



DEPARTMENT OF DEFENSE  
ARMED FORCES EPIDEMIOLOGICAL BOARD  
5109 LEESBURG PIKE  
FALLS CHURCH, VA 22041-3258



REPLY TO  
ATTENTION OF

AFEB (15-1a) 98-6

09 January 1998

MEMORANDUM FOR THE ASSISTANT SECRETARY OF DEFENSE (HEALTH AFFAIRS)  
THE SURGEON GENERAL, DEPARTMENT OF THE ARMY  
THE SURGEON GENERAL, DEPARTMENT OF THE NAVY  
THE SURGEON GENERAL, DEPARTMENT OF THE AIR FORCE

SUBJECT: Recommendation on Jet Injectors

1. At its 11 December 1997 meeting, the Armed Forces Epidemiological Board (AFEB) was briefed on the use of jet injectors for the delivery of certain vaccines. In addition, the Board had the opportunity to observe the use of such devices at its April 1997 meeting at the Marine Corps Recruit Depot (MCRD), Parris Island. Further, the Board reviewed the 20 November 1997 letter from the manufacturer of Ped-O-Jet to Dr. Edward Martin [ASD-(HA)] advising the Board to discontinue the use of this device until studies could be performed to show that no risk is present for blood-borne disease transmission. The Board also reviewed the 09 December 1997 memorandum from Colonel Joel Lamy (Director, Directorate of Medical Materiel; Defense Logistics Agency) to the staff director, Defense Medical Standardization Board, that the use of the current jet injectors used within DOD (Medi-Jet and Ped-O-Jet) be discontinued until reassurances of their safety are received.

2. Published data from the Centers for Disease Control and Prevention (CDC) were also available to the Board, demonstrating that once contaminated, the Medi-Jet device can transmit blood borne diseases and is not adequately disinfected with alcohol or acetone swabbing.

3. Concurrently, however, the Board is:

a. Aware of the significant time and money savings resulting from routine jet injector use in mass delivery of vaccines in the recruit setting.

b. The highly probable safety record of the use of this product in the military (however, active prospective surveillance studies have not been performed)

4. Therefore, the Board makes the following recommendations:


- a. **THERE ARE NO CURRENT DATA TO COUNTERACT THE CURRENT RECOMMENDATION THAT JET INJECTORS NOT BE USED WITHIN THE DOD FOR ROUTINE IMMUNIZATION.**

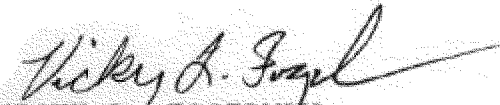
09 January 1998

- b. TO THE EXTENT POSSIBLE, NEWER TECHNOLOGY JET INJECTORS SHOULD BE USED THAT ARE DESIGNED SUCH THAT THE PART OF THE DEVICE THAT COMES INTO HUMAN SKIN CONTACT IS DISPOSABLE AND HENCE MAY ELIMINATE ANY RISK OF BLOOD BORNE DISEASE TRANSMISSION RISK.
- c. THAT STUDIES WHICH MAY HAVE BEEN DONE IN THE RECENT PAST OR ARE CURRENTLY ONGOING BE REVIEWED BEFORE FURTHER RECOMMENDATIONS ARE MADE BY THIS BOARD.
- d. AT THOSE SITES OR SITUATIONS WHERE JET INJECTORS ARE CONTINUING TO BE USED, A MEMORANDUM BE ISSUED, EFFECTIVE IMMEDIATELY, REVIEWING: 1) PROPER DEVICE USE AND DISINFECTION. 2) THAT STANDARDIZED TRAINING IN THE ABOVE BE COMPLETED BY ALL PERSONS USING SUCH DEVICES.
- e. THE BOARD CONCURS WITH THE CONTINUED USE OF JET INJECTORS FOR MASS IMMUNIZATIONS IN THE EVENT OF A PUBLIC HEALTH EMERGENCY.

3. The above recommendations were approved by the Infectious Disease Control Subcommittee, and by the full Board on 12 December 1997.

FOR THE ARMED FORCES EPIDEMIOLOGICAL BOARD:

  
GERALD F. FLETCHER, M.D.  
AFEB President

  
VICKY L. FOGELMAN  
Colonel, BSC, USAF  
AFEB Executive Secretary

CF:  
The Surgeon General, USA  
The Surgeon General, USAF  
The Surgeon General, USN  
Board Members  
DASG-ZH  
AFMOA/CC  
Ch, Prev Med Div, OTSG-DA  
Ch, Prev Med Div, OTSG-DAF  
Dir. Occup Hlth & Prev Med Div, BUMED-DN  
CDR, WRAIR  
CDR, USAMEDCOM, ATTN: MCHO-CL-W  
CDR, USACHPPM, ATTN: MCHB-DP  
CDR, U.S. MPMC-ZA  
Navy Env. Health Center  
Dir, Med Resources, Plans & Policy Div. (N931)  
Head, Epi Dept., NEPMU 5  
CDR Barbara A. Braden, USCG  
COL Andrew S. Warde, BvetMed Msc MRCVS  
LCOLE Frank Souter, CFMS