

OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE WASHINGTON, DC 20301-1200

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HEALTH AFFAIRS

MEMORANDUM FOR SURGEON GENERAL, ARMY SURGEON GENERAL, NAVY SURGEON GENERAL, AIR FORCE DIRECTOR, MILITARY VACCINE AGENCY

SUBJECT: 2009 H1N1 Vaccine Provision for Beneficiaries with High Risk Medical Conditions

The 2009 H1N1 vaccine is now arriving at military treatment facilities. This vaccine includes vaccine specifically designated for uniformed personnel, dependents and retirees, or Department of Defense (DoD) civilian employees.

Previous guidance describing which population groups may receive vaccine from each vaccine source remains in place (Department of Defense Pandemic Vaccine Guidance for Novel Influenza A (H1N1) September 30, 2009 and 2009 H1N1 Vaccine Policy for Family Members and Retirees Residing in the Continental United States including Alaska and Hawaii, September 30, 2009). However, regardless of the vaccine source or intended target population, available vaccine should be provided to any beneficiary wishing to be immunized who has a medical condition that places them at a higher risk for influenza-related complications. This does not pertain to age-based target groups, but does include medical conditions such as pregnancy, chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, cognitive, neurologic/ neuromuscular, hematologic or metabolic disorders (including diabetes mellitus), and immunosuppression (including immunosuppression caused by medications or by human immunodeficiency virus as described in the Centers for Disease Control and Prevention document: Use of Influenza A (H1N1) 2009 Monovalent Vaccine. Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2009 (http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5810a1.htm).

As vaccine availability increases, there will be an adequate supply of vaccine for all those wishing to be immunized.

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Force Health Protection and Readiness