



DEPARTMENT OF THE ARMY  
OFFICE OF THE DEPUTY CHIEF OF STAFF G-1  
300 ARMY PENTAGON  
WASHINGTON, DC 20310-0300

06 MAY 2010

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MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Post-Deployment Health Reassessment (PDHRA) Compliance

1. References:

a. Vice Chief of Staff of the Army (VCSA) Memorandum, Subject: Army Post-Deployment Health Reassessment (PDHRA), 18 June 2007.

b. Department of Defense Instruction (DoDI) 6490.03, Subject: Deployment Health, 11 August 2006.

2. With the stress of multiple deployments and the strain of Army-wide battle rhythms to ensure a fully trained and equipped force, we must leverage Soldier assessment tools that enable commanders to target those Soldiers that are emotionally and physically affected by this environment, and that help to improve the overall well-being of the force.

3. One critical tool is the PDHRA program. This commander's program starts with a Soldier self-assessment using the DD Form 2900 and a one-on-one (CONFIDENTIAL) session with a health care provider during the period of 90 to 180 days after redeployment. When executed correctly, the PDHRA program not only drives early identification, it prioritizes the treatment of potentially serious conditions, and helps with the early identification of non-deployables.

4. Although our aggregate Soldier compliance rate is consistently above 90%, the Department of Defense (DoD) is now looking more critically at true compliance within 90 to 180 days from actual redeployment. Recently published DoD data reflected that only two-thirds of our Soldiers are taking the PDHRA within the required 90- to 180-day window. The timing of this important screening is crucial. Studies confirm that a critical assessment during this time period, more frequently identified potentially serious conditions that were not discovered during the initial stages of redeployment. Moreover, a review of 2009 DoD referral data showed that one-third of those Soldiers outside the window have a potentially non-deployable condition that will affect their overall well-being and unit readiness.

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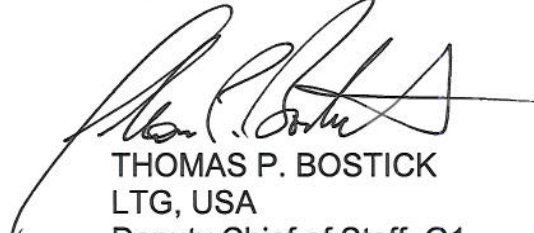
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5. There is an understanding that timing and uncontrollable circumstances prevent full compliance within the 90- to 180-day period, however, systems must be established within each command that seek maximum participation during this critical period. In addition, we must ensure that the leadership is doing their part by participating, setting the example, and encouraging junior Soldiers to do so as well. A recent study on the PDHRA program execution confirmed that when commanders and leaders openly support the program the rate of participation and overall success dramatically improves.

6. The collaborative and combined effort of the personnel and medical communities are the key to successful program execution. Personnel and medical leaders at the primary staff and installation level must work together to ensure that the necessary actions and opportunities are provided at all levels to support the intent of full Soldier compliance within 90-180 days from redeployment.

7. The DCS, G-1 stands ready to assist in this effort. My point of contact is LTC Sophia Tillman-Ortiz at (703) 696-9005, (703) 696-9170, or [Sophia.TillmanOrtiz@conus.army.mil](mailto:Sophia.TillmanOrtiz@conus.army.mil).

8. Thank you for your support of this extremely important program.



THOMAS P. BOSTICK  
LTG, USA  
Deputy Chief of Staff, G1

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