



PERSONNEL AND  
READINESS

UNDER SECRETARY OF DEFENSE  
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DEC 6 2006



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

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

- References:
- (a) Deputy Secretary of Defense Memorandum, "Anthrax Vaccine Immunization Program (AVIP)," October 12, 2006
  - (b) Under Secretary of Defense for Personnel and Readiness Memorandum, "Administrative and Clinical Execution Guidance for Reintroduction of the Anthrax Vaccine Immunization Program (AVIP)," August 6, 2002
  - (c) Under Secretary of Defense for Personnel and Readiness Memorandum, "Policy on Administrative Issues Related to the Anthrax Vaccination Program," August 6, 2002
  - (d) Assistant Secretary of Defense for Health Affairs Memorandum, "Policy on Clinical Issues Related to Anthrax Vaccination," August 6, 2002
  - (e) Deputy Secretary of Defense Memorandum, "Reintroduction of the Anthrax Vaccine Immunization Program (AVIP)," June 28, 2002
  - (f) Deputy Secretary of Defense Memorandum, "Expansion of Force Health Protection Anthrax and Smallpox Immunization Programs for DoD Personnel," June 28, 2004
  - (g) Under Secretary of Defense for Personnel and Readiness Memorandum, "Expansion of Force Health Protection Anthrax and Smallpox Immunization Programs for Emergency-Essential and Equivalent Department of Defense Civilian Personnel," September 22, 2004
  - (h) Army Regulation 40-562/ BUMEDINST 6230.15A/AFJI 48-110 CG COMDTINST M6230.4F, "Immunizations and Chemoprophylaxis," September 29, 2006
  - (i) Assistant Secretary of Defense for Health Affairs Memorandum, "Request for Exception to Policy for Smallpox and Anthrax Vaccinations for Selected NORTHCOM Forces," March 3, 2003



- (j) Assistant Secretary of Defense for Health Affairs Memorandum, "Exception to Policy for Anthrax Vaccinations for Select Airborne Warning and Control System Personnel," May 24, 2004
- (k) Assistant Secretary of Defense for Health Affairs Memorandum, "Exception to Policy for Anthrax Vaccinations for Select Airborne Warning and Control System Personnel," December 1, 2003
- (l) Assistant Secretary of Defense for Health Affairs Memorandum, "Exception to Policy for Priority Group II Anthrax Vaccinations for Selected United States Air Forces in Europe (USAFE) Personnel," September 4, 2003
- (m) Assistant Secretary of Defense for Health Affairs Memorandum, "Exception to Policy for Anthrax Vaccination for Selected AMC Personnel," March 10, 2003
- (n) Under Secretary of Defense for Personnel and Readiness Memorandum, "Exception to Policy of Anthrax Vaccination of Forward Deployed Forces (FDNF) and III Marine Expeditionary Force (MEF) in the Resumption of Anthrax Vaccination Program (AVIP) under the Emergency Use Authorization (EUA)," August 17, 2005

Reference (a) directs the Military Services to amend their anthrax immunization plans to resume the AVIP and directs the Under Secretary of Defense for Personnel and Readiness (USD (P&R)) to issue these detailed instructions to implement that resumption.

#### 1. Applicability and Scope.

The following personnel will resume **mandatory** anthrax immunizations, except as provided under applicable medical and administrative exemption policies.

1.1. Uniformed personnel, to include those assigned to U.S. Embassies, forces afloat, and civilian and contract Mariners under Commander, Military Sealift Command, serving in the Central Command area of responsibility for 15 or more consecutive days.

1.2. Uniformed personnel assigned to the Korean Peninsula for 15 or more consecutive days.

1.3. Upon notification by the Secretary of the Army as the Executive Agent that appropriate consultation procedures have been completed, and contingent upon compliance with any other necessary personnel procedures, emergency-essential and equivalent DoD civilian employees assigned for 15 or more consecutive days to the U.S. Central Command or to the Korean Peninsula. For this purpose, "equivalent" personnel means other personnel whose duties meet the requirements of 10 U.S.C. § 1580, but who have not been designated as "emergency-essential."

1.4. DoD contractor personnel carrying out mission-essential services and assigned for 15 or more consecutive days to the U.S. Central Command area of responsibility or Korea. Contracts must specify immunization as a requirement. Immunization will be provided through the Military Health System.

1.5. All previously approved special groups listed in references i thru n or other personnel designated by the ASD(HA), upon the recommendation of the Chairman of the Joint Chiefs of Staff, the Secretary of a Military Department or the Commandant of the Coast Guard, based on critical mission assignments.

## 2. Personnel Eligible for Voluntary Vaccinations.

2.1. Individuals eligible for voluntary vaccinations (subject to medical exemptions) based on current location or status. The following individuals are eligible for voluntary vaccinations.

2.1.1. U.S. Government civilian employees and U.S. citizen contractor personnel other than those referred to in paragraphs 1.3 and 1.4., assigned for 15 or more consecutive days to the U.S. Central Command area of responsibility and Korea.

2.1.2. Adult family members, 18-65 years of age, accompanying DoD military and civilian personnel for 15 or more consecutive days to the US. Central Command area of responsibility or Korea.

2.1.3. U.S. citizen adult family members, 18-65 years of age, accompanying U.S. contractor personnel for 15 or more consecutive days to the U.S. Central Command area of responsibility or Korea.

2.1.4. Vaccine manufacturing and research personnel and others, as designated by the ASD (HA). ASD (HA) will approve their requests on a case-by-case basis.

2.2. Individuals not subject to mandatory vaccination who wish to continue vaccine dosing series. The following individuals who received at least one dose of anthrax vaccine and who are not subject to mandatory vaccination shall (subject to medical exemptions) be offered additional vaccine doses, consistent with the FDA-approved dosing schedule, on a voluntary basis. Vaccines will be available at designated DoD registered clinics.

2.2.1. Members of the Uniformed Services on active duty or in the Selected Reserve, regardless of current duty assignment, if they previously received at least one

dose of anthrax vaccine and if they are not currently subject to mandatory vaccination. For these individuals, continuing the dosing series is recommended but not required.

2.2.2. U.S. Government civilian employes of DoD, regardless of current duty assignment, if they previously received at least one dose of anthrax vaccine and if they are not currently subject to mandatory vaccination.

### 3. Administration of dosing schedule.

3.1. It is DoD policy to use the anthrax vaccine consistent with the FDA-approved dosing schedule. This schedule recommends doses at 0, 2, and 4 weeks, and at 6, 12, and 18 months, and with annual boosters.

3.2. All individuals who begin the anthrax vaccine dosing series shall be informed of the recommended dosing schedule and advised to return to the vaccination clinic at the appropriate times under the schedule, as long as they remain eligible for AVIP. This information and advice is independent of whether the future doses are mandatory or voluntary for that individual.

3.3. In cases in which vaccine doses were deferred, whether due to vaccine shortage, program interruption or other reasons, consistent with prevailing medical practice, individuals are not required or advised to restart the vaccine series, but will resume where the individual left off and then continue the vaccine series at the appropriate shot intervals. This prevailing medical practice is implicit in the FDA-approved dosing schedule.

### 4. Record-Keeping.

Each Military Service is responsible for implementing a comprehensive immunization tracking system that incorporates member data, unit data, date of immunization, and vaccine lot information, which feeds electronically into the Defense Enrollment Eligibility Reporting System. Each Military Service shall monitor documentation of immunization data. The information must be recorded in each service member's medical record.

### 5. Other Requirements and Provisions.

5.1. Personnel on orders to the U.S. Central Command area of responsibility or Korea may begin immunizations up to 60 days before deployment or arrival. Every effort should be made to provide at least three doses prior to deployment.

5.2. Previously established medical (Ref (d)) and administrative (Ref (c)) exemptions and clinical policies (Ref. (b)) remain in effect, including policies relating to vaccine-

associated adverse events. The Assistant Secretary of Defense (Health Affairs) may revise or supplement clinical policies.

5.3. Previously established policies (Ref. (b)) applicable to immunization of Reserve Component personnel, when covered under section 1, above, remain in effect.

5.4. Previously established management responsibilities remain in effect. The Secretary of the Army shall continue to function as Executive Agent, managing and administering the overall program and acting as focal point for the submission of information from the Services and projected vaccine program requirements. The Executive Agent shall issue operational instructions to the Services and coordinate and monitor Service implementation of the program. The Military Vaccine Agency is recognized as the operational activity of the Executive Agent.

5.5. The senior military officials from the Military Services previously assigned to direct and implement their respective anthrax vaccine implementation plans shall continue in this role. As such, they will implement, monitor, evaluate and document the AVIP in their respective Services.

## 6. Implementation Plans.

6.1. Implementation under this memorandum will follow the Assistant Secretary of Defense for Health Affairs approval of Military Service implementation plans. Implementation plans should be submitted within 45 days.

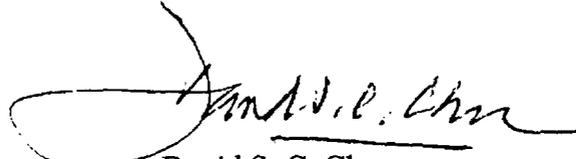
6.2. Education and information programs for commanders, healthcare providers and authorized dispensers (i.e., vaccinators) conducting vaccinations remains a critical element of this program. Services will implement programs to ensure these providers understand the different personnel categories (e.g. mandatory and voluntary) and maximize efforts to avoid medication errors in administering the vaccinations. Education and information materials are available electronically through the Military Vaccine Agency at [ww.anthrax.mil](http://ww.anthrax.mil).

6.3. The Executive Agent will continue to maintain verification and reporting requirements to ensure compliance with this policy. This will include, until suspended by the Assistant Secretary of Defense (Health Affairs), the requirement for registry and monthly reporting by clinical sites administering the anthrax vaccine.

6.3.1. Organizations with approved compliance agreements will not be required to submit a new registry agreement.

6.3.2. Organizations with compliance or registry agreements will continue to provide reports to the Executive Agent by the fifth of the month for activities of the previous month.

The AVIP remains a critically important component of the Force Health Protection program for the Armed Forces.



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