

161700Z MAY 05

MARADMIN 230/05

MSGID/GENADMIN/CMC WASHINGTON DC PPO PLN//

SUBJ/RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP)
/UNDER THE EMERGENCY USE AUTHORIZATION (EUA)//

REF/A/MSG/CMC/291717Z OCT 2004//

REF/B/DOC/FDA/02 FEB 2002//

REF/C/DOC/USD (PR)/29 APR 2005//

REF/D/DOC/DEPSECDEF/28 JUN 2004//

REF/E/DOC/ASD (FMP)/25 JUN 2001//

REF/F/DOC/ASD (NSCP)/26 NOV 1993//

REF/G/DOC/ASD (FMP)/10 APR 1992//

REF/H/DOC/ASD (FMP)/26 JAN 1996//

REF/I/DOC/USD (PR)/22 SEP 2004//

REF/J/DOC/USD (PR)/06 AUG 2002//

REF/K/DOC/ASD (HA)/06 AUG 2002//

REF/L/MSG/CMC/111800Z MAY 2004//

REF/M/MSG/CMC/211717Z DEC 2004//

REF/N/MSG/CMC/201615Z SEP 2002//

NARR/REF A IS MARADMIN 479/04 DIRECTING ANTHRAX VACCINE IMMUNIZATION PROGRAM PAUSE.

REF B IS FDA DOCKET NO. 2005N-0040, AUTHORIZATION OF EMERGENCY USE OF ANTHRAX VACCINE ADSORBED FOR PREVENTION OF INHALATION ANTHRAX BY INDIVIDUALS AT HEIGHTENED RISK OF EXPOSURE DUE TO ATTACK WITH ANTHRAX; AVAILABILITY, 70 FED. REG. 5452 (2005).

REF C IS USD (P&R) MEMO IMPLEMENTATION OF RESUMPTION OF THE ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP) UNDER EMERGENCY USE AUTHORIZATION (EUA).

REF D IS DEPSECDEF MEMO DIRECTING EXPANSION OF FORCE HEALTH PROTECTION ANTHRAX AND SMALLPOX IMMUNIZATION PROGRAMS FOR DOD PERSONNEL.

REF E IS ASD (FM&P) MEMO NOTIFYING EMERGENCY-ESSENTIAL EMPLOYEES REGARDING ANTHRAX IMMUNIZATION REQUIREMENTS.

REF F IS DOD DIRECTIVE 6205.3, DOD IMMUNIZATION PROGRAM FOR BIOLOGICAL WARFARE DEFENSE.

REF G IS DOD DIRECTIVE 1404.10, EMERGENCY-ESSENTIAL (E-E) DOD U.S. CITIZEN CIVILIAN EMPLOYEES.

REF H IS DOD INSTRUCTION 3020.37, CONTINUATION OF ESSENTIAL DOD CONTRACTOR SERVICES DURING CRISIS.

REF I 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 J IS USD (P&R) POLICY ON ADMINISTRATIVE ISSUES RELATED TO THE AVIP.

REF K IS ASD (HA) POLICY ON CLINICAL ISSUES RELATED TO ANTHRAX VACCINATION.

REF L IS MARADMIN 212/04, TRANSMISSION OF SAMS IMMUNIZATION DATA TO DEERS.

REF M IS MARADMIN 559/04, REVISED ANTHRAX VACCINE IMMUNIZATION PROGRAM (AVIP) AND SMALLPOX VACCINATION PROGRAM (SVP) REPORTING REQUIREMENTS.

REF N IS MARADMIN 502/02, REINTRODUCTION OF THE ANTHRAX VACCINE.

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GENTEXT/REMARKS/-//

RMKS/1. THIS MARADMIN DISSEMINATES GUIDANCE REGARDING THE RESUMPTION OF THE ANTHRAX VACCINE IMUNIZATION PROGRAM (AVIP) UNDER THE EMERGENCY USE AUTHORIZATION (EUA) FOR DOD PERSONNEL.

2. BACKGROUND

A. ON 27 OCTOBER 04, REF A DIRECTED THE DOD MANDATED PAUSE OF THE AVIP FOLLOWING THE U.S. DISTRICT COURT FOR THE DISTRICT OF COLUMBIA'S ORDER PROHIBITING MANDATORY ANTHRAX VACCINATIONS. ON 10 DEC 04, THE DEPUTY SECRETARY OF DEFENSE DETERMINED THAT THERE IS A SIGNIFICANT POTENTIAL FOR A MILITARY EMERGENCY INVOLVING UNITED STATES MILITARY FORCES AND AN ATTACK WITH ANTHRAX. ON 27 JAN 05, THE FOOD AND DRUG ADMINISTRATION (FDA) ISSUED A SIX-MONTH EUA FOR PREVENTION OF INHALATION ANTHRAX (REF B) WHICH EXPIRES ON 27 JUL 05. THE DOCUMENT CAN BE FOUND AT WWW.FDA.GOV/CBER/VACCINE/ANTHRAXEUA.HTM. ON 6 APR 05, THE U.S. DISTRICT COURT MODIFIED ITS INJUNCTION AGAINST ANTHRAX VACCINATIONS.

B. ON 29 APR 05 (REF C), DOD DIRECTED THE RESUMPTION OF THE AVIP IN STRICT COMPLIANCE WITH THE EUA. AUTHORITY TO ADMINISTER ANTHRAX VACCINATIONS UNDER THE EUA AND THIS MESSAGE WILL EXPIRE ON 27 JUL 05, UNLESS EXPLICITLY EXTENDED.

3. CMC INTENT. IMPLEMENT THE DOD RESUMPTION OF THE AVIP UNDER THE EUA 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 COUNTERMEASURE.

4. EXECUTION

A. PER REFS B AND C, THE DOD WILL RESUME ANTHRAX VACCINATIONS FOR ITS PERSONNEL UNDER THE SPECIFIC CONDITIONS OF THE EUA. THOSE CONDITIONS INCLUDE NOTIFYING PERSONNEL DESIGNATED TO RECEIVE THE ANTHRAX VACCINATION THAT THEY MAY ACCEPT OR REFUSE VACCINATION. ALSO PERSONNEL REFUSING VACCINATION WILL NOT BE PUNISHED. NO DISCIPLINARY ACTION OR ADVERSE PERSONNEL ACTION WILL BE TAKEN. PERSONNEL WILL NOT BE PROCESSED FOR SEPARATION AND THERE WILL NOT BE A PENALTY OR LOSS OF ENTITLEMENT FOR REFUSING ANTHRAX VACCINATION UNDER EUA. PERSONNEL WHO REFUSE ANTHRAX VACCINATION REMAIN DEPLOYABLE. ONLY INDIVIDUALS BETWEEN 18 AND 65 YEARS OF AGE ARE AUTHORIZED TO RECEIVE ANTHRAX VACCINE UNDER THE EUA.

B. REGT/GROUP LEVEL COMMANDS AND HIGHER WILL APPOINT A MARINE OFFICER AS THE AVIP EUA COMPLIANCE OFFICER (AVIP ECO) FOR EACH UNIT THAT REQUIRES THE VACCINE. REGT/GROUP COMMANDING OFFICERS MAY DELEGATE THIS AUTHORITY TO THE BN/SQDN AS REQUIRED. EACH COMMAND WILL COMPLETE AN ASSURANCE OF COMPLIANCE AGREEMENT, DISTRIBUTED THRU COMMAND CHANNELS, AND SUBMIT THE APPOINTMENT LETTER TO THE MARFOR/MEF APPOINTED COORDINATOR. EACH AVIP ECO WILL BE GUIDED IN THEIR DUTIES BY THIS MARADMIN AND ALL APPLICABLE REFERENCES.

C. COMMANDERS SHALL RESUME VOLUNTARY ANTHRAX VACCINATIONS AFTER EDUCATING MEMBERS UNDER THE SPECIFIC EUA GUIDELINES. VACCINATIONS FOR PERSONNEL ON ORDERS TO THE BELOW LISTED LOCATIONS MAY BEGIN/RESUME THE AVIP UP TO 60 DAYS BEFORE DEPARTURE.

(1) PER REF C, MILITARY PERSONNEL SERVING IN U.S. CENTRAL COMMAND (USCENTCOM) AREA OF RESPONSIBILITY (AOR), ASHORE AND AFLOAT, FOR 15 OR MORE CONSECUTIVE DAYS; U.S. FORCES ASSIGNED TO THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS; DESIGNATED SPECIAL MISSION UNITS; DESIGNATED UNITS WITH HOMELAND DEFENSE MISSIONS; AND OTHER UNITS EXPLICITLY DESIGNATED BY THE USD (P&R). ACTIVATED USMCR 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. USMCR UNITS THAT DEPLOY DIRECTLY INTO A HIGH THREAT AOR ARE AUTHORIZED TO EXECUTE VACCINATIONS IAW INSTRUCTIONS PROVIDED IN THIS MARADMIN WHEN DIRECTED BY COMMARFORRES.

(2) EMERGENCY-ESSENTIAL PERSONNEL

(A) IAW REFS E-I, UNIT LEADERS WILL PROACTIVELY OFFER ANTHRAX VACCINATION TO EMERGENCY-ESSENTIAL AND EQUIVALENT DOD CIVILIAN EMPLOYEES SERVING IN USCENTCOM AOR OR IN THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS. 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." OTHER DOD CIVILIAN EMPLOYEES SERVING IN THESE AREAS FOR 15 OR MORE CONSECUTIVE DAYS MAY ALSO ACCEPT AND RECEIVE ANTHRAX VACCINATION.

(B) IF VACCINATION AND RELATED CARE ARE AUTHORIZED IN RELEVANT CONTRACTS, UNIT LEADERS WILL PROACTIVELY OFFER ANTHRAX VACCINATION TO MISSION-ESSENTIAL CONTRACTED WORKERS SERVING IN USCENTCOM AOR AND ON THE KOREAN PENINSULA FOR 15 OR MORE CONSECUTIVE DAYS. OTHER DOD-CONTRACTED WORKERS WHO ARE U.S. CITIZENS SERVING IN USCENTCOM AOR OR IN KOREA FOR 15 OR MORE CONSECUTIVE DAYS AND WHOSE CONTRACTS AUTHORIZE VACCINATION AND RELATED CARE, MAY ALSO ACCEPT AND RECEIVE ANTHRAX VACCINATION.

(3) ADULT FAMILY MEMBERS (18 TO 65 YEARS OLD) OF DOD MILITARY AND CIVILIAN PERSONNEL, AND U.S. CITIZEN ADULT FAMILY MEMBERS (18 TO 65 YEARS OLD) ACCOMPANYING U.S. CONTRACTOR PERSONNEL, IF PROVIDED FOR IN THE CONTRACT, WHO RESIDE IN USCENTCOM AOR OR IN KOREA ARE ELIGIBLE TO RECEIVE THE ANTHRAX VACCINATION.

D. EDUCATION FOR PEOPLE DESIGNATED FOR ANTHRAX VACCINATION

(1) COMMANDERS AT ALL LEVELS ARE RESPONSIBLE TO EDUCATE THEIR PERSONNEL BEFORE VACCINATION AND ENSURE THAT ALL MEMBERS ARE AWARE THAT ANTHRAX VACCINATION IS VOLUNTARY. THIS PROGRAM WILL INFORM POTENTIAL VACCINE RECIPIENTS THAT THE FDA HAS ISSUED THE EUA FOR PREVENTING INHALATION ANTHRAX, OF THE SIGNIFICANT KNOWN AND POTENTIAL BENEFITS AND RISKS OF THE EMERGENCY USE OF ANTHRAX VACCINE, AND THE EXTENT TO WHICH SUCH BENEFITS AND RISKS ARE UNKNOWN. IT WILL ALSO INFORM MEMBERS THAT NO OTHER PRODUCT IS APPROVED BY FDA TO PREVENT ANTHRAX BEFORE EXPOSURE AND THAT INDIVIDUALS HAVE THE OPTION TO ACCEPT OR REFUSE ANTHRAX VACCINATION, AND THE CONSEQUENCES OF REFUSING VACCINATION (E.G., VULNERABILITY TO LETHAL ANTHRAX INFECTION), AND OF ALTERNATIVES.

(2) ALL INDIVIDUALS ELIGIBLE FOR ANTHRAX VACCINATION UNDER THE EUA WILL BE VERBALLY PROVIDED INFORMATION IN ACCORDANCE WITH THE FOLLOWING SCRIPT: "THE FDA HAS AUTHORIZED THE EMERGENCY USE OF ANTHRAX VACCINE FOR PREVENTING INHALATION ANTHRAX. THERE ARE SIGNIFICANT KNOWN AND UNKNOWN BENEFITS AND RISKS OF THE EMERGENCY USE OF ANTHRAX VACCINE OUTLINED IN THE TRIFOLD BROCHURE. YOU HAVE THE OPTION TO ACCEPT OR REFUSE THE ANTHRAX VACCINE. YOU MAY REFUSE ANTHRAX VACCINATION UNDER THE EUA, AND YOU WILL NOT BE PUNISHED. NO DISCIPLINARY ACTION OR ADVERSE PERSONNEL ACTION WILL BE TAKEN. YOU WILL NOT BE PROCESSED FOR SEPARATION, AND YOU WILL STILL BE DEPLOYABLE. THERE WILL BE NO PENALTY OR LOSS OF ENTITLEMENT FOR REFUSING ANTHRAX VACCINATION." THESE PERSONNEL WILL ALSO BE INFORMED THAT: "YOUR MILITARY AND CIVILIAN LEADERS STRONGLY RECOMMEND ANTHRAX VACCINATION." INDIVIDUALS MAY NOT BE COERCED INTO ACCEPTING THE VACCINE.

(3) THE PRIMARY MODE OF PROVIDING THIS EDUCATION TO INDIVIDUALS WILL TAKE THE FORM OF THE AVIP TRIFOLD BROCHURE - EUA EDITION - DATED 5 APRIL 2005, OR LATER. EACH INDIVIDUAL WILL BE PROVIDED A COPY OF THIS TRIFOLD BROCHURE PRIOR TO ANTHRAX VACCINATION AND AFFORDED ADEQUATE TIME TO READ AND UNDERSTAND ITS CONTENTS. NO ANTHRAX VACCINATIONS MAY BE GIVEN UNLESS A VERSION OF THE TRIFOLD BROCHURE DATED ON OR AFTER 5 APRIL 2005 IS DISTRIBUTED BEFORE EACH DOSE. COLLECT ALL EARLIER VERSIONS OF THE TRIFOLD BROCHURE FROM CLINICS, WAITING ROOMS, OR ANY OTHER LOCATION, AND DISCARD THEM. YOUR LOCAL MEDICAL TREATMENT FACILITY WILL MAINTAIN A STOCK OF CURRENT EUA TRIFOLD BROCHURES FOR YOUR USE.

(4) COMMANDERS AND OTHER LEADERS WILL SUPPLEMENT THE TRIFOLD BROCHURE, WHENEVER POSSIBLE, WITH THE STANDARD BRIEFING SLIDES, AVAILABLE ELECTRONICALLY AT WWW.ANTHRAX.MIL/EUA. ADDITIONAL TRAINING RESOURCES ARE ALSO AVAILABLE AT THIS WEBSITE OR BY SENDING A REQUEST TO VACCINES@OTSG.AMEDD.ARMY.MIL.

(5) COMMANDERS SHOULD DEVELOP TEAMS OF LOCAL HEALTHCARE PROVIDERS AND OTHER SUBJECT MATTER EXPERTS (E.G., JUDGE ADVOCATE, PUBLIC AFFAIRS OFFICER) TO ASSIST WITH EUA IMPLEMENTATION. BE PROACTIVE AND ANSWER QUESTIONS UPFRONT.

(6) ANY TIME THE ANTHRAX VACCINATION IS ADMINISTERED, THE IMMUNIZATION SITE MUST HAVE AVAILABLE A COPY OF THE U.S. DISTRICT COURT'S 27 OCT 04 OPINION AND ORDER OF INJUNCTION FOR VACCINEES TO READ (AVAILABLE AT WWW.ANTHRAX.MIL/EUA).

(7) AFTER RECEIVING THE TRIFOLD BROCHURE AND THE BRIEFING, PERSONNEL WHO DECIDE TO ACCEPT THE VACCINATION WILL PROCEED TO BE IMMUNIZED. IF AN INDIVIDUAL EXPRESSES DOUBTS ABOUT THE VALUE OF ANTHRAX VACCINATION, THE COMMANDER WILL ARRANGE FOR ADDITIONAL EDUCATION ON THE CONSEQUENCES OF DECLINING VACCINATION (E.G., BEING MORE VULNERABLE TO A DEADLY INFECTION), THE BENEFITS AND RISKS OF VACCINATION, AND THE IMPORTANCE OF TEAMWORK TO MUTUAL SURVIVAL ON THE BATTLEFIELD. THIS EDUCATION SHOULD COVER THE FOLLOWING POINTS:

(A) ENSURE INDIVIDUAL RECEIVED THE TRIFOLD BROCHURE DATED 5 APR 05 OR LATER,

(B) ANTHRAX SPORES ARE DEADLY,

(C) YOU CAN INHALE ANTHRAX SPORES WITHOUT KNOWING IT,

(D) THE ANTHRAX VACCINE REDUCES THE RISK OF ANTHRAX INFECTION BY 92.5% BUT THE VACCINATION REQUIRES TIME TO DEVELOP IMMUNITY,

(E) YOU MAY REFUSE ANTHRAX VACCINATION AT THIS TIME AND NOT BE PUNISHED, AND

(F) REFUSING TO BE VACCINATED COULD RESULT IN YOUR DEATH IF INFECTED WITH ANTHRAX, WHICH ALSO CAN HAVE AN ADVERSE EFFECT ON YOUR UNIT'S ABILITY TO ACCOMPLISH ITS MISSION.

(8) LEADERS MAY STRONGLY RECOMMEND ANTHRAX VACCINATION TO OUR PERSONNEL AT RISK. VACCINATION PROTECTS INDIVIDUALS, UNITS, AND THEIR MILITARY MISSION.

(9) IF A PERSON WISHES TO EXERCISE THE OPTION TO REFUSE THE VACCINATION DURING THE EUA, COMMANDERS WILL RESPECT THAT INDIVIDUAL DECISION. LEADERS WILL NOT DISCIPLINE THE MARINE/SAILOR FOR THAT DECISION. COMMANDERS WILL ENSURE THE INDIVIDUAL IS NOT HARASSED OR COERCED TO RECEIVE VACCINATION. INFORM PERSONNEL WHO REFUSE THAT THEY WILL NOT BE OFFERED ANTHRAX VACCINATION AGAIN UNTIL A CHANGE OF CIRCUMSTANCES OCCURS (E.G., CHANGE OF DUTY, CHANGE OF LOCATION, PASSAGE OF 30+ DAYS) ALTHOUGH PERSONNEL MAY CHANGE THEIR DECISION AND REQUEST VACCINATION AT ANY TIME.

(10) IF A VACCINEE ACCEPTS AN ANTHRAX VACCINATION, HE OR SHE MAY ELECT NOT TO RECEIVE A SUBSEQUENT DOSE UNDER THE EUA CONDITIONS.

(11) FULFILLING THE TRIFOLD BROCHURE AND OPTION-TO-REFUSE SPECIFICATIONS OF THE EUA ARE ESSENTIAL COMMAND RESPONSIBILITIES. THE ECO WILL BE RESPONSIBLE FOR ENSURING THAT THESE REQUIREMENTS ARE MET. AS DIRECTED IN THE AUTHORIZATION TO RESUME THE AVIP UNDER THE EUA, THIS INFORMATION WILL BE A REPORTABLE ITEM TO THE MARFOR COORDINATOR WHO WILL PASS THIS TO HQMC (HS).

E. PROVIDING TRIFOLD BROCHURES. COMMANDERS WILL ENSURE THAT ALL ELIGIBLE PERSONNEL RECEIVE A COPY OF THE AVIP INFORMATIONAL TRIFOLD BROCHURE DATED 5 APR 05 OR LATER BEFORE EACH ANTHRAX VACCINATION DURING THE EUA. COMMANDERS WILL ENSURE THAT UNITS KEEP A DATED ROSTER OF PERSONNEL GIVEN AN EUA TRIFOLD BROCHURE. THIS ROSTER WILL BE CAPTIONED "I RECEIVED AN EUA TRIFOLD BROCHURE FOR ANTHRAX VACCINE" OR WORDS TO THAT EFFECT. THESE ROSTERS WILL BE RETAINED. TRIFOLD BROCHURES ARE INTENDED FOR PERSONAL ISSUE TO POTENTIAL VACCINE RECIPIENTS. DO NOT COLLECT SIGNATURES ON TRIFOLD BROCHURES.

F. MEDICAL EDUCATION. MEDICAL LEADERS WILL ENSURE THAT HEALTHCARE PROVIDERS AND VACCINATORS INVOLVED WITH THE AVIP UNDERSTAND THE CONTENTS OF THE EUA VERSION OF THE TRIFOLD BROCHURE, THE CONTENT OF THE EUA-AVIP BRIEFING SLIDES, AND THE VACCINE'S PACKAGE INSERT (SHIPPED WITH EACH VIAL). HEALTH CARE PROVIDERS WILL INFORM PERSONNEL ELIGIBLE FOR ANTHRAX VACCINATION THAT THE FDA HAS ISSUED THE EUA FOR PREVENTING INHALATION ANTHRAX; OF THE SIGNIFICANT KNOWN AND POTENTIAL BENEFITS AND RISKS OF THE EMERGENCY USE OF ANTHRAX VACCINATION (AS DESCRIBED IN TRIFOLD BROCHURE AND BRIEFING SLIDES); THAT NO OTHER PRODUCT IS APPROVED BY FDA TO PREVENT ANTHRAX BEFORE EXPOSURE; AND OF THE NON-VACCINE ALTERNATIVES THAT ARE AVAILABLE AND THEIR RISKS AND BENEFITS.

G. DOSING SCHEDULE

(1) PEOPLE RESUMING ANTHRAX VACCINATIONS UNDER THIS POLICY WILL CONTINUE THE DOSING SERIES WHERE THEIR SERIES WAS STOPPED. THEY WILL NOT NEED TO REPEAT ANY DOSES ALREADY RECEIVED IN THE SERIES OR RESTART THE SERIES. THIS IS CONSISTENT WITH GUIDANCE FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC), ITS ADVISORY

COMMITTEE ON IMMUNIZATION PRACTICES (ACIP), AND THE FDA. WHEN A DOSE CANNOT BE PROVIDED ON THE SPECIFIC DATE SUGGESTED BY THE SCHEDULE, PROVIDE IT AS SOON THEREAFTER AS PRACTICAL.

(2) DURING THE PERIOD OF THE EUA, THE POLICY OF CONTINUING THE VACCINE DOSING SERIES OF SIX SHOTS PLUS BOOSTERS FOR ALL PERSONNEL WHO BEGIN IT IS SUSPENDED FOR PERSONNEL WITHOUT A CONTINUING DUTY ASSIGNMENT ASSOCIATED WITH THE HEIGHTENED RISK OF EXPOSURE.

H. RESERVE COMPONENT (RC) PERSONNEL. 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. SUBMIT REPORTS TO THE VACCINE ADVERSE EVENTS REPORTING SYSTEM (VAERS). WHEN TREATMENT HAS BEEN RENDERED OR THE INDIVIDUAL'S EMERGENT CONDITION IS STABILIZED, A LINE OF DUTY-NOTICE OF ELIGIBILITY WILL BE DETERMINED 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, FORMERLY KNOWN AS RAMIS).

I. ANTHRAX VACCINATIONS PROVIDED IN OTHER VENUES. DOD PERSONNEL (E.G., EMBASSIES AND MISSIONS OF THE DEPARTMENT OF STATE) MAY BE PROVIDED VACCINATIONS IN OTHER VENUES, PROVIDED THAT THE REQUIREMENTS IN THIS MESSAGE AND REF B ARE FULFILLED. 5. ADMINISTRATION AND LOGISTICS. COMMANDERS WILL FOLLOW GUIDANCE PROVIDED IN REFS B-N 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. RECORDING IMMUNIZATIONS. ALL IMMUNIZATIONS WILL BE IMMEDIATELY ENTERED INTO THE MEMBER'S HEALTH RECORD, YELLOW SHOT CARD (PHS 731) AND AN APPROVED IMMUNIZATION TRACKING SYSTEM THAT TRANSMITS DATA TO DEERS. THE SHIPBOARD NON-TACTICAL AUTOMATED PROCESSING (SNAP) AUTOMATED MEDICAL SYSTEM (SAMS (REF L)) AND THE MRRS ARE 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 (SF 600). SF 600 ENTRIES SHALL STATE: "MEMBER REFUSED EUA ANTHRAX IMMUNIZATION." REFUSALS SHALL BE ENTERED INTO THE ELECTRONIC SYSTEM UNDER THE CODE "MD" FOR MEDICALLY DECLINED.

B. REPORTING REQUIREMENTS

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

(2) IMMEDIATE REPORTING REQTS. IN THE PAST, SOME INDIVIDUALS WERE MISTAKENLY ADMINISTERED THE ANTHRAX VACCINE INVOLUNTARILY AFTER THE INJUNCTION HALTING INVOLUNTARY VACCINATIONS WAS ISSUED. ANY FUTURE VIOLATIONS OF POLICY OF THIS TYPE OR VIOLATIONS IN WHICH THE INDIVIDUAL IS ADMINISTERED VACCINATION WITHOUT BEING GIVEN THE OPTION TO REFUSE MUST BE IMMEDIATELY REPORTED. MARFOR/MEF COORDINATORS WILL PROVIDE IMMEDIATE REPORTS TO HQMC TO INCLUDE:

(A) WHETHER OR NOT ANYONE RECEIVED ANTHRAX VACCINATION INVOLUNTARILY; AND

(B) FOR ANY CASE IN WHICH VACCINATIONS WERE GIVEN IN VIOLATION OF THE OPTION TO REFUSE, THE REPORT SHALL INCLUDE A FULL EXPLANATION OF THE CIRCUMSTANCES INVOLVED, INCLUDING THE NUMBER OF PERSONNEL. REPORTS WILL BE SUBMITTED DIRECTLY TO HQMC (HS) POC MCMILLANDL@HQMC.USMC.MIL WITH COPY TO HQMC (PPO) POC LEPEFJ@HQMC.USMC.MIL. NEGATIVE REPORTS REQUIRED ON A WEEKLY BASIS.

C. VACCINE DISTRIBUTION WILL CONTINUE IAW LOGISTICS GUIDANCE FOUND IN REF N. AVIP ECO WILL DETERMINE VACCINE REQUIREMENTS FOR THEIR UNITS AND SUBMIT A REQUEST TO THE MARFOR COORDINATOR. MARFOR COORDINATOR WILL COORDINATE WITH THE MEF COORDINATOR. EITHER THE MARFOR OR MEF COORDINATOR WILL BE ALLOWED TO REQUEST VACCINE FROM USAMMA'S WEBSITE FOR ELIGIBLE UNITS.

(1) EUA AVIP TRIFOLD BROCHURES WILL BE SHIPPED TO EACH REQUESTING UNIT PRIOR TO VACCINE SHIPMENT. NO VACCINE WILL BE SHIPPED UNTIL USAMMA RECEIVES CONFIRMATION THAT TRIFOLD BROCHURES HAVE BEEN RECEIVED. MARFOR/MEF COORDINATOR WILL CONFIRM WITH USAMMA THAT TRIFOLD BROCHURES HAVE BEEN RECEIVED.

(2) ALL SHIPMENTS OF ANTHRAX VACCINE CONTAIN A COPY OF THE PACKAGE INSERT AND THE U.S. DISTRICT COURT'S 27 OCT 2004 ORDER.

D. POCS FOR THIS MESSAGE ARE:

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(4) HQMC (I&L/LPCD); LCDR SCOTT M SPRATT AND/OR HMC (FMF/SW) JOE PALMARES, MEDICAL LOGISTICS (703) 695-8926 (DSN 225).

6. COMMAND AND SIGNAL. THIS MARADMIN IS EFFECTIVE IMMEDIATELY UPON RECEIPT, APPLIES TO THE MARINE CORPS TOTAL FORCES AND ITS EXPIRATION DATE IS 27 JUL 05.//