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THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

OCT 23 1996

MEMORANDUM FOR: ASSISTANT SECRETARY OF THE ARMY (M&RA)

ASSISTANT SECRETARY OF THE NAVY (M&RA)

ASSISTANT SECRETARY OF THE AIR FORCE (MRAI&E)

SUBJECT: Hepatitis B Immunization Policy for Department of Defense Medical and Dental Personnel

This memorandum prescribes interim policy for hepatitis B immunization of medical and dental personnel, pending issuance of a revision of Department of Defense Instruction 6205.2, Immunization Requirements, dated October 9, 1986.

All Service members who hold qualification or assignment in medical or dental career fields shall be required to complete a series of three immunizations against hepatitis B, or to show evidence of prior completion of three immunizations.

There is no requirement to screen Service members by testing for hepatitis B surface antigen or antibody in order to implement this policy. Existing hepatitis B serologic information documented in health records may permit exemption from immunization, or may require evaluation of clinical privileging, as described below.


Service members who have any of the three conditions below are exempt from the immunization requirement:

(1) Known positive serum hepatitis B surface antigen. Such personnel who are clinically privileged shall have documentation at each renewal of privileging that their Military Treatment Facility Credentials Committee has evaluated their potential for transmitting hepatitis B during invasive procedures. In delineating privileges, the privileging authority shall fully consider the clinical status of each individual, based on his or her specific situation and scope of practice. It is Department of Defense policy that Credentials Committees shall recommend curtailment of the privileges of providers who are at high risk for transmitting hepatitis B, as shown by positive serum hepatitis B E antigen or positive serum hepatitis B DNA, in such invasive procedures as cardiac surgery. In situations where a question of defining a provider's scope of privileges arises, Credentials Committees shall seek expert assistance from the facility's parent Service Consultant in Preventive Medicine. Limitation of clinical privileges under this policy is medical rather than administrative, and shall not be considered as an adverse action against the individual.

- (2) A past history of recovery from hepatitis B, with known positive serum antibody to hepatitis B surface antigen. There is no requirement for Credentials Committee evaluation of this status.
- (3) A disease or medical condition that would make hepatitis B immunization inadvisable in the judgement of the Service member's physician. Such a condition shall be adequately documented in the individual's medical record.

The same requirement, with the same provisions and exemptions, shall apply to all Department of Defense civilian personnel, including trainees, volunteers, and other temporary staff, with duties involving direct patient contact who are hired or begin activity on or after January 1, 1997. Currently employed civilian personnel involved in direct patient contact are strongly encouraged to have hepatitis B immunization. The same requirement, with the same provisions and exemptions, shall be incorporated into contracts for civilian medical personnel who provide care within Department of Defense medical and dental treatment facilities.

This policy is effective immediately. Forward two copies of implementing documents to the Assistant Secretary of Defense (Health Affairs) within 120 days.

  
Stephen C. Joseph, M.D., M.P.H.

**HA POLICY 97-006**

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