTIVE DAYS TO THE USCENTCOM AOR OR KOREA.

(E) U.S. GOVERNMENT CIVILIAN EMPLOYEES OF DOD, NO LONGER IN THE HIGHER THREAT AREA, WHO HAVE RECEIVED AT LEAST ONE DOSE OF ANTHRAX VACCINE.

C. SERVICE MEMBERS RESUMING ANTHRAX VACCINATIONS WILL CONTINUE THE DOSING SERIES WHERE THEY LEFT OFF. THESE SERVICE MEMBERS WILL NOT NEED TO REPEAT ANY DOSES ALREADY RECEIVED IN THE SERIES. THIS IS CONSISTENT WITH GUIDANCE FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP) AND THE FOOD AND DRUG ADMINISTRATION (FDA). CONTINUING VOLUNTARY ANNUAL VACCINE BOOSTERS BEYOND THE SIX-DOSE SERIES IS CONSISTENT WITH THE FDA-LICENSED DOSE SCHEDULE AND IS PERMITTED FOR PERSONNEL WITHOUT A CURRENT DUTY ASSIGNMENT ASSOCIATED WITH THE HEIGHTENED RISK OF EXPOSURE.

D. REGT/GROUP LEVEL COMMANDS AND HIGHER WILL APPOINT AN OFFICER AS THE AVIP OFFICER (AVIP O) FOR EACH UNIT THAT REQUIRES THE VACCINE. REGT/GROUP COMMANDING OFFICERS MAY DELEGATE THIS AUTHORITY TO THE BN/SQDN AS REQUIRED. THE AVIP O WILL COMPLETE AND RETURN A REGISTRY AGREEMENT, A CHECKLIST AND USE A REGISTRY REPORT FORM PROVIDED BY THE MILITARY VACCINE AGENCY (MILVAX). MILVAX WILL THEN AUTHORIZE VACCINATIONS TO BEGIN. A MONTHLY REPORT MUST BE SUBMITTED TO MILVAX UTILIZING THE GUIDANCE IN PARAGRAPH 5B. EACH AVIP O WILL BE GUIDED IN HIS/HER DUTIES BY THIS MARADMIN AND ALL APPLICABLE REFERENCES.

E. EDUCATION REQUIREMENTS FOR DESIGNATED RECEIPIENTS. COMMANDERS WILL ENSURE THAT SERVICE MEMBERS ARE CONTINUALLY EDUCATED CONCERNING THE INTENT AND RATIONALE FOR BOTH ROUTINE AND THEATER-SPECIFIC OR THREAT-SPECIFIC MILITARY IMMUNIZATION STANDARDS. PERSONNEL WILL BE EDUCATED USING THE 12 OCTOBER 2006 OR LATER VERSION OF THE DOD TRIFOLD UTILIZING THE GUIDANCE IN PARAGRAPH 5(H)(4).

F. PRE-VACCINATION SCREENING. MEDICALLY SCREEN PATIENTS PRIOR TO IMMUNIZATIONS TO ENSURE THERE ARE NO CONTRAINDICATIONS FOR RECEIVING THE VACCINE.

(1) ADMINISTERING MILITARY TREATMENT FACILITIES AND UNIT AID STATIONS SHOULD SCREEN ALL PERSONNEL RECEIVING ANTHRAX VACCINATIONS TO IDENTIFY IF VACCINATION IS MANDATORY OR VOLUNTARY. CLINIC LEADERSHIP WILL ESTABLISH AND IMPLEMENT QUALITY CONTROL MEASURES TO PREVENT ERRORS (E.G., MANDATORY VACCINATIONS OF INDIVIDUALS IN THE VOLUNTARY CATEGORY) CONSISTENT WITH THIS POLICY. THIS INCLUDES PROVIDING AN AVIP INFORMATION TRIFOLD TO EACH VACCINEE. FOLLOW THE CURRENT DEPARTMENT OF DEFENSE DIRECTIVES AND CENTER FOR DISEASE CONTROL AND PREVENTION (CDC) AND SERVICE GUIDELINES.

(2) PERSONNEL WILL RECEIVE MANDATORY ANTHRAX IMMUNIZATIONS WHILE ASSIGNED TO SPECIFIED DUTIES WITHIN THE CENTCOM AOR, KOREA AND III MEF. UPON REDEPLOYMENT TO CONUS OR WITH CHANGE IN DUTY STATUS IDENTIFIED ABOVE, PERSONNEL WILL NO LONGER BE REQUIRED TO RECEIVE MANDATORY ANTHRAX IMMUNIZATIONS.

(3) VACCINATIONS FOR PERSONNEL ON ORDERS TO THE LISTED LOCATIONS MAY BEGIN/RESUME ANHTRAX VACCINE UP TO 60 DAYS BEFORE DEPARTURE.

G. COMMANDS ISSUING ORDERS FOR PERMANENT CHANGE OF STATION, AND FOR TEMPORARY DUTY OR ANNUAL TRAINING LASTING MORE THAN 15 CONSECUTIVE DAYS TO LOCATIONS COVERED BY THE MANDATORY PROGRAM, WILL INCLUDE IN THE ORDERS THE REQUIREMENT TO START OR RESUME ANTHRAX VACCINATIONS AT THE LOSING INSTALLATION NOT EARLIER THAN 60 DAYS PRIOR TO ARRIVAL IN KOREA, III MEF OR USCENCOM AOR. THE GOAL IS TO ACHIEVE AT LEAST THE FIRST THREE DOSES OF THE SIX-DOSE SERIES OR ANNUAL/BOOSTER PRIOR TO ARRIVAL IN THEATER.

H. RESERVE COMPONENT (RC) PERSONNEL. RC PERSONNEL SHALL BE IN A DUTY STATUS WHEN RECEIVING ANY DOD-DIRECTED IMMUNIZATION. UNIT COMMANDERS MUST ENSURE PERSONNEL RECEIVING ANTHRAX VACCINATION ARE ELIGIBLE AND ARE IN A DUTY STATUS.

(1) AN ADVERSE REACTION TO A DOD-DIRECTED IMMUNIZATION IS A LINE OF DUTY (LOD) CONDITION. RC MEMBERS WHO INCUR OR AGGRAVATE ANY INJURY,

ILLNESS, OR DISEASE WHILE PERFORMING ACTIVE DUTY FOR LESS THAN 30 DAYS, OR ON INACTIVE DUTY TRAINING ARE ENTITLED TO MEDICAL CARE APPROPRIATE FOR THE TREATMENT OF THE INJURY, ILLNESS, OR DISEASE. WHEN AN RC MEMBER PRESENTS FOR TREATMENT AT A MILITARY TREATMENT FACILITY EXPRESSING A BELIEF THAT THE CONDITION FOR WHICH TREATMENT IS SOUGHT IS RELATED TO RECEIVING AN IMMUNIZATION DURING A PERIOD OF DUTY, THE MEMBER MUST BE EXAMINED AND PROVIDED NECESSARY MEDICAL CARE.

(2) SUBMIT REPORTS TO THE VACCINE ADVERSE EVENTS REPORTING SYSTEM (VAERS).

WHEN TREATMENT HAS BEEN RENDERED OR THE INDIVIDUAL'S EMERGENT CONDITION IS STABILIZED, LINE OF DUTY (LOD) BENEFITS WILL BE REQUESTED USING THE MARINE CORPS MEDICAL ENTITLEMENTS DATABASE SYSTEM (MCMEDS) AS SOON AS POSSIBLE.

FOR INJURIES, ILLNESSES, OR DISEASE UNRELATED TO DUTY, RC MEMBERS SHOULD SEEK MEDICAL ATTENTION FROM THEIR PERSONAL HEALTHCARE PROVIDERS. RESERVE MEDICAL DEPARTMENT REPRESENTATIVES WILL ENSURE ACCURATE LOD DATA IS ENTERED IN THE MEDICAL READINESS REPORTING SYSTEM (MRRS).

I. ANTHRAX VACCINATIONS PROVIDED IN OTHER VENUES. DOD PERSONNEL (E.G., EMBASSIES AND MISSIONS OF THE DEPARTMENT OF STATE) MAY PROVIDE VACCINATIONS IN OTHER VENUES, PROVIDED THAT THE REQUIREMENTS IN THIS MESSAGE AND REF (C) ARE FULFILLED.

5. ADMINISTRATION AND LOGISTICS. COMMANDERS WILL FOLLOW GUIDANCE PROVIDED IN REFS (B) THROUGH (Q) TO PROPERLY IDENTIFY AND EDUCATE PERSONNEL TO BE VACCINATED, AND DOCUMENT AND TRACK IMMUNIZATIONS. ENSURE APPROPRIATE MEDICAL EVALUATION IF SUCH PERSONNEL EXPERIENCE SYMPTOMS FOLLOWING ANY VACCINATION.

A. THE ANTHRAX VACCINATION PROGRAM REMAINS A LEADER'S RESPONSIBILITY TO BETTER ENSURE THEIR SERVICE MEMBERS, DOD CIVILIANS AND CONTRACTORS FORCE HEALTH PROTECTION. EXPERIENCE SHOWS THAT EDUCATION IS PIVOTAL TO AVIP SUCCESS AND SERVICE MEMBERS ACCEPTANCE. COMMANDERS SHOULD REVIEW THE "EDUCATION TOOL KIT" AND THE "QUESTION AND ANSWERS" POSTED ON THE WEBSITE, [WWW.ANTHRAX.MIL/AVIP2007](http://WWW.ANTHRAX.MIL/AVIP2007) OR [WWW.VACCINES.MIL/ANTHRAX](http://WWW.VACCINES.MIL/ANTHRAX), GIVEN THAT THESE ARE THE MOST FREQUENTLY ASKED QUESTIONS BY SERVICE MEMBERS AND THEIR FAMILIES. UNCLASSIFIED REFERENCES AND PROCEDURES AND EDUCATIONAL TOOLS ARE AVAILABLE AT THE SAME LOCATION.

B. REGISTRY AGREEMENTS. IOT ENSURE ALL VACCINATION PROGRAM REQUIREMENTS ARE FULFILLED, DISTRIBUTION OF ANTHRAX VACCINE WILL BE LIMITED TO SITES WHERE A COMMAND AVIP O HAS SUBMITTED TO THE MILITARY VACCINE AGENCY (MILVAX), THE REQUIRED REGISTRY AGREEMENT AND CHECKLIST. SUBMISSION OF THIS AGREEMENT AFFIRMS THEY HAVE READ THE PROGRAM REQUIREMENTS, COMPLETED TRAINING, AND WILL ENSURE THE PROGRAM REQUIREMENTS ARE FOLLOWED. ONCE THE REGISTRY AGREEMENT IS SUBMITTED, MILVAX WILL AUTHORIZE THE ORGANIZATION TO BEGIN VACCINATIONS.

ORGANIZATIONS WITH APPROVED REGISTRY AGREEMENTS MUST SUBMIT MONTHLY REPORTS TO AVIPREPORTS@AMEDD.ARMY.MIL OR VACCINES@HQDA-S.SMIL.MIL BY THE FIFTH OF EVERY MONTH, FOR ACTIVITIES OF THE PREVIOUS MONTH. ORGANIZATIONS WITH PREVIOUSLY APPROVED COMPLIANCE AGREEMENTS ARE NOT REQUIRED TO SUBMIT A NEW REGISTRY AGREEMENT AS LONG AS THE AVIP O HAS NOT CHANGED. A NEGATIVE REPORT IS REQUIRED.

C. RECORDING IMMUNIZATIONS. ALL IMMUNIZATIONS WILL BE IMMEDIATELY ENTERED INTO THE MEMBER'S HEALTH RECORD AND AN APPROVED IMMUNIZATION TRACKING SYSTEM THAT TRANSMITS DATA TO DEERS. MRRS (REF (D)) IS CURRENTLY IN USE WITHIN THE MARINE CORPS. THE DATE OF THE IMMUNIZATION RECORDED IN THE ELECTRONIC SYSTEM MUST BE THE SAME AS THE MEDICAL RECORD. ALL REFUSALS SHALL BE DOCUMENTED IN THE MEDICAL RECORD.

D. REPORTING REQUIREMENTS

(1) MONTHLY REPORTING REQTS IAW REF (O), REMAIN IN EFFECT.

(2) IMMEDIATE REPORTING REQTS. REPORT ANY UNAUTHORIZED IMMUNIZATIONS TO THE MILVAX, AVIPREPORTS@AMEDD.ARMY.MIL, AS SOON AS RECOGNIZED, WITHOUT WAITING FOR THE NEXT REPORTING CYCLE.

(3) MARFOR/MEF AVIP O WILL PROVIDE IMMEDIATE COPY OF REPORTS TO HQMC CODES PL, PO AND HS FOR ANY UNAUTHORIZED VACCINATION GIVEN TO INCLUDE:

(A) FOR PERSONNEL NO LONGER DEPLOYED TO A HIGHER THREAT AREA OR NO LONGER ASSIGNED TO DESIGNATED UNITS WITH SPECIAL MISSION ROLES.

(B) CIVILIAN EMPLOYEES OR CONTRACTORS NOT CURRENTLY SUBJECT TO MANDATORY VACCINATIONS.

(C) THE REPORT SHALL INCLUDE A FULL EXPLANATION OF THE CIRCUMSTANCES INVOLVED, INCLUDING THE NUMBER OF PERSONNEL. COPY OF THE REPORTS WILL BE SUBMITTED TO HQMC HEALTH SERVICES (CODE HS).

E. VACCINE DISTRIBUTION WILL CONTINUE IAW LOGISTICS GUIDANCE FOUND IN REF (Q). AVIP O WILL DETERMINE VACCINE REQUIREMENTS FOR THEIR UNITS AND SUBMIT A REQUEST TO MEF MILVAX COORDINATOR. MEF MILVAX COORDINATOR WILL BE ALLOWED TO REQUEST VACCINE FROM USAMMA'S WEBSITE FOR ELIGIBLE UNITS.

F. KEY MESSAGES TO SERVICE MEMBERS, CIVILIAN EMPLOYEES, CONTRACTORS AND OTHERS

(1) YOUR HEALTH AND SAFETY ARE OUR NUMBER ONE CONCERN.

(2) THE VACCINE IS SAFE AND EFFECTIVE.

(3) THE THREAT FROM ANTHRAX IS DEADLY AND REAL.

(4) VACCINATION OFFERS A LAYER OF PROTECTION IN ADDITION TO ANTIBIOTICS AND OTHER MEASURES THAT ARE NEEDED FOR CERTAIN MEMBERS OF THE ARMED FORCES.

(5) VACCINE INFORMATION STATEMENTS (VIS) AND AVIP TRIFOLDS ARE AVAILABLE AT [WWW.ANTHRAX.MIL/AVIP2007](http://WWW.ANTHRAX.MIL/AVIP2007).

G. MEDICAL ISSUES

(1) PREGNANCY. DOD POLICY IS TO DEFER ROUTINE ANTHRAX VACCINATIONS UNTIL AFTER PREGNANCY. IMMUNIZATION CLINICS AND PROVIDERS WILL DISPLAY A PROMINENT WRITTEN SIGN DIRECTING WOMEN TO ALERT THE TECHNICIAN OR PROVIDER IF THEY THINK THEY MIGHT BE PREGNANT.

(2) ALL FEMALES OF CHILDBEARING AGE WILL BE ASKED ABOUT THE POSSIBILITY OF PREGNANCY PRIOR TO RECEIVING THE VACCINE. THE FOLLOWING QUESTION, RECOMMENDED BY THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), SHOULD BE USED ON ANY LOCALLY APPROVED QUESTIONNAIRE/OVERPRINT, "ARE YOU PREGNANT OR IS THERE A CHANCE YOU COULD BECOME PREGNANT DURING THE NEXT MONTH?" IF WOMEN HAVE ANY QUESTIONS OR CONCERNS, THEY SHOULD CONSULT WITH THEIR HEALTHCARE PROVIDER BEFORE RECEIVING THE VACCINE.

H. LOGISTICS. COLLECT ALL PREVIOUS AVIP TRIFOLD BROCHURES FROM DECEMBER 2005 OR EARLIER AND DISCARD THEM. DO NOT RETAIN THEM FOR FUTURE USE. BE SURE TO REMOVE OBSOLETE TRIFOLDS FROM PAMPHLET RACKS IN WAITING ROOMS, ON BULLETIN BOARDS, INTRANETS, ETC.

(1) VACCINES ARE DIRECTLY REQUISITIONED IAW UNITED STATES ARMY MEDICAL MATERIEL AGENCY (USAMMA). LOCAL MEDICAL LOGISTICS SUPPORTING ELEMENTS MUST HAVE SUFFICIENT REFRIGERATION CAPACITY TO PRESERVE VACCINE INTEGRITY, INCLUDING TEMPERATURE ALARMS AND BACK-UP POWER CAPACITY.

(2) POCS AT USAMMA: USAMMA IS RESPONSIBLE FOR COORDINATING THE DISTRIBUTION OF ANTHRAX VACCINE WITHIN DOD. APPROVED USERS WILL ORDER FROM USAMMA DISTRIBUTION OPERATIONS CENTER COMM:

301-619-4318/4307/4198, DSN: 343-XXXX, FAX: DSN 343-4468. WEBSITE: [WWW.USAMMA.ARMY.MIL](http://WWW.USAMMA.ARMY.MIL) AND THEN CLICK ON VACCINES/TEMPERATURE SENSITIVE PRODUCTS. INSTRUCTIONS ON ORDERING CAN BE FOUND AT [WWW.USAMMA.ARMY.MIL/VACCINES/ANTHRAX/ANTXHOME.HTM](http://WWW.USAMMA.ARMY.MIL/VACCINES/ANTHRAX/ANTXHOME.HTM)

(3) WHEN USAMMA RECEIVES THE VACCINE ORDER, IT WILL SHIP AVIP TRIFOLDS TO THE REQUESTOR (ONE FOR EACH DOSE ORDERED). TRIFOLDS SENT WITH THE VACCINE ARE FOR THE IMMUNIZATION CLINIC/BAS TO DISSEMINATE TO PATIENTS.

(4) INSTALLATIONS CAN ORDER TRIFOLDS FOR COMMANDERS, AVIP TEAM MEMBERS, AND OTHER KEY PERSONNEL. ADDITIONAL TRIFOLDS FOR POST-WIDE EDUCATION OR COMMANDER'S CALLS CAN BE ORDERED DIRECTLY FROM USAMMA OR DOWNLOADED FROM THE MILVAX WEBSITE, [WWW.ANTHRAX.MIL/AVIP2007](http://WWW.ANTHRAX.MIL/AVIP2007).

(5) ORDERING TRIFOLDS FOR PROGRAM START-UP: E-MAIL USAMMADOC@DET.AMEDD.ARMY.MIL OR VACCINES@AMEDD.ARMY.MIL, PLACING "TRIFOLD ORDER" IN THE SUBJECT LINE. STATE NUMBER OF TRIFOLDS NEEDED AND PROVIDE SHIPPING ADDRESS.

(6) ANTHRAX VACCINE IS TEMPERATURE SENSITIVE. THE VACCINE MUST BE STORED WITHIN THE APPROPRIATE TEMPERATURE RANGE (2-8 DEGREES CELSIUS) THROUGHOUT THE ENTIRE VACCINATION PROCESS. IT SHOULD BE REMOVED JUST PRIOR TO ADMINISTERING THE SHOT. THIS VACCINE GENERALLY SHOULD NOT BE "PRE-DRAWN" FOR ADMINISTRATION. THE USAMMA WEB SITE PROVIDES ADDITIONAL GUIDANCE ON HANDLING, STORAGE, TRANSPORTATION, AND ADMINISTRATION OF ANTHRAX VACCINE. WEBSITE: [WWW.USAMMA.ARMY.MIL](http://WWW.USAMMA.ARMY.MIL) AND THEN CLICK ON VACCINES/TEMPERATURE SENSITIVE PRODUCTS. EMAIL: USAMMADOC@DET.AMEDD.ARMY.MIL.

I. DOSING SCHEDULE. PEOPLE RESUMING ANTHRAX VACCINATIONS UNDER THIS POLICY WILL CONTINUE THE DOSING SERIES WITH THE NEXT DOSE DUE. THEY WILL NOT NEED TO REPEAT ANY DOSES OR RESTART THE SERIES. THIS IS CONSISTENT WITH GUIDANCE FROM THE CDC AND ITS ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP). WHEN A DOSE CANNOT BE PROVIDED ON THE SPECIFIC DATE INDICATED BY THE SCHEDULE, PROVIDE IT AS SOON AS PRACTICAL THEREAFTER. DO NOT SHORTEN THE RECOMMENDED INTERVALS BETWEEN DOSES.

(1) CONSISTENT WITH THE FDA APPROVED DOSING SCHEDULE FOR ANTHRAX VACCINE, ALL PERSONNEL WHO BEGAN THE SIX DOSE IMMUNIZATION SERIES DURING OR AFTER 1998 (UNLESS EXCLUDED FOR MEDICAL REASONS (REF N)) OR ADMINISTRATIVE REASONS (REF (M)), WILL BE OFFERED ALL SIX DOSES AND THE ANNUAL BOOSTER AS LONG AS THEY REMAIN MEMBERS OF THE ARMED FORCES ON ACTIVE DUTY OR IN THE SELECTED RESERVE OR MAINTAIN A CIVILIAN EMPLOYEE OR CONTRACTOR STATUS COVERED BY THE PROGRAM. PERSONNEL NO LONGER DEPLOYED TO A HIGHER THREAT AREA OR NO LONGER ASSIGNED TO DESIGNATED SPECIAL MISSION ROLES, CAN COMPLETE THE SERIES AND RECEIVE ANNUAL BOOSTER DOSES ON A VOLUNTARY BASIS.

(2) ALL COMMANDS, MEDICAL TREATMENT FACILITIES AND UNIT AID STATIONS SHOULD DEVELOP ROUTINE PROCEDURES TO DETERMINE WHEN PERSONNEL NEED SUBSEQUENT DOSES OF ANTHRAX VACCINE, UNLESS MEDICALLY OR ADMINISTRATIVELY EXEMPT, AT EACH OF THE FOLLOWING OPPORTUNITIES:

(A) DURING IN- AND OUT-PROCESSING TO AN INSTALLATION, UNIT, OR TRAINING SCHOOLS.

(B) WHEN SCREENING FOR INFLUENZA OR OTHER IMMUNIZATIONS.

(C) BASED ON ELECTRONIC IMMUNIZATION TRACKING SYSTEM SHOTS-DUE REPORTS.

(D) DURING DEPLOYMENT READINESS PROCESSING IN PREPARATION FOR OVERSEAS MOVEMENT.

(E) UPON REDEPLOYMENT FROM A COMBAT ZONE.

(F) DURING BIRTH-MONTH PERSONNEL AND MEDICAL RECORDS AUDITS.

(G) DURING PERIODIC HEALTH ASSESSMENTS.

(H) DURING OTHER ROUTINE OR OTHER PERIODIC ENCOUNTERS.

J. VACCINE ADVERSE EVENT REPORTING SYSTEM (VAERS). VAERS REPORTS SHOULD BE SUBMITTED BY PROVIDERS IN CASES OF ADVERSE, UNUSUAL OR SEVERE REACTION TO THE ANTHRAX VACCINATION, ANY REACTION RESULTING IN HOSPITALIZATION OR TIME LOST FROM DUTY (MORE THAN 24 HOURS), OR CONTAMINATED LOTS. ALSO, BY ANY PATIENT WHO BELIEVES THAT THEY HAVE HAD AN UNUSUAL OR SEVERE REACTION. VAERS REPORTS CAN BE SUBMITTED DIRECTLY TO THE [WWW.VAERS.HHS.GOV](http://WWW.VAERS.HHS.GOV) SITE. SUBMISSION OF A VAERS-1 REPORT

IS NOT AN INDICTMENT AGAINST A VACCINE, IT SIMPLY FACILITATES REVIEW OF TEMPORALLY ASSOCIATED SYMPTOMS AND ADDS TO THE SAFETY DATABASE FOR EACH VACCINE.

K. VACCINE HEALTHCARE CENTER (VHC) NETWORK. THE VHC NETWORK IS A TEAM OF CLINICAL VACCINE EXPERTS WHO ASSIST PATIENTS AND HEALTHCARE PROVIDERS WITH TREATMENT OF HEALTH PROBLEMS BEFORE AND AFTER VACCINATIONS, ASSIST WITH MEDICAL EXEMPTIONS, AND TEACH SERVICE MEMBERS AND THEIR FAMILIES ABOUT VACCINES. THE VHC CAN ALSO ASSIST WITH FILING VAERS REPORTS AND DOCUMENT EXEMPTIONS.

(1) THE NAVY REGIONAL VHC IS LOCATED AT NAVY MEDICAL CENTER PORTSMOUTH, VA (757 953-9150. DSN 377-9150).

(2) THE ARMY REGIONAL VHCS ARE LOCATED AT WALTER REED ARMY MEDICAL CENTER, WASHINGTON, DC (202-782-0411; DSN 662-0411) AND FORT BRAGG, NC (910-432-4015; DSN 239-4015).

(3) ANYONE WITH VACCINE RELATED QUESTIONS CAN ALSO CONTACT THE DOD CLINICAL CALL CENTER'S 24-HOUR TOLL-FREE NUMBER AT 1-866-210-6469.

L. POCS FOR THIS MESSAGE ARE:

(1) HQMC (PP&O); CWO3 S. R. SINGH, SERVICE POC (703) 692-4369.

(2) HQMC (PP&O); MR. C. CLARKE, ASST SERVICE POC (703)614-5157 (DSN 224).

(3) HQMC (HS); CDR E. F. FEEKS (USN), PREVENTIVE MEDICINE OFFICER, (703)614-4478 (DSN 224).

(4) HQMC (I&L/LPC); HMC (FMF/SW/AW) K. W. BURNETTE, MEDICAL LOGISTICS (703) 695-8934 (DSN 225).

6. COMMAND AND SIGNAL. THIS MARADMIN IS EFFECTIVE IMMEDIATELY UPON RELEASE, APPLIES TO THE MARINE CORPS TOTAL FORCES, AND ITS EXPIRATION CANNOT BE DETERMINED.//

Classification: UNCLASSIFIED

Caveats: NONE