



DEPARTMENT OF THE ARMY
UNITED STATES ARMY INTELLIGENCE AND SECURITY COMMAND
501ST MILITARY INTELLIGENCE BRIGADE
UNIT 15282
APO AP 96205-5282

IADK-Z

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Brigade Policy Letter #21 – Individual/Unit Medical Readiness Program

1. References:

- a. AR 220-1 (Army Unit Status Reporting and Force Registration – Consolidated Policies) 15 April 2010.
- b. AR 40-501 (Standards of Medical Fitness) 14 December 2007.
- c. USFK Regulation 40-7 (Individual Medical Readiness) 12 May 2008.

2. Purpose: To ensure the individual and unit medical readiness of the 501st Military Intelligence Brigade.

3. Summary. Unit Commanders will implement an unit medical readiness (UMR) and individual medical readiness (IMR) program including the six IMR elements listed below with a goal of achieving 90% or more Fully Medially Ready.

4. Specifics.

a. Periodic Health Assessment: An annual PHA is required for all Soldiers to monitor their health status and provide timely preventive healthcare, counseling, treatment, or testing as appropriate. A PHA should be performed within 30 days of the due date.

b. Dental Readiness: All soldiers will have an annual examination. Soldiers are required to maintain a Dental Readiness Category 1 or 2 status with no major dental work required and have a panoramic dental x-ray on file. A dental examine should be performed within 30 days of the due date.

c. Medical Readiness Laboratory Studies: The basic laboratory studies required for all Soldiers are blood type and Rh factor (one time requirement), G6PD status (one time requirement), DNA specimen (one time requirement), and HIV antibody (repeated every two years).

d. Immunization Status: All Soldiers will maintain the following current immunizations IOT be medically ready (or must have appropriate medical/

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administrative exemptions documented in their medical record: Inactivated Polio Vaccine (IPV); Diphtheria, Tetanus, and Pertussis (DTaP); Measles, Mumps, and Rubella (MMR); Hepatitis A and B (complete series); Typhoid; Anthrax (shot current in accordance to dosing series); Smallpox; annual Influenza; and Purified Protein Derivative (PPD) Tuberculosis skin test. All immunizations should be performed within timely manner to ensure Soldiers do not miss suspense of follow up treatment.

e. Individual Medical Equipment: Soldiers who require corrective lenses will possess gas mask inserts for the model of gas mask and/or ballistic eyewear issued.

f. Deployment Readiness: To be considered as fully medically ready, Soldiers will be free of any deployment limiting conditions.

g. MEDPROS Access: Each unit commander will ensure that there is an Officer/NCO identified and on orders with access to MEDPROS.

h. Emergency Essential Civilians (EEC): IAW AR 220-1, each unit commander will identify their Emergency Essential Civilians and will ensure they are receiving required Immunizations. If EEC personnel refuse required immunizations, this should be documented and Brigade Civilian Personnel Liaison should be contacted for further guidance.

5. The point of contact for this policy letter is the Brigade Human Resources Officer (S1) at DSN 315-723-7084.



KRIS A. ARNOLD
COL, MI
Commanding

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