



DEPUTY SECRETARY OF DEFENSE  
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WASHINGTON, DC 20301-1010

JUN 28 2002

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS  
CHAIRMAN OF THE JOINT CHIEFS OF STAFF  
UNDER SECRETARIES OF DEFENSE  
ASSISTANT SECRETARIES OF DEFENSE  
GENERAL COUNSEL, DEPARTMENT OF DEFENSE  
INSPECTOR GENERAL, DEPARTMENT OF DEFENSE  
DIRECTORS OF DEFENSE AGENCIES  
COMMANDANT OF THE US COAST GUARD

SUBJECT: Reintroduction of the Anthrax Vaccine Immunization Program (AVIP)

Food and Drug Administration (FDA) approval of the manufacturer's renovated facility restores the availability of anthrax vaccine. FDA has determined that the current anthrax vaccine is safe and effective in protecting against all forms of anthrax infection, a scientific conclusion recently supported by the Institute of Medicine.

Current intelligence assessments indicate that the anthrax threat to Department of Defense (DoD) forces is real. The Department's goal is to protect all forces against anthrax as a part of the Department's Force Health Protection program. Steps are being taken by the Department to ensure protection of U.S. servicemembers and DoD personnel against the threat of anthrax and other potential bioweapon agents, including improved intelligence, detection, and surveillance capabilities, protective clothing and equipment, and new generation vaccines and other medical countermeasures.

At this time, the DoD will resume an Anthrax Vaccine Immunization Program (AVIP) consistent with FDA guidelines and the best practice of medicine, beginning with military personnel, and Emergency-Essential DoD civilians and contractors, at higher risk whose performance is essential for certain mission critical capabilities. Vaccination is mandatory for these personnel, except as provided under applicable medical and administrative exemption policies.

The scope of the AVIP shall encompass personnel assigned to or deployed for more than 15 days in higher threat areas whose performance is essential for certain mission critical capabilities. Near-term AVIP implementation may also include other personnel determined by the Assistant Secretary of Defense for Health Affairs, in consultation with the Chairman of the Joint Chiefs of Staff, to be at higher



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risk of exposure to anthrax as conditions change. Vaccinations shall begin, to the extent feasible, 45 days prior to deployment or arrival in higher threat areas.

For personnel who are covered under this new policy, who had previously begun the six shot series but had not completed it, resumption of their vaccination series will begin immediately. For personnel whose six shot series was interrupted, but who are not covered under the new policy, completion of their vaccination series will be deferred until further notice; resumption will begin when feasible, subject to availability of vaccine. Personnel currently being immunized—designated special mission units, manufacturing and DoD research personnel, and Congressionally mandated anthrax vaccine researchers—will continue with their scheduled vaccinations and annual booster shots.

The Under Secretary of Defense for Personnel and Readiness shall issue policy guidance on the medical and administrative aspects of the AVIP. Effective program implementation continues to be the responsibility of the Secretary of the Army as the Executive Agent for the AVIP and the designated senior military officers of the Services.

A handwritten signature in black ink, appearing to read "Paul Wolfowitz". The signature is written in a cursive, flowing style with a long horizontal line extending from the end.