UNCLASSIFIED//
THIS MESSAGE HAS BEEN SENT BY THE PENTAGON TELECOMMUNICATIONS CENTER ON BEHALF OF DA WASHINGTON DC//DAPE-MPE//

SUBJECT: IMMEDIATE IMPLEMENTATION OF POLICY CHANGES COVERING SOLDIER DEPLOYABILITY AND READINESS

1. PURPOSE. TO ANNOUNCE IMMEDIATE POLICY CHANGES AFFECTING SOLDIER DEPLOYABILITY AND READINESS.

2. THE SECRETARY OF THE ARMY APPROVED A FINAL REPORT CONTAINING DEPARTMENT OF THE ARMY INSPECTOR GENERAL (DAIG) RECOMMENDATIONS AIMED AT IMPROVING THE OVERALL MEDICAL DEPLOYABILITY PROCESS. APPROPRIATE ARMY AGENCIES MUST COMPLY WITH THESE RECOMMENDATIONS AND IMPLEMENT THEM UPON NOTIFICATION.

3. SOME OF THE DAIG'S OBSERVATIONS REQUIRE IMMEDIATE CHANGES TO REGULATORY GUIDANCE IN ORDER TO PROVIDE COMMANDERS A CLEARER UNDERSTANDING OF THE MEDICAL DEPLOYABILITY PROCESS. WHILE REGULATIONS WILL BE REVISED AND PUBLISHED AT A LATER DATE, IT IS IMPERATIVE THE FIELD IS MADE AWARE OF THE FOLLOWING POLICY CHANGES TO PRECLUDE FURTHER CONFUSION OVER SOLDIER DEPLOYABILITY.

4. THE FOLLOWING CHANGES TO SOLDIER DEPLOYABILITY AND READINESS ARE EFFECTIVE IMMEDIATELY:

A. MEDICAL GUIDANCE IS CRITICAL IN ADVISING COMMANDERS OF POTENTIAL PROBLEMS, PHYSICAL LIMITATIONS AND POTENTIAL SITUATIONS THAT COULD BE HARMFUL TO THE SOLDIER OR DETRIMENTAL TO THE MISSION. MEDICAL DETERMINATIONS AND RECOMMENDATIONS TO COMMANDERS ARE PROVIDED IN THE FORM OF PHYSICAL PROFILES DOCUMENTED ON DA FORM 3349, PHYSICAL PROFILE, AFTER EVALUATION BY A HEALTH CARE PROVIDER (HCP). SOME SOLDIERS, BECAUSE OF CERTAIN MEDICAL CONDITIONS, MAY REQUIRE ADMINISTRATIVE CONSIDERATION WHEN ASSIGNED TO COMBAT AREAS OR CERTAIN GEOGRAPHIC AREAS.

B. DETERMINATION OF A SOLDIER'S ASSIGNMENT OR DUTIES, HOWEVER, IS THE COMMANDER'S RESPONSIBILITY. AS SUCH, IT IS A COMMANDER'S RESPONSIBILITY TO COUNSEL SOLDIERS ON THOSE DUTIES THEY MAY OR MAY NOT PERFORM WHILE DEPLOYED TO COMBAT AREAS OR CERTAIN GEOGRAPHIC AREAS. THE COUNSELED SOLDIERS WILL BE ADVISED THAT THEY WILL NOT VIOLATE THEIR PROFILES AND WILL PERFORM DUTIES ASSIGNED BY THE COMMANDER WHICH THEY CAN PERFORM WITHOUT UNDUE RISK TO HEALTH AND SAFETY.

C. THE FINAL DECISION TO DEPLOY A SOLDIER WITH CERTAIN MEDICAL CONDITIONS IS A COMMANDER'S DECISION, BASED ON THE HEALTH CARE PROVIDER'S (HCP) RECOMMENDATIONS AND TAKING INTO ACCOUNT THE GEOGRAPHICAL AND ENVIRONMENTAL CONDITIONS THE SOLDIER WILL BE SUBJECT TO AND THE MISSION REQUIREMENTS THE SOLDIER WILL BE ASSIGNED. A SOLDIER WITH A TEMPORARY PROFILE MAY DEPLOY AFTER THE TEMPORARY DISQUALIFICATION EXPIRES OR WHEN THE COMMANDER AND THE HCP AGREE THE SOLDIER IS DEPLOYABLE.

D. WHEN HCP'S AND UNIT COMMANDERS DISAGREE ON THE DEPLOYABILITY STATUS OF A SOLDIER, THE DECISION WILL BE RAISED TO THE FIRST GENERAL OFFICER IN THE SOLDIER'S CHAIN OF COMMAND, WHO WILL REVIEW THE CASE AND MAKE THE FINAL DECISION. FOR SOLDIERS WITH ANY OF THE CONDITIONS LISTED IN CURRENT DEPARTMENT OF DEFENSE GUIDANCE AND/OR THE COMBATANT COMMAND'S (COCOM) PUBLISHED MEDICAL SCREENING

CRITERIA, THE GENERAL OFFICER RECOMMENDING DEPLOYMENT MUST SUBMIT A WAIVER REQUEST THROUGH THE COCOM SURGEON TO THE COMBATANT COMMANDER FOR APPROVAL.

E. IF THE SOLDIER HAS A TEMPORARY PROFILE, IT SHOULD BE DETERMINED THAT THE PROFILE IS IN COMPLIANCE WITH THE TIME LIMITATIONS (INCLUDING EXTENSIONS) OF AR 40-501. SOLDIERS WITH A PERMANENT PROFILE DESIGNATOR OF 3 OR 4 MAY NOT DEPLOY WITHOUT A RECORD OF RETENTION BY A MOS/MEDICAL RETENTION BOARD (MMRB) OR A PHYSICAL EVALUATION BOARD (PEB) UNLESS THE MMRB CONVENING AUTHORITY WAIVES THIS REQUIREMENT. IN ALL CASES, THE ROLE OF THE COMMANDER IS TO ENSURE SOLDIERS DO NOT VIOLATE THEIR PROFILES AND ARE ASSIGNED DUTIES WHICH THEY CAN PERFORM WITHOUT UNDUE RISK TO HEALTH AND SAFETY.

F. THE SOLDIER READINESS PROGRAM (SRP) REQUIRES COMMANDERS TO MAXIMIZE SOLDIER READINESS BY IDENTIFYING AND CORRECTING NON-DEPLOYABLE CONDITIONS. PERSONNEL PROCESSING REQUIREMENTS INCLUDE CHECKING THE STATUS OF INDIVIDUAL SOLDIER READINESS DURING IN-PROCESSING, AT LEAST ONCE ANNUALLY, DURING OUT-PROCESSING, AND WITHIN 60 DAYS OF AN ACTUAL DEPLOYMENT DATE FOR ACTIVE COMPONENT SOLDIERS. FOR RESERVE COMPONENT SOLDIERS, MEDCOM AND DENTCOM WILL CONTINUE TO REQUIRE A FACE TO FACE ENCOUNTER DURING M-30 TO ACCOUNT FOR LAST MINUTE MEDICAL AND DENTAL UPDATES.

G. IT IS THE COMMANDER'S RESPONSIBILITY TO ENSURE THE READINESS OF THEIR SOLDIERS. FIRST-LINE LEADERS, COMMANDERS AND SUPPORTING HR SPECIALISTS MUST CONTINUOUSLY MONITOR THE READINESS OF THEIR SOLDIERS AND ADDRESS ISSUES AS THEY ARISE. ALL SOLDIER READINESS ISSUES SHOULD BE IDENTIFIED BY THE UNIT AND REPORTED TO THE INSTALLATION AND ARMY HUMAN RESOURCES COMMAND (AHRC) WELL IN ADVANCE OF FORMAL SRP CHECKS IN ORDER TO MINIMIZE THE NUMBER OF NON-DEPLOYABLE SOLDIERS. COMPLETING THE FORMAL PRE-DEPLOYMENT SRP 60 DAYS PRIOR TO DEPLOYMENT IS IMPERATIVE TO ALLOW TIME FOR CORRECTIVE ACTION FOR ACTIVE COMPONENT SOLDIERS, WHILE THE RESERVE COMPONENT WILL CONTINUE TO HAVE, AT A MINIMUM, AN SRP AT 30 DAYS PRIOR TO MOBILIZATION. .

5. THE PROPONENTS OF AR 600-20 AND AR 600-8-101 WILL IMPLEMENT THESE POLICY CHANGES AS SOON AS POSSIBLE VIA A RAPID ACTION REVISION.

6. COMMANDERS ARE REMINDED TO CONTINUALLY REFERENCE THE DEPARTMENT OF THE ARMY'S PERSONNEL POLICY GUIDANCE (PPG) AT HTTP://WWW.ARMYG1.ARMY.MIL, THE ARMY'S SINGLE AND MOST COMPREHENSIVE SOURCE FOR ALL UPDATED MEDICAL DEPLOYMENT AND READINESS GUIDANCE.

7. POC IS HQDA, DCS- G1, DAPE-MPE-DR AT (703) 695-7918.

8. EXPIRATION DATE CANNOT BE DETERMINED