**TRADOC Pamphlet 220-1** 

Department of the Army Headquarters, United States Army Training and Doctrine Command Fort Eustis, Virginia 23604-5700

5 January 2015

**Field Organizations** 

#### USING THE MEDICAL OPERATIONAL DATA SYSTEM (MODS)

FOR THE COMMANDER:

OFFICIAL:

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**History.** This publication is a new U.S. Army Training and Doctrine Command (TRADOC) pamphlet.

**Summary.** This pamphlet contains instructions for monitoring and maintaining elements of Soldier medical readiness, in order to improve Soldiers' medical availability status.

**Applicability.** This pamphlet applies to all TRADOC organizations to which Soldiers are assigned.

**Proponent and exception authority.** The proponent of this pamphlet is the TRADOC Surgeon. The proponent has the authority to approve exceptions or waivers to this pamphlet that are consistent with controlling laws and regulations. Activities may request a waiver to this pamphlet by providing justification that includes a full analysis of the issue and a formal review by the TRADOC Staff Judge Advocate (SJA). All waiver requests will be endorsed by the senior leader of the requesting activity and forwarded to the policy proponent.

**Army Management Control Process.** This pamphlet does not contain management control provisions.

\*This pamphlet supersedes enclosures 1 and 2 to memorandum, HQ TRADOC, ATBO–M, subject: Monitoring and Maintaining Soldier Medical Deployability, dated 21 November 2011.

**Supplementation.** Supplementation of this pamphlet and establishment of command and local forms is prohibited without prior approval from Commander, TRADOC Surgeon, 950 Jefferson Ave, Fort Eustis, VA 23604-5754 or usarmy.jble.tradoc.mbx.hq-tradoc-g-1-4-surgeons.

**Suggested improvements.** Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to Commander, TRADOC Surgeon, 950 Jefferson Ave, Fort Eustis, VA 23604-5754 or usarmy.jble.tradoc.mbx.hq-tradoc-g-1-4-surgeons.

**Distribution.** This publication is available in electronic media only and is published on the TRADOC Homepage at <u>http://www.tradoc.army.mil/tpubs/index.htm</u>.

#### **Summary of Change**

TRADOC Pamphlet 220-1 Using the Medical Operational Data System (MODS)

This new publication, dated 5 January 2015 -

o Provides guidance on reducing/maintaining the percentage of indeterminate medical readiness status at less than 5 percent of assigned strength (para 2-2a).

o Provides guidance on maintaining medical appointment no-show rate at less than 5 percent (para 2-2b).

o Provides guidance for appointment of dedicated Medical Protection System unit administrators, unit managers, and commander clerks (para 2-2c).

o Provides guidance on utilizing Medical Protection System to facilitate input of medical readiness status and to view profiles in the e-Profile system (para 2-2e).

o Provides special considerations for Initial Military Training units and geographically-remote units (chapters 4 and 5).

o Provides instructions for accessing and navigating Medical Operational Data System; periodic health assessments; and Post-Deployment Health Reassessments (appendixes B and C).

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#### Chapter 1 Introduction

#### 1-1. Purpose

This pamphlet supports Army and TRADOC policy on monitoring and maintaining medical aspects of Soldier deployability. It provides instructions that will help commanders and directors manage their medical readiness status and improve the process of unit status reporting.

#### 1-2. References

Required and related publications and prescribed and referenced forms are listed in appendix A.

#### 1-3. Explanation of abbreviations and terms

Abbreviations and special terms used in this pamphlet are explained in the glossary.

#### 1-4. Scope

a. This pamphlet contains instructions for monitoring and maintaining elements of Soldier medical readiness, in order to improve Soldiers' medical readiness status. It supports the Army's and TRADOC's intent for commanders to maintain awareness of their Soldiers' medical readiness status, and take actions to ensure that Soldiers follow up on medical readiness issues in a timely manner. It provides special considerations for Initial Military Training (IMT) units and geographically-remote units.

b. The appendixes contain instructions for accessing MODS; obtaining individual medical readiness and Post-Deployment Health Reassessment reports; and obtaining individual Soldiers' electronic profiles (e-Profiles).

# Chapter 2 Applicability, goals, and approach

# 2-1. Applicability

a. Non-deployable report. This pamphlet supports the requirement for all subordinate units, including HQ TRADOC, to submit a monthly non-deployable report in conjunction with the Commander's Unit Status Reporting (CUSR) facer slides IAW TRADOC TASKORD IN120091. This report allows subordinate organization and center of excellence G-1s and medical staff personnel to assist commanders with identifying and reducing the number of non-deployable military personnel within their units. This also provides commanders and staff elements a standard document to reference when briefing unit non-deployable percentages during the CUSR.

b. Medical readiness status. Medical readiness involves having current physical and dental examinations, and no limitations on duty performance. The medical non-deployable status includes Soldiers with both temporary and permanent profiles and whose status is unknown. The

Army's goal for medical non-deployable status is 4 percent or less. The Armywide challenge to reverse or reduce the trend is reflected in the incorporation of availability status as a measure of readiness in unit status reports (USR), and a tenet of the Army's Ready and Resilient Campaign Plan. The challenge is directed both to the medical community and to organizational leaders.

#### 2-2. Goals

The Army's and TRADOC's goals for medical readiness are as follows:

a. Reduce or maintain the percentage of indeterminate medical readiness status at less than 5 percent of assigned strength.

b. Maintain medical appointment no-show rate at less than 5 percent.

c. Ensure appointment of dedicated Medical Protection System (MEDPROS) unit administrators (at brigade and above), unit managers (at battalion and below), and commander clerks (at all levels).

d. Provide for Career Counselors to obtain access to the electronic profile (e-Profile) system and follow instructions pertaining to their roles in the MOS Administrative Retention Review (MAR2) process. See appendix C, especially para C-3h, for instructions.

e. Utilize MODS to facilitate input of medical readiness status and to view profiles in the e-Profile system.

#### 2-3. Approach

a. Maintain close working relationships with medical counterparts at all levels to ensure affected Soldiers are on track with their treatment plans, namely that they're making timely follow-on visits and keeping their appointments. Army organizations that have succeeded in reducing their numbers of non-deployable Soldiers attribute their success to collaborative communication among commanders, health care providers (HCP), and MODS subject matter experts.

b. Make effective use of tools that are designed for commanders to monitor their Soldiers' medical readiness status, namely:

(1) The MEDPROS and the electronic profile (e-Profile) applications within MODS. Commanders must put emphasis on the accuracy and timeliness of their units' data in the MEDPROS and e-Profile databases, especially pre- and post-deployment health assessments, and post-deployment health reassessments.

(2) Use of Text Messaging and E-Mail Appointment Reminder (TMEAR) system by the medical treatment facility (MTF) to ensure Soldiers show for their appointments on time. One MTF supporting a TRADOC organization showed a 30% reduction in appointment no-shows over a one-year period, attributed to TMEAR.

Note: The above regarding TMEAR is provided as situational awareness for commanders; the system is not under TRADOC's control.

#### Chapter 3 Overview of Medical Operational Data System (MODS)

The MODS is the authoritative database for the medical readiness information of Army personnel. It contains MEDPROS and the electronic profiling system (e-Profile).

#### 3-1. Medical Protection System (MEDPROS)

MEDPROS is the Web module to MODS and is the primary tool to record, track, and report the medical readiness for Soldiers and units. It contains:

a. Medical readiness data (all medical and dental readiness requirements in accordance with AR 600-8-101, DA Form 7425 (Readiness and Deployment Checklist), and AR 40-501, including the periodic health assessment; deployment-limiting medical conditions; dental readiness; immunizations; deoxyribonucleic acid (DNA) specimen on file; current human immunodeficiency virus (HIV) test; hearing readiness; and vision readiness, among other data elements). The net centric unit status report (NetUSR) imports the medical readiness codes for individual Soldiers from MODS.

b. Post-Deployment Health Reassessment (PDHRA). The PDHRA is the third in a series of three health assessments associated with deployment. It follows the pre-deployment and post-deployment health assessments (PDHA)), and is conducted 90 to 180 days after redeployment. The PDHRA program is established by the DOD to identify and address physical and behavioral issues that evolve after the PDHA; some behavioral health issues are significantly more prevalent in the PDHRA than the PDHA.

Note: See appendix B for instructions on accessing and reading MEDPROS.

#### **3-2.** Electronic profile (e-Profile)

e-Profile is a web-based application within MODS that allows tracking of Soldiers who have temporary or permanent medical conditions that may render them not medically ready to deploy. The e-Profile system creates, routes, and stores all DA Form 3349s (Physical Profile). It allows commanders and designated MEDPROS read-access personnel immediate visibility of Soldiers' profiles. Commanders should provide for Career Counselors to obtain access to the e-Profile system and follow instructions pertaining to their roles in the MAR2 process (see paragraph 2-2d above).

Note: See appendix C for instructions on accessing and reading e-Profile.

#### **Chapter 4 Special considerations for Initial Military Training (IMT) units**

#### **4-1. Reception battalions**

Reception battalion commanders should coordinate with the MTF supervisor of medical and dental in-processing activities to ensure that medical in-processing personnel enter data into MODS as required (TRADOC Reg 350-6, para K-7, and TRADOC Reg 350-36, para 4-1a(1)), with special attention to the following:

a. DNA specimen – Enter "D" (drawn) along with the date specimen obtained; Armed Forces Repository of Specimen Samples for the Identification of Remains (AFRSSIR) will confirm, i.e., enter "Y" for yes, within 60 days.

b. HIV test – Enter "D" (drawn) along with the date specimen obtained; Armed Forces Health Surveillance Center (AFHSC) will confirm, i.e., enter "Y" for yes, within 60 days.

c. Immunizations and tuberculin skin test – Enter data for immunizations and tuberculin skin test (if indicated by screening questionnaire) administered.

d. Individual medical equipment (IME). This category comprises 5 elements:

(1) 2 pairs eyeglasses (2PG) – Enter "Y" or "NA".

(2) 1 mask insert (1MI) – Enter "Y" or "NA".

(3) Hearing aid with extra battery (HAB) – Soldiers with designator "1" under "H" in their profiles will automatically have "NA" populated in the HAB field. If a Soldier is anything other than "1" the HAB field will be blank and will need to be manually filled.

(4) Medical warning tag – Enter "Y" or "NA".

(5) 1 military combat eye protection insert (MCEP-I) - Enter "Y" and the issue date or "NA".

e. Dental Readiness Classification (DRC). A Soldier's DRC (1, 2, or 3) (see table B-1 below) is assigned at the time of his or first for-record dental exam, usually in advanced individual training (AIT) (or AIT phase of One Station Unit Training). Consequently, commanders of basic combat training units should expect that a significant number of Soldiers will remain "non-compliant"; commanders of AIT units should expect that the number of "non-compliant" Soldiers will decrease over time.

f. Profile. The physical profile system classifies individuals according to functional abilities. The term "profile" can refer to the series of numerical designations (e.g., "111121", where "1" is considered a high level of fitness; "2" may require some activity limitations; "3" may require significant limitations; and "4" indicates that performance of military duty must be drastically limited) assigned to a Soldier's functional capacity (P, physical capacity or stamina; U, upper

extremities; L, lower extremities; H, hearing and ears; E, eyesight; and S, psychiatric); or it can refer to DA Form 3349 (Physical Profile), which includes information on activities the Soldier can perform, as well as the physical limitations, for a given medical condition and/or physical defect. DD Form 689 (Individual Sick Slip) is intended only for acute illnesses of not more than 7 days total.

(1) As a rule, an IET Soldier's profile serial should contain "1s" or "2s" (and not "3s" or "4s"), depending on the physical profile qualifications for a given military occupational specialty (MOS) (see DA Pam 611-21, Chapter 10, under "Enlisted MOS Specifications"). For example, for an infantryman the physical profile qualification is "111221."

(a) If a Soldier received a waiver for a medical or physical condition, the waiver authority assigns either a "1" or "2" against the applicable functional capacity.

(b) If a Soldier arrives to the Reception battalion with a profile serial containing a "3," ensure he or she is referred to a healthcare provider for resolution (in accordance with TRADOC Reg 350-6, para K-7b).

Note: Revisions to the profile serial must be accomplished in e-Profile and not MODS or MEDPROS.

g. Vision Readiness.

Note: 2PG, 1MI, and MCEP-I are covered under IME above.

- (1) Complete and document vision screening.
- (2) Enter date.
- h. Hearing Readiness.

Note: HAB is covered under IME above.

Note: Data must be entered into the Defense Occupational and Environmental Health Reporting System, Hearing Conservation - Data Repository (DOEHRS-HC/DR), which feeds the MEDPROS web data entry module.

- (1) Hearing Exam Enter date.
- (2) Select "DD 2215" or "DD 2216" as appropriate.
- (3) Hearing Profile Select designator.
- (4) DA Form 3349 Select "Yes", "No", or "NA".
- (5) Hearing Protection Type Make appropriate selection.

i. Pregnancy. On the basis of a negative pregnancy test, enter "No" and date.

j. Periodic health assessment (PHA). Ensure date of the accession medical examination has been posted.

Note: Most accession physicals are fed to MEPROS from Total Army Personnel Database weekly. Data that is received from other databases depends on personally identifiable information (PII) recognition in MEDPROS.

If the date of the accession medical examination has not been posted, enter the date from DD Form 2808 (Report of Medical Examination).

#### 4-2. Training units

a. Student units are listed separately in the Command Drill Down Report within MEDPROS; see para B-3b(2) below for navigation instructions.

b. Second and third doses of vaccinations. Based on immunity testing during medical processing at the reception battalion, some Soldiers in IET units may require second and third doses of vaccinations. Some Soldiers will require hepatitis A and/or hepatitis B vaccines during phase II of basic training and third doses during phase V+ (approximately 26th week of One Station Unit Training, or 17th week of AIT). Additionally, some Soldiers may require second doses of varicella (chicken pox) vaccine during phase II; some may require second doses of measles, mumps, and rubella (MMR) vaccine at the end of phase III. IET unit commanders should coordinate with their supporting medical treatment facilities (MTFs) to schedule either Soldier visits to the MTFs or shot team visits to their units.

c. Dental Readiness Status. Commanders should track their Soldiers' DRC to ensure they have achieved DRC2 by the end of AIT.

d. Split-training option (STO) Soldiers. Reserve Component units are responsible for ensuring completion of PHAs and dental examinations that become due while Soldiers are on inactive status between STO-1 (basic combat training portion) and STO-2 (AIT or MOS portion of One Station Unit Training).

#### Chapter 5 Special considerations for geographically-remote units

Because civilian and sister Service health care facilities cannot normally access MEDPROS (and civilian facilities additionally cannot accommodate Army-unique requirements (such as some immunizations, and the PDHRA), commanders of geographically remote units should preferably seek opportunities for their Soldiers to complete their medical requirements at Army medical treatment facilities (MTF). If such travel is not feasible, the commander should exercise other options as noted below.

#### 5-1. Travel to Army installations

Commanders should attempt to coordinate Soldier visits to Army installations for medical readiness updates in conjunction with travel for other missions. Coordination may be made with either Army MTFs or installation Soldier readiness processing sites to accomplish medical readiness updates.

#### 5-2. Coordination with other Services or Veterans Administration

a. Commanders may coordinate with U.S. Navy, U.S. Air Force, or Veterans Administration medical facilities to accomplish their Soldiers' medical readiness updates. Alternately, a Soldier may accomplish these requirements with his or her TRICARE Prime Remote (TPR) provider.

b. If a Soldier completes readiness requirements with a non-Army facility, the commander must ensure that the Soldier provides pertinent documents (e.g., PHA, eyeglass prescription, immunizations, PDHRA completion) to an Army MTF by mail, facsimile, or scanned copy in order for the item to be entered in MEDPROS.

# 5-3. Physical profiles

Physical profiles may be documented and recorded at Army MTFs (see under chapter heading above) or by coordination with agencies contracted to provide this service. See para C-3 below for instructions on accessing physical profiles.

#### 5-4. Post-Deployment Health Reassessment (PDHRA)

Soldiers with duty and residence locations outside the TRICARE prime service area (more than 50 miles or more than 1-hour drive from an MTF and covered by TPR) are eligible for a telephonic interview with a health care provider through the approved DOD call center. Commanders may coordinate on-location or call center screening events by calling 888-734-7299 (888-PDHRA99) and selecting option "3"; or by accessing http://www.armyg1.army.mil/hr/pdhra/ and clicking on "PDHRA AKO Commanders & Leaders Homepage" then (under "Find Your PDHRA Coordinator") "Active Army". See para B-4 below for instructions on accessing PDHRA reports.

# 5-5. Coordination with Army MTFs

Army MTFs are prepared to accommodate any Soldier for medical readiness and PDHRA updates regardless of the Soldier's enrollment in another MTF or TRICARE Prime Remote (TPR).

#### 5-6. Reserve Health Readiness Program

Active Duty Soldiers enrolled in TPR can have their individual medical readiness (IMR) requirements completed and entered into the MEDPROS by the Reserve Health Readiness Program (RHRP).

a. Services. The RHRP supports IMR requirements (PHAs, deployment-limiting conditions, immunizations, HIV tests, DNA specimens, and vision, hearing, and dental readiness) for Active duty Soldiers located in geographically remote areas and enrolled in TPR.

b. Procedure. Call 866-377-1326 and follow the prompts for a RHRP representative to assist the Soldier with the appropriate arrangements. If the Soldier requires medical care for other than the services listed above, contact the TRICARE Regional Contractor; see http://www.tricare.mil/Welcome/AboutUs/Regions.aspx.

c. Profiles. RHRP physicians are specially trained on the Army's profiling system, and are designated as profiling officers to sign as the first signatory on DA Form 3349. They will review provided medical documentation for Soldiers and then prepare DA Form 3349 (Physical Profile) in e-Profile.

Note. Primary care providers (not RHRP physicians) are responsible for completing Soldiers' PHAs.

#### Appendix A References

ARs, DA pamphlets, field manuals and DA forms are available at www.apd.army.mil. TRADOC publications and forms are available at http://www.tradoc.army.mil/publications.htm.

#### Section I Required Publications This section contains no entries.

#### Section II Related Publications

ALARACT 331/2013, subject: HQDA EXORD 015-14, Deployment Health Assessment Program, 121713Z Dec 13.

AR 40–35 Dental Readiness and Community Oral Health Protection

AR 40-66 Medical Record Administration and Health Care Documentation

AR 40-400 Patient Administration

AR 40-501 Standards of Medical Fitness AR 220-1 Army Unit Status Reporting and Force Registration – Consolidated Policies

AR 600-8-101 Personnel Processing (In-, Out-, Soldier Readiness, Mobilization and Deployment Processing)

AR 635-200 Active Duty Enlisted Administrative Separations

Army Directive 2012-18 Military Occupational Specialty Administrative Retention Review (MAR2)

DA Pam 220-1 Defense Readiness Reporting System–Army Procedures

DA Pam 611-21 Military Occupational Classification and Structure

e-Profile User Guide – Getting Started (see para C-3h for access instructions)

Headquarters, Department of the Army (HQDA) Execute Order (EXORD) 265-09, Soldier First Term Dental Readiness, 071215Z Aug 09.

HQDA EXORD 185-11, Reduction of Non-Deployables, 221734Z Apr 11 (https://www.us.army.mil/suite/folder/<u>33997458</u>).

HQDA EXORD 110-13, Ready and Resilient Campaign Plan, 271715Z Mar 13 (https://www.us.army.mil/suite/folder/38563138).

Medical Readiness Leader Guide (Available at: https://medpros.mods.army.mil/MEDPROSNew/.)

MEDPROS Mainframe: Training Reference Guide (accessible through MEDPROS website)

Memorandum, HQDA OTSG, DASG-HSZ, subject: Individual Medical Readiness Services for Active Duty TRICARE Prime Remote Soldiers, 10 Feb 12.

Memorandum, HQ TRADOC, ATBO-M, subject: Monitoring and Maintaining Soldier Medical Deployability, 21 Nov 11 (<u>https://www.us.army.mil/suite/folder/33997458</u>)

Reserve Health Readiness Program website (http://rhrp.fhpr.osd.mil/)

TRADOC Regulation 350-6 Enlisted Initial Entry Training Policies and Administration

#### TRADOC Tasking Order IN120091

Implementation of the TRADOC Non-Deployable Report to Support Army Goal of Reducing Non-Deployable Personnel by 1 Apr 12 (https://www.tkeportal.army.mil/sites/cats/default.aspx) TRICARE website (http://www.tricare.mil)

#### Section III Prescribed Forms This section contains no entries.

Section IV Referenced Forms

DD Form 689 Individual Sick Slip

DA Form 3349 Physical Profile

DA Form 7425 Readiness and Deployment Checklist

#### Appendix B Accessing and reading MEDPROS

#### **B-1.** Description

MEDPROS is the Web module in MODS and is the primary tool to record, track, and report the medical readiness for Soldiers and units. (See chapter 3 for overview of MODS.) It contains medical readiness data and Post-Deployment Health Reassessment reports.

#### **B-2.** Roles

Army policy establishes a requirement for commanders to appoint dedicated MEDPROS unit administrators (at brigade and above), unit managers (at battalion and below), and commander clerks (at all levels) to track soldier and unit medical readiness (HQDA EXORD 185-11, para 3.B.3.A.3.E.).

#### **B-3.** Access

To access and read your unit's MEDPROS reports, including reconciliation with the electronic military personnel office (eMILPO) Unit Personnel Accountability Report (AAA-162):

a. Open MODS website at http://www.mods.army.mil/ and click on "MEDPROS".



b. Click on "<u>OBTAIN A MEDPROS ACCOUNT (CAC Required)</u>" and follow instructions. Once access is obtained, you will have access to medical readiness and PDHRA data.



Figure B-2. MEDPROS login page

#### **B-4.** Obtaining medical readiness data (pertains to USR)

Medical readiness data includes the periodic health assessment; deployment-limiting medical conditions; dental readiness; immunizations; DNA specimen; current HIV test; hearing readiness; and vision readiness, among other data elements. (See para 3-1a regarding the requirement to maintain medical readiness data.) There are two options for viewing your unit's medical readiness data: (1) view Soldiers in a specific unit (identified by a unit identification code (UIC)) with "non-available" status; and (2) view units at all levels of command showing numerical "non-available" status. Either option will yield the same "Individual Medical Readiness" report (see figure B-6).

a. View Soldiers in a specific UIC with "non-available" status (MR codes of 3A and 3B) (see table B-1 below for descriptions of these codes).

(1) Pass cursor over "Medical Readiness," then "Aggregate and Special Rpts (Unit/TF)," then click on "USR Status Report (USR) Tool" (see figure B-3).

		Home	Medical Readiness Immuniza	ations MHA	MRC Alerts	Referral Reports	Executive Reports	Help/Logou
DACE REALT A PROTECTION		A	Individual Medical Readiness	2	一生 切里的	State State State	1 T 1	
+ A	Unit/TF Med Reading	ess Report	Aggregate and Special Rpts(Unit	UTD A CONTRACT	St. Anna	Manager and		
Contraction of Contract of Contraction	USR Status Report (	USR) Tool	Single Medical Readiness Rpts		Children of the local division of the local	CONTRACTOR PROPERTY	10 - V	10 T 10 M
	Cdr Profile Report						and the second second	
	FEMP Report							
MEDPROS UPDATES	Unit	ashboar	d					
Latest Message - 2013/04/30				Unit Lookup				
Pulling Web Reports for	DL 1:	Green	100.00%			ookup		
Task Forces	DL2:	Green	100.00%			Jookup		
On May 2 <sup>nd</sup> , 2013, the	DL3:	Green	100.00%	Unit Reporti	0.91			
available to users the	DL4:	Green	96.67%	onic Report	16.			
recently modified Task	DL5:	Green	100.00%	<ul> <li>MRC</li> </ul>	UMR Command	Drill Down		
Force lookup filter that	DL6:	Green	96.67%	• UMR	Status Report			
exists in all web reports	DNA:	Green	100.00%	<ul> <li>PDH</li> </ul>	RA Report			
where UIC and Taskforce	DEN:	Green	80.00%	• Cdr	Profile Report		_	
are Report Criteria Type	HIV:	Green	86.67%	Con:	solidated DLC R	eport	_	
options. Click here to	IMM:	Green	83.67%					
access and/or download a	PHA:	Green	83.33%					
short powerpoint								
presentation on how to	Soldie	er Dashbo	bard					
best utilized the new TF	The second s							
selection. These changes				Soldier Looku	D.			
were made to address				Sound Looke				
concerns expressed by	MRC:	Gree	n		1	ookup		
customers after using the	DL1 (Peri	n): Gree	2					
recently fielded laskforce	DL2 (MAR	2): Green	1					

Figure B-3. USR Status Report (USR) Tool selection

(2) At "Start a New Roster" type your unit's UIC, then click on "Create Roster" (see figure B-4).

AEDPROS USR Report		
Report Selection Criteria	Report Filter Criter	ia
Saved Rosters:	No filter criteria available. Records Per Page:	1000
Start a New Roster: W Create Roster Note: UIC must be in the WXXXXXX format.	* Instructions: 1. To view a Roster select from th 2. To create a Roster enter an UIG	e Dropdown List and click the 'Run Roster' button. C and click the 'Create Roster' button.
Roster Lookup by AKO Login ID:		

Figure B-4. Start a new roster

(3) The MEDPROS USR Report displays all Soldiers in your unit, with notations of "non-available" status (MR codes of 3A and 3B) and "deployment limiting" (DL) codes. (See table B-1 for descriptions of DL codes). In case of discrepancies in the list (Soldiers listed who are not in your unit, or Soldiers not listed who are in your unit), the battalion-level personnel staff officer should request a correction in the Army personnel system (from which MEDPROS receives its data).

(4) Click on the "last 4" of a Soldier's SSN to display details of his or her IMR (see figures E-5 and E-6).

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FORCE		Home	Medical Readiness	Immunizations	MHA MRC A	Verts Referral Reports	Executive Rep
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MEDPROS U	SR Report					<u>e</u> 🔤	🖪 🖻 🤜
		WODIFY FILTERS +	REPORT LEG	END			
Delete Selected	Defusik Dester Error TADDE					Add New St	SN to Roster
Devele Selected	Refresh Roster From TAPDD			L	Not	e: SSN must be in the xxxxx	xxxxx format.
		MEDPROS USR Rep	ort for W				
		Report Date: 2013/05/06 3:08 PM	A. Data as of Date:	2013/05/06			
lete Name		SSN	Compo	Rank	MOS	MRC	-
			AA		88M20	3B(DL1)	
			AA		11B3P		
밑			AA		27A		
			AA		27A		
			AA		1125Q	3B(DL2,DL4)	
			AA		3185M		
			AA		91Z6M		
			AA		67D9C		
			AR		31A	3B(DL1)	
			AA		255A		
			AA		11B3V		
			AA		19A		
			AA		11820		
			AA		88H4B	3A(DL6)	

Figure B-5. MEDPROS USR Report

R	G G	HV G	G	PHA R	VRC G	SPG G	G	HRC G	R	R	Pan G	GPR G	оян G	6
										L				L
NRC .		4					Physical 4	coecoment Di	128					
Personnel							PULHES						******	
Name							PULHES St	unae					Physical 6	ian.
224							Current E	kam Date				R	2011/04	/15
Rank							Exam Sou	nae					Physical B	ian.
209							Physical C	regory					Δ	
Sex .		- F					Height						67	
UIC / Decor							Violetz						157	
Compo							Temp Pro	Me (Click to	New Tempo	rary Profile d	158)		No	
Arrival Date							Expiration	Date						
Location							Fight Stat							
Command		US	ARMY TRAB	ING AND DOG	TRNE COM	NAND .	Duty Link	ting Condition	ve (DLC)					
Duny Title / AOC				1.1			DL1					G	N	
Dencal							DL2					6	N	
Dental Class		G	2				DL3					G	N	
Panonex		G	Y				DL4					G	N	
Last Dental Exa	n	G	2012/07	712			01.5					G	N	
Vition							DL6					G	N	
Vicion Class		G	1				Pharmacy	Lab/00ay						
Vicion Screening	Dane		2012/11	/16			Required	Medications (	in Hand			R		
2PR Galore		G	NA				Blood Typ	•					44	
Mack Incents		G	NA				HV Text I	ane -				G	2012/08	/29
Mitclon Regulated	Contact Lenses						DNA					G	¥	
Military Combat	Sys Protection		Y				Solie Cell	Screen						
Wittary Combat	Sye Protection Intert	e G	NA				Solie Cell	Screen Date						
Last Prescription	Date on File						GSPD Data	•						
Hearing							GSPD Stat	ue -					Masing	
Hearing Class		6	NA				Malarta ()	ectoranalie				G		
Hearing Readine	er Statue		Go				immunitar	tene						
Audiogram Date			2012/06	/29			M.M. Profil	e (Profile 7.1	Linnary / D	02766C)		G	ROUTINE	ADULT
Triple or Single 1	lange Earplugs Issue	6					Annotates	d in Deploym	ent Redical	Record				
Equipment							Blood Typ	•					4-	
Hearing Ald		G	NA				Medication	1						
Redical Varning	Tage	R					Medical Vi	arning Tage						
tilergy / Conditi	ans .						Innunitat	ton Record						
Occupational Pr	onection						Summary 2	heet of Hed	tal Problem	6				
Respiratory		G	NA				Correctie	Lens Presst	psian					
Hearing		G	NA				Deployme	nt Health Ap	acomentos					
Vition		G	NA				Lanert Da	te For				Status	Date	
							289					NA		
							Post					Na		
							POHRA							

Figure B-6. Individual Medical Readiness report

b. View specific medical readiness reports showing "amber" and "red" status.

(1) Periodic health assessment report.

(a) Pass cursor over "MHA" [Medical Health Assessments], then click on "PHA Report" (see figure B-7).

PORCE HEALTH PROTECTION		Home Medi	cal Readiness Immuniz	Antions MinA MRC Alerts Pre Deployment Report Post Deployment Report Post Deployment Rease	Referral Reports Executive Reports Help/Logout t essment
				NCAT Report	
-				PHA Report	
MEDPROS UPDATES	Unit	Dashboard			<b>2 Q</b>
Latest Message - 2014/08/13 <u>New Timeline for MEDPROS</u> <u>Updates Fielding!!</u> There will be another delay in the fielding of the MEDPROS changes listed below due to an extended testing period for the Deployment Health Assessment changes. The release date will be announced once determined, but cannot be estimated at this time. The following changes in MEDPROS programs are still	DL1: DL2: DL3: DL4: DL5: DL6: DL7: DNA: DEN: HIV: HIV: HW: HA:	Green Green Green Green Green Green Green Green Green Green Green Green	100.00 % 100.00 % 97.30 % 100.00 % 100.00 % 100.00 % 100.00 % 100.00 % 86.49 % 86.49 % 94.59 %	Unit Lookup: Lor Unit Reporting: MRC UMR Command DI UMR Status Report Othran Porfile Report Consolidated DLC Rep	okup niL Down port
planned for that implementation: * DMDC file with deployment Start/End dates now used for	Soldi	er Dashboard			

Figure B-7. PHA report

(b) At "UIC" type your UIC, and click on "Run Report" (see figure B-8).

	Home Medical Readin	ess Immunizations MHA	MRC Alerts	Referral Reports	Executive Reports	Help/Logout
		A. Frank				
				artaba ar 2020.		
PHA Report	▼ MODIFY FILTERS → REPOR	LEGEND		<u> 8</u>		
Report Selection Criteria	Rep	ort Filter Criteria	nan a mara a mana a mara L			
Report Criteria Type: UIC	Com	component: COMPO (all)	(AC,NG,USAR)	•		
UIC:	Form	at by: Name -	•			
	Reco	rds Per Page: 1000				
		Run Repor	t			

Figure B-8. PHA report, cont.

(c) You will see an alphabetical roster of your unit, showing all Soldiers assigned (see figure B-9). Interpret the annotations as follows:

Green – Indicates period of 0 to 13 months since the last PHA.

Amber – Indicates period of greater than13 months but fewer than 15 months since the last PHA.

Red – Indicates period of greater than 15 months since the last PHA, or if there is no PHA date on file (field blank).

		<b>F2226</b>		1.0	14	an la	44	14 C 14					(1, 2)	
-	FORC		·			Home	Medic	al Readiness	Immuniza	tions MHA	MRC Alerts	Referral Reports	Executive R	eports Hel
Con l	195 - C		H				2 mil	30%				a started and a started at the		
C and C	100			A		Denth		Sec. 12	A A				and the second	
PHA	Repor	t										<u> </u>		
				- 	MO	DIFY FILT	ERS 🖈	REPORT LE	GEND 👻					
						DHA Dop	ort for U							
				Co	ompon	ent: COMPO	(all) (AC,	NG,USAR), For	mat: Name					
			R	Report	Date:	2014/09/25	3:39 PM,	Data as of Da	ate: 2014/	09/25				
RC	Cbt	Name	Rank	SSN	Age	AOC/MOS	шс	Location	Compo	PHA	Next PHA	Physical Exam	PULHES	*
xempt	Dfrmnt	name				19A	010		AA	Date 2013/09/25	Due 2014/12/25	Date 2012/02/08	Code 111111	
		5			-	15T48			AA	2013/11/12	2015/02/12	2009/09/04	212111	
						42A			AR	2014/06/16	2015/09/16	2005/02/23	111121	
				-	-	42A		-	AR	2013/09/09	2014/12/09	2007/06/11	111111	
					-	UNK			AR	2014/04/08	2015/07/08	2000/01/01	111111	
			-	-		12A			AR	2011/09/22	2012/12/22	2005/11/23	111111	
			-			92G48			AA	2014/07/15	2015/10/15	2005/07/29	111111	
			_	-		128			AR	2012/12/06	2014/03/06	2006/12/20	112211	
				_		19A	-	1	AR		2014/10/22	2006/08/22		
			_	8		008			AA	2012/07/27	2015/11/27	2014/08/27	111111	=
			/ <b></b>	2	-	42A58			AA	2014/08/14	2015/11/14	2004/03/16	111111	
				2	-	198			AA	2012/05/01	2013/08/01	2007/03/26	112111	
				-	-	008			AA		2014/10/30			
					-	UNK			AR	2012/09/11	2015/05/11	2014/02/11	111211	
	Y				-	008			AA	2012/02/28	2013/05/28	2007/09/26		
					-	2/A			40	2014/05/18	2015/09/18	NO RECORD		
					-	274			AR	2014/08/19	2015/08/30	2007/07/15	112111	
					-				~	2014/00/19	2010/11/19	2002/00/20		

Figure B-9. PHA report, cont.

# (2) Dental Readiness Report.

(a) Pass cursor over "Medical Readiness," then "Single Medical Readiness Rpts," then click on "Dental Readiness" (see figure B-10).

FORCE HEALTH PROTECTION		Home	Medical Readiness Immuniz	ations MHA	MRC Alerts	Referral Reports	Executive Reports	Help/Lo
	TUC	1	Individual Medical Readiness		v	and the second second		
San and the Color		Al Martin	Aggregate and Special Rpts(Un	t/TF)	1.1.	Mar Color		
State of the second	Dental Readiness		Single Medical Readiness Rpts		and the second second	the second second		
	Deployment Limitir	ng Conditions	5					
	Exams/Physicals							
MEDPROS UPDATES	Hearing Readiness		4					
	Medical Equipment							
Latest Message - 2014/08/13	Dharmany Lab X ra			Unit Lookup:				
New Timeline for MEDPROS	Pharmacy Lab X-ra	y .						
Updates Fielding!!	Vision Readiness		100.00 %		3L	.ookup		
There will be another delay in	DL2:	Green	100.00 %					
the fielding of the MEDPROS	DL3:	Green	100.00 %	Unit Reportin	g:			
changes listed below due to an	DL4:	Green	97.30 %					
extended testing period for the	DL5:	Green	100.00 %	<ul> <li>MRC I</li> </ul>	JMR Command	Drill Down		
Deployment Health Assessment	DL6:	Green	100.00 %	<ul> <li>UMR :</li> </ul>	Status Report			
changes. The release date will	DL7:	Green	100.00 %	PDHR	A Report			
be announced once	DNA:	Green	100.00 %	• Car P	rofile Report	1.502		
determined, but cannot be	DEN:	Green	86.49 %	Consi	MOATED DLC R	eport		
estimated at this time.	HIV:	Green	86.49 %					
The following changes in	IMM:	Green	94.59 %					
MEDPROS programs are still	PHA:	Green	86.49 %					
planned for that	Soldie	er Dashbo	pard					
	Dordine		Sentitive					

**Figure B-10. Dental Readiness report** 

(b) At "UIC" type your UIC, and click on "Run Report" (see figure B-11).

PORCE HEALT		Home Medical Readiness	Immunizations MHA MRC AI	erts Referral Reports Ex	ecutive Reports	Help/Logout
Dental Readines	s Report Options ⊽™ Criteria	ODIFY FILTERS 🖈 REPORT L	Report Filter Cri	🗠 🖬 🛛		
Report Criteria Type: UIC:	UIC •		Component: Format by: Dental Readiness Class: Records Per Page:	COMPO (all) (AC,NG,USAR) Name Dental Readiness Class(all) 1000 Run Report	•	

Figure B-11. Dental Readiness report, cont.

(c) You will see an alphabetical roster of your unit, showing all Soldiers assigned (see figure B-12). Interpret the annotations as follows:

Green – Indicates that no DRC2 or 3 rating exists, and a period of 0 to 13 months since the last dental exam.

Amber – Indicates a period of greater than 13 months but less than 15 months since the last dental exam.

Red – Indicates a period of greater than 15 months since the last dental exam.

Nome         Medical Readiness         Medical Readiness         Medical Readiness         Medical Readiness         Referral Reports         Executive Reports         Heipil logout           Dental Readiness         Report Dottons         Immunications         Medical Readiness         Report Data         Immunications						ta da	<u></u>			2 a - 1		2.00			
Dental Readiness Report Options         Dental Readiness Report LEGEND         Dental Readiness Report Date: 2014/09/25 3:59 PM, Data as of Date: 2014/09/25 3:40 PM end       Advance Date: 2014/09/25 3:59 PM, Data as of Date: 2014/09/25 3:40 PM end         Allion: Dental Work Needed 2015/07/10 Y       Gental Work Needed 2015/07/10 Y         Allion: Dental Work Needed 2015/07/10 Y       Gental Work Needed 2015/00/1 Y       Gental Work Needed 2015						Home	Medical Readiness	Immunizations	MHA	MRC Alerts	Referral Rep	orts Executive	Reports	Help/Logout	
Pental Readiness Report Options       Notify FillErs & REPORT LEGEND         MOLIFY FILTERS & REPORT LEGEND         Detail Readiness Report         Dite of metal Readiness Report Legend         Dite of metal Readiness Report Date: 031400/253 359 PM. Colspan="2">Dite of mext Exam         SNR Colspan="2">Che metal Work Needed         1 <td cols<="" th=""><th>S/A</th><th>FORCE H</th><th>EXACIN</th><th>TPROTECTION</th><th>TIAC</th><th>1</th><th>0 1 2 1</th><th>12 4 1</th><th></th><th></th><th>1000</th><th></th><th></th><th></th></td>	<th>S/A</th> <th>FORCE H</th> <th>EXACIN</th> <th>TPROTECTION</th> <th>TIAC</th> <th>1</th> <th>0 1 2 1</th> <th>12 4 1</th> <th></th> <th></th> <th>1000</th> <th></th> <th></th> <th></th>	S/A	FORCE H	EXACIN	TPROTECTION	TIAC	1	0 1 2 1	12 4 1			1000			
Pental Readiness Report Options       Image: Component Local Device Report Dev	1 3 -		. *			and a	223137		1						
MRC       Cbt       Date of mext Exam       Panx       Name       SSN       Rank       AOC/MOS       UC       Station       Composition         MRC       Cbt       Differ ent large of large					and the second second						1.22				
Non-       SN       Raik       ACC//NOS       UC       Station       Component: Component: COMPO (al) (AC,NG,USAR), Format: Name Experit Date: 2014/09/25 31599 MM, Data as of Date: 2014/09/25         NRC       DC       Reason       Date of Next Exam       Parx       Name       SSN       Raik       ACC//NOS       UC       Station       Component: Component: 2014/09/25 31599 MM, Data as of Date: 2014/09/25         NRC       DEC       Reason       Date of Next Exam       Parx       Name       SSN       Raik       ACC//NOS       UC       Station       Component: Component: 2014/09/25 3124         2       Minor Dental Work Needed       2015/07/01       V       - <td< th=""><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></td<>															
MODIFY FILTERS * REPORT LEGEND         Dental Readiness Report         Mance       SSN Rank AOC/MOS       UC       Station       Component         Dental Nork Reeded       2014/12/11       Y       Odd       Odd       AR         Allor Dental Work Reeded       2015/00/16       Y       Odd       Odd       A         Allor Dental Work Reeded       2015/00/16       Y       Odd       Odd </th <th>Denta</th> <th>al Readi</th> <th>ness</th> <th>Report Option</th> <th>۲</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	Denta	al Readi	ness	Report Option	۲										
Detail Readiness Report         Detail Work Needed         2       Alinor Detail Work Needed       Dots/07/03       Y       Odd       Adv       Adv         2       Alinor Detail Work Needed       2015/07/03       Y       Odd       Adv       Adv <th col<="" th=""><th>Dene</th><th>at noudi</th><th></th><th></th><th>MODIE</th><th></th><th>ERS &amp; REPORT LE</th><th>GEND</th><th></th><th></th><th></th><th></th><th></th><th></th></th>	<th>Dene</th> <th>at noudi</th> <th></th> <th></th> <th>MODIE</th> <th></th> <th>ERS &amp; REPORT LE</th> <th>GEND</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	Dene	at noudi			MODIE		ERS & REPORT LE	GEND						
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NRC       Cbt       DRC       Reason       Date of Next Exam       Name       SN       Rank       AOC/MOS       UC       Station       Compo**         2       Minor Dental Work Needed       2014/12/11       Y       2014/12/25       Y       2015/07/05       Y       2015/					Report Date: 2014	1/09/25	3:59 PM, Data as of D	ate: 2014/09/25							
2       Minor Dextal Work Needed       2015/07/03       Y       90A       AR         1       2014/12/11       Y       42H       AR         1       2014/12/25       Y       25A       AR         1       2016/01/26       Y       25A       AR         1       2015/09/20       Y       13A       AR         1       2015/09/20       Y       13A       AR         1       2015/09/20       Y       25A       AR         1       2015/09/24       Y       25A       AR         2       Minor Dental Work Needed       2015/09/24       Y       26A       AR         2       Minor Dental Work Needed       2015/09/24       Y       26A       AR         2       Minor Dental Work Needed       2015/09/24       Y       26A       AR <td< th=""><th>MRC Exempt</th><th>Cbt Dfrmnt</th><th>DRC</th><th>Reason</th><th>Date of Next Exam</th><th>Panx</th><th>Name</th><th>SSN</th><th>Rank</th><th>AOC/MOS</th><th>JIC Statio</th><th>n Compo**</th><th>Â</th><th></th></td<>	MRC Exempt	Cbt Dfrmnt	DRC	Reason	Date of Next Exam	Panx	Name	SSN	Rank	AOC/MOS	JIC Statio	n Compo**	Â		
1       2014/12/11       Y       42H       AR         1       2014/12/25       Y       25A       AR         1       2015/06/16       Y       42H       AR         1       2015/06/20       Y       42H       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         1       2015/09/04       Y       42A       AR       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         2       Minor Dental Work Needed       2015/09/10       Y       42A       AR         1       2015/09/14       Y       42A       AR       AR         1       2015/09/24       Y       42A       AR       AR         1       2015/09/24       Y       42A       AR       AR         1			2	Minor Dental Work Needed	2015/07/03	Y	-			90A	-	AR			
1       2014/12/25       Y       25A       AR         1       2015/04/16       Y       42H       AR       AR         1       2015/09/04       Y       42H       AR       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         1       2015/09/04       Y       42A       AR       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         2=>       4       Next Exam Overdue       2013/07/26       Y       42A       AR         2=>       4       Next Exam Overdue       2014/06/07       Y       42A       AR <td></td> <td></td> <td>1</td> <td></td> <td>2014/12/11</td> <td>Y</td> <td>-</td> <td></td> <td></td> <td>42H</td> <td></td> <td>AR</td> <td></td> <td></td>			1		2014/12/11	Y	-			42H		AR			
1       2015/04/16       Y       42/4       AR         1       2015/07/20       Y       13.4       AR         1       2015/07/20       Y       13.4       AR         1       2015/07/20       Y       42.4       AR         1       2015/07/20       Y       42.4       AR         1       2015/07/20       Y       42.4       AR         2       Minor Dental Work Needed       2015/07/20       Y       42.4       AR         2       Minor Dental Work Needed       2015/07/20       Y       42.4       AR         2       Minor Dental Work Needed       2015/07/24       Y       42.4       AR         1       2015/06/18       Y       42.4       AR         1       2015/07/26       Y       42.4       AR         1       2015/0			1		2014/12/25	Y				25A		AR			
1       2015/09/20       Y       13A       AR         2       Minor Dental Work Needed       2015/09/04       Y       42A       AR         1       2015/09/04       Y       194A       AA         1       2015/09/04       Y       42A       AA         2       Minor Dental Work Needed       2015/09/10       Y       AA         2       Minor Dental Work Needed       2015/09/10       Y       AA       AA         2       Minor Dental Work Needed       2015/09/10       Y       AA       AA         2       Minor Dental Work Needed       2015/09/18       Y       AA       AA         1       2015/06/18       Y       AA       AA       AA         1       2015/06/19       Y       AA       AA       AA         1       2015/06/19       Y       AA       AA       AA </td <td></td> <td></td> <td>1</td> <td></td> <td>2015/04/16</td> <td>Y</td> <td></td> <td></td> <td>_</td> <td>42H</td> <td></td> <td>AR</td> <td></td> <td></td>			1		2015/04/16	Y			_	42H		AR			
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1       2015/07/01       Y       194       4A       F         1       2015/09/04       Y       15749       AA       F         2       Minor Dental Work Needed       2015/09/10       Y       42A       AR         2       Minor Dental Work Needed       2015/09/24       Y       42A       AR         1       2015/09/18       Y       42A       AR         e=>       4       Next Exam Overdue       2013/07/18       Y       42A       AR         1       2015/09/18       Y       42A       AR       AR         ==>       4       Next Exam Overdue       2013/07/18       Y       40       42A       AR         ==>       4       Next Exam Overdue       2013/07/18       Y       40       40       AR         ==>       4       Next Exam Overdue       2014/08/08       Y       40       40       AR         ===>       4       Next Exam Overdue       2014/08/08       Y       40       40       40         ===>       4       Next Exam Overdue       2014/08/08       Y       40       40       40         ===>       4       Next Exam Overdue       2015/09/19				Minor Dental Work Needed	2015/09/04	Y			_	42A		AR			
1       2015/09/04       Y       15749       AA         2       Minor Dental Work Needed       2015/09/10       Y       42A       AA         1       2015/09/14       Y       40       AA         1       2015/09/14       Y       40       AA         1       2015/09/14       Y       40       AA         1       2015/09/19       Y       40       AA         1       2015/11/21       Y       40       AA         2       Minor Dental Work Needed       2015/12/21       40       AA         2       Minor Dental Work Needed       2014/12/03       40       42A<	· · · · · ·		1		2015/07/01	Y				19A		AA	=		
2       Minor Dental Work Needed       2015/09/10       Y       42A       AR         2       Minor Dental Work Needed       2015/09/24       Y       42A       AR         1       2015/09/16       Y       12A       AR         ==>       4       Next Exam Overdue       2013/07/26       Y       12A       AR         1       2015/04/30       Y       12A       AR         ==>       4       Next Exam Overdue       2014/06/07       Y       12B       AR         ==>       4       Next Exam Overdue       2014/06/07       Y       12B       AR         ==>       4       Next Exam Overdue       2015/07/28       Y       12B       AR         ==>       4       Next Exam Overdue       2014/06/07       Y       12B       AR         ==>       4       Next Exam Overdue       2015/07/28       Y       12B       AR         1       2015/07/29       Y       2015/07/28       AR       2005       AA         1       2015/07/29       Y       40A       42A53       AA         2       Minor Dental Work Needed       2015/07/03       Y       40A       42A53       AA <td>· · · · ·</td> <td></td> <td>1</td> <td></td> <td>2015/09/04</td> <td>Y</td> <td></td> <td></td> <td>_</td> <td>15T48</td> <td></td> <td><b>AA</b></td> <td></td> <td></td>	· · · · ·		1		2015/09/04	Y			_	15T48		<b>AA</b>			
1     2015/06/24     Y     42A     AR       1     2015/06/18     Y     12A     AR       1     2015/06/18     Y     12A     AR       1     2015/06/18     Y     12A     AR       1     2015/06/18     Y     12B     AR       1     2015/06/18     Y     12B     AR       1     2015/06/17     Y     12B     AR       1     2015/06/07     Y     12B     AR       1     2015/11/21     Y     15A     AR       1     2015/11/21     Y     15A     AR       1     2015/11/21     Y     15A     AR       2     Minor Dental Work Needed     2015/08/08     Y     00B     AA       2     Minor Dental Work Needed     2014/12/03     Y     19B     AA				Minor Dental Work Needed		Y		_	_	42A		AR	- 11		
1     2015/06/18     Y     1     01K     AR       ==>     4     Next Exam Overdue     2013/07/26     Y     12A     AA       ==>     4     Next Exam Overdue     2014/08/08     Y     12B     AA       ==>     4     Next Exam Overdue     2014/06/07     Y     12B     AA       ==>     4     Next Exam Overdue     2014/06/07     Y     008     AR       1     2015/11/21     Y     008     AA       1     2015/08/08     Y     008     AA       2     Minor Dental Work Needed     2015/08/08     Y     198     AA				Minor Dental Work Needed	2015/09/24	Y			=	42A		S AR			
image: sevent bland bla			-		2015/06/18	¥		_	_	UNK		AR			
		==>		Next Exam Overdue	2013/07/26	- <u>-</u>			=	12A			- 11		
Low         Max         Low         Low <thlow< th=""> <thlow< th=""> <thlow< th=""></thlow<></thlow<></thlow<>			-	Next Exam Overdue	2015/04/30	·		= =	=	108			-		
Image: Construction			-	Next Exam Overdue	2014/06/07	v			-	104			_		
2         Minor Dental Work Needed         2015/08/08         Y         A           2         Minor Dental Work Needed         2014/12/03         Y         Y         A			1	Next Exam over due	2015/11/21	Y			-	008		μ. ΔΔ			
2 Minor Dental Work Needed 2014/12/03 Y			2	Minor Dental Work Needed	2015/08/08	Y			-	42A58		AA			
				Minor Dental Work Needed	2014/12/03	Y			-	198		AA			
1 2015/10/28 Y 006 AA			1		2015/10/28	Y		_		008		AA			

Figure B-12. Dental Readiness report, cont.

b. View units at all levels of command (shows only Soldiers in "non-available" status).

(1) Pass cursor over "Executive Reports", then "Medical Readiness", and click on "MRC UMR Command Drill Down" (see figure B-13).

			Home N	Iedical Readiness Immuniz	ations MHA	MRC Alerts MRC UMR Comm MR Summary Col MRC By Location	Referral Reports and Drill Down mmand Drill Down	Executive Reports He Medical Readiness MNR Management Report Immunizations	lp/Logout
	MEDPROS UPDATES	Unit I	Dashboard			MRC State/Location Medical Readines (MRC) Status Medical Readines	on Drill Down s Classification s Classification	Hearing Task Forces Task Forces Admin	
	Latest Message - 2013/07/02 New Shot Protocol for	1			Unit Looku	(MRC) Requireme PHA Compliance	inte		
- Constant	Japanese Encephalitis Vaccine	DL1:	Green	100.00%		DNA Command D	rill Down		
Marrie and	As of this afternoon, the JEV	DL2:	Green	100.00%		HIV Command Dr	ill Down		
6.87	Vaccine (CDC Code 134) now	DL3:	Green	100.00%	Unit Report	Vision Command	Drill Down		
	requires a total of three	DL4:	Green	94.44%		Destal Communic	D-ill D-in-		
	vaccinations given at 0, 28	DLS:	Green	100.00%	• MR	Dental Command	Drill Down		
	days, and 1 year. Technically	DNA:	Green	100.00%	• U/M	Dental RDC Drill	Down		
	the new protocol is a two shot	DEN:	Green	88 89%	• Cd	Profile Report			
and the second second	series with a one-time booster	HIV:	Green	94.44%	• Cor	nsolidated DLC Rep	ort	_	
	given at one year for at risk	IMM:	Green	88,89%					
	Immunization Specifications	PHA:	Green	80.56%					
	MWDE are showing JEV/134) as a three shot series (with notes indicating that shot #3 is	Soldie	er Dashboa	rd				-	
And in case of	actually a one-time booster).				Soldier Look	up:			

Figure B-13. MRC UMR Command Drill Down selection

(2) Scroll down and click on "W3YTAA" and continue to drill down to your organization (see figure B-14).

				• <u>97</u>	Home W	ofical Readin	ess lawr	**	UHA	WRC Aler	ts Refi	erral Rep	orts	Executive P	Reports	Helplog	sut		25.				9-1-1-									
MR	C Cor	mmand Drill Down Re	eport																													
											an a			V MO	DIFY FI	LTERS	REPOR	T LEGE	ND 👻													
Info Pap	er on How	to Request Modifications to the Comma	and Drilldown										;	leport Date	мяс тт 12013/07 Ехо	IRC DHU D by UIC: 1 Exempti IS Person 719 2:36 F ceptions	own Repor USARMY ons Inclus nel Inclus M, Data as not inclus	t ed of Date: 1 led	2013/07/1	,												
					-														INR C	omponen	ts of MRC Cal	ulations - % ]	Ion-Com	pliant She	own Belo	w		100				
	UIC	UIC Description	Total Assigned	Total Female Assigned	Cers Exemptions	Cers Adj. Strength	HRC Ge	HRC N	MRC1	HRC1 S	DNA D	NA S	HV	HV S	MR2	MR2	MR2 IME	MR2 INC S	DRC3	DRC3 S	Temp (31	Temp (31 S	Perm	Perm S	H0.72	MAR2 S		M65 S	Temp > 30	Temp > 30 %	P2G	PRGIN
<b>1</b>		HQ USURIAY CRIMINARS CHO	2,017	336	21	1,996	1,604	80.965	1,454	71.845		0.15%	65	2.413	-	4.075	122	6.115	34	1.20%		0.55%	50	1.50%	1	0.05%		1.755	71	1.705	- 12	143
<b>1</b>		USA ELE US SO CHO	1,249	55	۰	1,249	875	69.905	735	50.35%	1.1	0.05%	125	10.015	135	11.005	70	5.60%	25	2.05%	1	0.045		0.55%	2	0.16%	٠	0.455	14	1.445	2	1.175
<b>.</b>		US ARHY TEST AND EVAL CHD	404	-		***	367	22.295	54	77.335	۰	0.00%	25	6.225	-	0.005	4	1.795	•	0.905	1	0.45%	4	1.795	۰	0.00%		1.795		4.925	۰	0.00%
<b></b>	J	A STAT HEDEDH	22,979	10,749	1,429	22,550	24,450	75.155	22,522	60.505	-4	0.15%	1,547	4.145	1,081	2.125	1,947	5.325	754	1.155	249	1.075	1,295	5.825	54	0.17%	2,972	9.125	1,405	7.525	-15	4.755
<b>•</b>	$\checkmark$	HQ USA FORSCON	264,595	32,828	1,560	262,238	220,980	84.275	204,544	75.045	105	0.04%	4,505	1.725	4,597	1.56	13,333	5.055	3,392	1.225	4,653	1.795	3,738	1.405	218	0.05%	8,000	3.095	12,992	4.505	2,197	6.035
<b>6</b>	WEYTAA	HQ USA TRADOC CHO	79,435	10,704	554	75,902	54,567	65.915	40,461	51.225	1,465		9,882	12.525	8,278	10.425	16,555	20.715	7,572	9.605	645	0.525	1,165	1.455	95	0.125	1,098	1.395	2,054	2.625	229	2.195
<b>ii</b> h	W45V77	U\$350C	50,967	1,155	525	30,441	25,660	54.295	25,465	77.055	17	0.06%	774	2.545	1,176	3.505	1,657	5.445	515	1.045	255	0.90%	143	0.475	25	0.05%	500	0.995	515	2.655	- 65	5.675
<b>ii</b> h	W490523	NETCON HHC	6,654	1,128	-	6,555	5,694	00.405	5,405	22.115		0.06%	107	1.625	27	1.215	188	2.355	75	1.945	141	2.94	80	1.215		0.055	27	1.325	270	4.105	51	4.395
<b>ii</b>	W4753.3	SPLCE & HSL DEF CHD	1,020	127	14	1,127	923	54.96N	903	70.095	1	0.175	25	1.415	39	2.225	54	7.245	21	1.025	4	0.69%	17	1.475		0.175		1.4%		1.905	4	4.425
<b>ii</b>	W6503.5	USA INSTULATION HOT CHO	4,870	643	19	4,00	3,565	72.90%	3,032	66.625		0.09%	270	5.935	233	5.555		7,105	72	1.85%	41	1.545	187	1.475	12	0.56%	180	2.965	- 19	2.915	28	4.055
ih.	WATGAA	0003 HQ HHC 3R0 &RMT	2,94	404		2,557	1,949	33,405	1,852	78.375	•	0.00%	60	2.875	21	0.90%	79	1.185		1.55%	27	1.165	41	1.755	-	0.095	48	1.345	- 26	4.115		1.945
<b>ii</b> h	WATURE	0007 HQ & HQ USAREUR 75	23,278	2,560	255	25,025	20,570	33,435	19,405	54.555		0.03%	307	1.335	275	1.195	626	2.725	175	0.75%	476	2.075	98	0.455		0.095	182	0.795	555	2.905	125	5.025
<b>1</b>	WUNDER	DODD HQ HQ USARAFISETAF	271	57		265	313	23.735	295	a1.105		0.00%	16	4.005		2.405	-	0.555		0.55%		0.025		1.275		0.005		0.275	12	5.295		5.255
<b>.</b>	WJINNAA	DODD HO, HHC USA N HAIN CP	405	70	•	-15	360	72.545	348	07.965	۰	0.00%	21	4.275	10	2.025	,	1.415		1.615		1.615	25	1.145		1.015		1415	39	1.055		1.715
1	WJHOLA	0000 HQ HHC OCF HQ USA SO	1,142	176	23	1,118	100	0.275	204	80.84N		0.09%	21	1.855	10	0.875	67	5.775	16	1.455	-	0.185		1.405	-	0.185	- 18	1.45	20	2.675	•	1.945
•											,	11																				•

Note: Initial entry training student units are filed separately under "WIETAA IET UNITS".

Figure B-14. MRC Command Drill Down Report

(3) You will see an alphabetical roster of your unit, showing only Soldiers in "non-available" status (see figure B-15). Click on the "last 4" of a Soldier's SSN to display details of his or her IMR (see figure B-6 above).

	PROS		4			Home		Medica	Readine	ss Imm	unizatio	ins A	MHA MRC	Alerts	Referral Reports Execu	utive Repo	orts H	elp/Log	out					a section of
Unit Medical Rea	diness	_	_				_	_				_							_					
Report Selection	Criteria										¥ M	IODIF	Y FILTERS	♦ REPO Re	eport Filter Cri	iteria					ilon ilon ilo			
Report Criteria Type: UIC:	UIC   ₩4₽ВАА								Compoi	Readines	s Repor	t for U	JIC: Y	Co Ma PR De Sy Fo Da Inc Re Readiness	mponent: edical Readiness Profi IOFIS: ficiencies: easure Date: stem Immunization P. romat by: ta Output by: cl/Excl WTU: clude /ARC Exemption cords Per Page:	rile:	Compo A Readine: Assigned Deficien 2013/07 ROUTINE Name Data Include	II (AC, N is Persor cles /23 : ADULT	IG, USAR)		•			
						۸ Tw	Aeasui TU Per	re Dat sonne	e: 2013/0	)2/21, Syst , MRC Exem	em Imm iptions	iunizat Include	tion Profile: RO ed, Report Dat	UTINE ADU e: 2013/02	ILT, Format: Name, Data ( 2/21 1:09 PM, Data as of I	Output b Date: 201	y: data 13/02/21							
Cbt												MR2	MR2	MR2	MR2	MR3A	MR3	MR 31 PE	36 MR38	MR38 MEB	MR3B TEMP>30	MR38 PRG	MR4	MR4
CDR Exempt Dfmt Name		SSN R	Cank GT/P	Age 37	Sex M	MOS	CMP AA	A GR	UIC W4	Location	MRC 38	DNA	HIV	IMM	IME	DRC3	(DL6	) (DI	.1) (DL2) ′	(DL3)	(DL4)	(DL5)	DRC4	PHA
		s s	so	31	м		AA	N	w		4												2013/02/10	
		c	PT	30	M		AA 	N	W4		2		2013/02/11		MCED /									
		s	GM	43	M	-	AA	N	w		38				makes 1						2013/04/10			
_		- 0	тс.	49	F		AR	Y	w		38			Tdap				N	r					
		c	OL	44	M	_	<b>AA</b>	N	W		4			-										2011/09/29
		s s	arry ac	31	M		AA AA	N	w		2		2012/01/21	Toap										
Noncome			.тс	52	м		AA	N	w		2		2012/12/22	нерв										
· · · · · · · · · · · · · · · · · · ·		-	тс	49	м	-	AA	N	W		38			Flu,Tdap	2PG,1M,HAB,MWT,MCEP4						2013/04/07		2004/09/04	2002/05/16
-	_	1 S	FC 50	37	M		AA AA	N	W4		4			Tdap										2012/12/23

Figure B-15. Unit Medical Readiness Report

Table B-1	
Individual Medical Readines	s Classifications

Medical Readiness (MR)	Deficiencies	Availability <sup>2</sup>
Classification <sup>1</sup>		
MR1 – Meets all medical requirements	None; includes Dental Readiness Class (DRC) 1 (current dental examination, does not require dental treatment or reevaluation) and DRC2 (current dental examination, requires non-urgent dental treatment or reevaluation for oral conditions that are unlikely to result in dental emergencies within 12 months) <sup>3</sup>	Available
MR2 – Medically ready within 72 hours (any deficiencies correctable during final Soldier Readiness Program)	No DNA specimen on record No HIV test on record Immunizations <sup>4</sup> (including tuberculin screening and/or testing) not up to date Individual medical equipment (IME) (2 pairs eyeglasses	Available
	(2PG), 1 mask insert (1MI), hearing aid with extra battery (HAB), medical warning tag, 1 military combat eye protection insert (MCEP-I)) either not on hand or not marked "NA"	
MR3A – Medically ready within 30 days	DRC3 (condition that requires urgent or emergent dental treatment) <sup>3</sup>	Not available
	Deployment-limiting (DL) code <sup>5</sup> DL6 – Temporary profile with numerical designator "3" or "4" (T3 or T4) <sup>6</sup> of less than 31 days	
MR3B – Medical requirements will take more than 30 days to correct	<ul> <li>DL1 – Non-deployable (ND) profile code. Soldier has a profile code F, V, or X<sup>7</sup> (see Soldier's DA Form 3349, Physical Profile, item 2).</li> <li>DL2 – MOS Administrative Retention Review (MAR2) initiated.<sup>8</sup> Soldier is in the MAR2 process, but decision has not been reached.</li> </ul>	Not available
	DL3 – Medical evaluation board (MEB) initiated. <sup>9</sup> Soldier is in the medical evaluation board process, but MEB is not completed.	
	DL4 – Temporary profile with numerical designator "3" or "4" (T3 or T4) <sup>6</sup> of greater than 30 days	
	DL5 – Pregnancy. Soldier has current pregnancy profile in e-Profile and a "Y" ("yes") entry for pregnancy field in MEDPROS	
	DL7 – Soldier in ND – Physical Evaluation Board (PEB) process, not yet completed – number shown indicates number of days in ND-PEB process (since initial DA 3349 issued)	

# Table B-1 Individual Medical Readiness Classifications, continued

Medical Readiness (MR)	Deficiencies	Availability <sup>2</sup>
Classification1		
MR4 – The current status is not	Periodic health assessment (PHA) not current	Available but
known		not
	Dental exam not current (DRC4) <sup>3</sup>	deployable*
The Soldier is assigned the MR code	that will take the longest to correct, with the order (longest	to shortest time
to fix) as follows: MR3B, MR3A, MR	R4, MR2, MR1. Soldiers who have medical issues that will req	uire longer than
72 hours to resolve (MR3A and MR3	3B) will be reported as not available. <sup>10</sup>	
Notes:		
1 DA Pam 220-1, table 5–1; AR 40-5	501, para 11–5; and the Medical Readiness Leader Guide spec	ify medical
readiness (MR) categories for use by	y commanders to determine Soldier availability.	
2 The term "available" indicates un	it resources, to include personnel, that are available within 7	2 hours to meet
operational requirements (see DA P	am 220-1, para 5–4c(1)(a)). Soldiers in medical readiness (M	R) classifications
MR1 and MR2, and MR4 are conside	ered available. The term "not-available" indicates Soldiers w	ho are not
available for medical and/or admini	strative reasons within 72 hours (see DA Pam 220-1, para 5-4	c(4)). Soldiers in
MR classifications MR3A and 3B are	considered not available.	
3 See AR 40-35, para 6b.		
4 During the influenza vaccination s	season, commanders should track their unit compliance using	; MEDPROS.
5 The DL codes are breakouts of the	e non-available codes (MR3A and MR3B) that provide comma	anders with
visibility of medical factors contribu	ting to their non-availability. For descriptions, see either "M	EDPROS USR
Report" (Figure B-5) or "Unit Medic	al Readiness" report (Figure B-9) and click on "Report Legend	".
6 See AR 40-501, table 7–1.		
7 See AR 40-501, table 7–2.		
8 See Army Directive 2012-18, 23 A	ug 12, at <a href="http://www.apd.army.mil/pdffiles/ad2012_18.pdf">http://www.apd.army.mil/pdffiles/ad2012_18.pdf</a> .	
9 See AR 635–40, para 4–10.		
10 Medical Readiness Leader Guide	e, Office of the Surgeon General (OTSG), 1 Sep 12, pp. 15, 16.	Accessible at
https://medpros.mods.army.mil/M	EDPROSNew/, click on "Sep 12 Updated Medical Readiness Le	eaders Guide."
* Soldiers who have not completed	the formal examinations required by AR 40-501 will be repo	rted as available
for commander's unit status report	(CUSR) purposes, however the commander cannot deploy th	ese Soldiers
before they have completed the rec	quired medical and dental examinations. See DA Pam 220-1, p	oara 5–4c(2).

c. Individual completion of the PHA. An annual PHA is required for all Army personnel, regardless of component. The objectives of the PHA include reviewing the physical profile; identifying any readiness or deployment-limiting conditions; and to update the IMR status of the Soldier. Full medical or physical examinations are required for procurement (fulfills the requirement for a PHA for one year from the date of the examination); deployment to certain geographical areas; flying duty; Special Forces/Ranger combat divers; specific schools; on separation from the Army, if requested or indicated; on retirement from active service; and for the cardiovascular screening program (at age 40 years and every five years thereafter). See AR 40-501, chapter 8, for requirements.

(1) Individual Soldiers complete the first part of the PHA (self-reported health status) by opening their AKO home page, clicking on "Self Service", and selecting "My Medical Readiness" or by clicking "My Medical Readiness Status" in the sidebar (see figure B-16).



Figure B-16. AKO home page, "My Medical Readiness" selection

(2) On the next screen, expand "Periodic Health Assessment (PHA)" and click on Periodic Health Assessment link (see figure B-17).

AELI Itone > Anonedge Networks > Roomedge Networks - Army > Modical Marlighter Lones (MedVAT) > My Modical > My Medical Itaalia	na n Wy Medical Readiness
Questions?	My Redical Resilinese (c) (
For cuestions about your readiness status or content in the health assessments, send a message to mode-helpdiasmn.com or call 1-	(GREEN): Medical Readiness Status Pro
988-644-544; DSK: 761-6470; Fax: (700) 681-6983. Voe neut an Internet Explore to actuar the Rik application, not are other levener work on Findon.	GREEN: Post Doployment Health Reoscessment According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Protection System (MEDIPROS), your Post Deployment Health Reseasance (IPDRA) was campleted or According to the Model Post Deployment (IPDRA) was campleted or (IPDRA)
Addical Readiness Tools a) General Institution (Institution (Institution)) (Institution)	View Detailed Information
Periodic Health Assessment (PHA)	GetECHY: Decred Roodhases Weak and Decred Roodhase Class 1 and year need Annual Dental Exam is due 1/82/815. View Detailed Information
EXAMPLE 12 ADDRESS STATE ASSESSMENT Solders can now complete their portion of the Fernder leadth Assessment (PHA) tables about their appartment with the indical provider. Complete your portion of the PA(), their activation an appartment with the indical provider in appartment with the indical provider indication of any other bounder appartment to your Dura commander. You made use belower Complete your approximation of the provider appartment to your Dura Commander. You made use belower Complete your approximation of any other bounder and other to your Dura Commander. You made use belower Completer to assess the PA() approximation your they application of any other bounder and other of command. They have application of the your approximation of the contrast the they application of the provider applications and the contrast the they application of the provider approximation of the contrast the they application of the provider applications and the contrast the they application of the provider applications and they application of the provider applications of the contrast the they application of the provider applications and the contrast the they application of the provider applications and the contrast the they application of the provider applications and the contrast the they application of the provider applications and they application of the provider applications and they application of the provider applications and they application of the provider applications applications and they application of the provider applications applications are applications and they application of the provider applications applications and they applications applications and the provider applications application	GREEN: HV Vour nost HV Test is due 7/28/2815 Vour Detaile Internation GREEN: Ivenuetable Internation GREEN: Ivenuetable Internation GREEN: Vour Detaile According to the Medical Photole International System (WEDPROS), you are current on all of your Routino Addit Internationalise. You can download your Electronic Internation Recent (JDD Form 2006); allow cicking on the Vew Detailed Internation Relacated in the
ddowal infernation about completing the PMA, dick heres Deployment Health Assessments	Instructuration. Adv. 11 Me Advances on the QD Form 2746EL is incorrect, plassic consult velly-your modular Instrument Bulley (Adver Amyr) or and administrative (Mic Guard, Amyr Benners) Is bave your abuse updated Your way is awaled to participate of paper immentation recent in support requested changes; (Plasso sets that the Totanys Diplothesia & aCellular Penussis vaccine replaced the Totanus Diplothesia Aduk Vaccination effective 5 Feb 2013) View Drasted Information
Post Deployment Health Reassessment (PDHRA)	Amber:Periodic Health Assessment  Trans and Physical Even is due by 110/2014 Your curver P18.HE'S code, which impacts your medical readiness is: 111111  Trans and Physical Even is due by 110/2014 Your curver P18.HE'S code, which impacts your medical readiness is: 111111
Dental Readiness	View Datalied Information
Му МЕВ/Му РЕВ	RED: Walon Readiness You are Vision Readiness Class 4. RED. Your Vision Readiness Sorearing is greater than 15 membra age in MEDPROS. The Vision Readiness Screening can be conducted by your unit at any fine. The screening operator para ability to see and validates the
My Vision	possision or your gauses and gas made meet, it you require meet, it was creating a samesored by your declose they also be included at SRPs and at your Periodic Health Assessment. Contact your will reachess officer or NCO for further goldance. View Detailed information
Army MOVE!	GREEN: Heating Readiness
totsin to the My Medical page	View Datalled Information
alleren My. Herdical Roadinesa Ior. Reservinta	GREEN: DLC According to the Mudical Protection System (MEDPROS), you are being reported as having to Dapleyment Liniting Conditions. If Into information is increased, please context you primary care manager (Autive Army) et State et RPC Surgeon's OfFice (Natl Caurd News (Nature) to have your alease updated View Ordenia (Hormation)
	GREEN: Unit Influence Four with percent complexes status for the 2013-2014 Influenza Season is 100%. The Army standard for this flu season is 90% by Were Network 2013 "Year with a Green. We Determine 2013 "Year with a Green.

Figure B-17. Periodic Health Assessment (PHA) selection

(3) On the next screen, click on "click here" (see figure B-18).

	Farme of
edical Health Assessments	21 A
PHA Form Version 200901	New Form View Party Part
Abbreviated PHA Forms (carealist in conjunction with 20 Yours 2795, 2796, 2900) The trees pressore	The induction to the table of a local section of the immediately (1) pais an original terminal mediation of behavioral invalid-concerns that may require organization terminal antimitation of allow the section of the section of the section of the terminal terminal terminal antimitation of allow the section of the section of the section of the terminal termi
PHA Form Version 200810	

Figure B-18. New PHA form selection

(4) On the next screen, begin completing the first part of the PHA (see figure B-19), and complete information on each successive tab.

ME	PPROS		-	Forea Help
Allergies	Overall Health Carrier	t Health Preventive Health	Behavioral Health Face	dy Matory
Instructions: Nambers - This form of Tou care series an incom Providens - A faire shee ander to sign and comp SSR: Age:	It take approximately 10 min plate from and come back at a kid only be reviewed when it is bete the form. Only Credentia CODE	tes to complete all required fie later time to complete it. as been completed by a membe of Providers can sign a form. Address:	No. All required fields must be r and is in status "Wember Ports 1	completed before a provider can review your form. In Complete". You must complete all required fields in Phone number: (2567 Comm (1))
First Name: Last Hanse: Gander UIC: UIC Name: Is this year Unit?	-	Citys States 24m APO Address (*		555 / Conve.(3): 440 Enail:
Component: Pay Grade: If the Pay Grade Reta	Active Army adore is blank, piecce uplete et (skingen)	-H	D STATES	-

Figure B-19. Initiating first part of the PHA

(3) The Soldier then arranges with the supporting MTF for completion of the last 2 parts of the PHA, namely, review of the Soldier's height and weight, current medical conditions and deployment related health problems, to include screening for traumatic brain injury exposure, allergies, medications, required immunizations, update of medical readiness laboratory tests, and audiology and optometry examination results; and review of the Soldier's statement of health,

completed tests and reports, physical profile, and readiness screening information, and a symptom-focused exam.

#### **B-4.** Obtaining PDHRA reports

The PDHRA is the third in a series of three health assessments associated with deployments of 30 days or more (following the pre- and post-deployment health assessments), accomplished 90 to 180 days after redeployment. (See para 3-1b regarding the requirement for PDHRA.) The PDHRA is tracked separately from medical readiness data in MEDPROS. There are two options for viewing PDHRA completion status (either option shows only Soldiers who are on record as having deployed): (1) view Soldiers in a specific UIC; and (2) view units at all levels of command. Both options yield the same "Post Deployment Health Reassessment Report".

a. View Soldiers in a specific UIC.

(1) Pass cursor over "MHA" [Medical Health Assessments], then "Post Deployment Reassessment," and click on "PDHRA Report" (see figure B-20).



Figure B-20. PDHRA Report selection

(2) At "UIC" type your UIC, then click on "Run Report" (see figure B-21).

	Home N	Aedical Readiness Immunization	MHA MRC Alerts	Referral Reports	Executive Reports	Help/Logout	
				te standed			
Post Doployment Health I	Poncorcement Ponort						
Post Deployment heatth	veassessment Report		DIFY FILTERS 🔸 RE	PORT LEGEND 🔫			
<b>Report Selection Criteria</b>				Report Filter	r Criteria		
Report Criteria Type: UIC	~~			Component:	Comp	xo All (AC, NG, US/	AR) 🔻
UIC: W	The wild card character is the % sign.			Combat Zone:	Deplo	yed to a Combat	Zone 👻
				Timeframe:	AL		-
				Status:	AL		-
				Frequent Deploye	ers: All	•	
				Completed Days R	lange: Al		•
				Start Date:			
				End Date:			
				Format:	Name	•	
				Records Per Page:	1000		
				Completion & Complian	ce Definitions	$\checkmark$	
					Ru	Report	

Figure B-21. PDHRA Report selection, continued

(3) You will see an alphabetical roster of your unit, showing only Soldiers who are on record as having deployed (see figure B-22). Interpret the annotations in the "Status" column as follows:

Green – Soldier is in pre-"window" period (less than 90 days; window is approaching)

Amber – Soldier is within 90-180 day window; PDHRA completion is required

Red - Soldier is past 180-day window; PDHRA completion is required

Completed (red font) – Soldier completed PDHRA after 180-day window; no action required

Completed (green font) – Soldier completed PDHRA within 180-day window; no action required

MED	ROS	Home	Medical Readiness	mme	izations MH	A MR	C Alerts Refe	rral Reports	Ececuti	ve Reports	HelpLog	nd -			
POACE REACT	PAOTECTION	SELOP / 201	1363	1	P.L.		Carl Harris								
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ost Deployment	Health Rea	assessment Report												0	
obe b epitojimente		issessificate troport			MODIEY FI	LTERS	- REPORT L	EGEND							
							D		C						
leport Selection (	.riteria						Repor	t Filter	r Crite	ria					
Report Criteria Type:	uic	<b>.</b>					Compo	nent:		Compo	All (AC, NG	, USAR)	-		
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							Timete	-		Ten.		8 <u>-</u> 1			
				_		_	Records	anne: Fei Fase		4					_
							Completio	in & Complitar	nce Definitik	ons					
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toempt Name	554	Rank MOS UIC UIC Description	Location CV	P CMD	Post Date 0	LOT Cone	FOMRA Cate Re	quired PDH	RA Ticker	On Orders	freq Dep	FOHRA Window	Status	Partial Days To Complete	e ers
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				70	2010/12/17	Y	2011/08/25	Y	N/A N/A	Y N	N	2011/03/17 - 2011/06/15	Completed	N 251	10
				70	2012/11/29	Y		Y		Y	N	2015/02/27 - 2015/05/28	Red	Y	
			دد 📰 🔤	тс	2011/03/25	Y	2011/05/26	Y	N/A	N	N	2011/06/25 - 2011/09/21	Completed	N 154	
			دد 👘 👘	70	2012/05/25	Y	2012/05/23	Y	N/A	Y	N	2012/05/25 - 2012/11/21	Completed	N 90	20
				TC	2013/02/26	Y		Y		N	N			N	
					2013/03/19		1011-01-01		NIA	N	N	1013/08/17 - 1013/09/15	Control start	N 1008	
					2009/12/25	Y	2010/05/11	Y	N/A	N	N	2010/05/25 - 2010/06/21	Completed	N 170	
	1					~		~	NIA	Y	N	2011/05/31 - 2011/05/29	Completed	N 152	20
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				70 70 70 70 70 70 70 70 70 70	2011/03/02 2012/12/03 2005/06/27 2006/01/11 2009/09/03 2012/12/14 2011/06/20 2012/10/02	Y Y Y Y Y Y Y Y	2011/05/01 2013/03/18 2005/04/07 2013/05/17 2013/05/02 2012/05/12 2011/01/7 2015/01/51	Y N Y Y Y Y Y Y	Ν/Δ Ν/Δ Ν/Δ Ν/Δ Ν/Δ Ν/Δ Ν/Δ Ν/Δ	N Y N N N N N	N N N N N N N	2013/05/05 - 2013/06/01 2006/04/11 - 2006/07/10 2007/12/02 - 2010/05/02 2013/05/14 - 2013/06/12 2011/07/26 - 2011/10/15 2011/07/14 - 2011/12/17 2012/12/15 - 2013/05/15	Completed Green Completed Completed Completed Completed Completed	N 105 N 55 N 1352 N 1355 N 1359 N 2326 N 1159 N 1159 N 121	20 20 20 20
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Figure B-22. PDHRA roster

b. View units at all levels of command.

(1) Pass cursor over "MHA", then "Post Deployment Reassessment," and click on "Command Drill Down" (see figure B-23).

MEDPROS		Home N	ledical Readiness	Immunization	ns MHA	MRC Alerts	Referral Report	s Executive Report	rts Help/Logout
	TE IO	10	230	NY N	Pre De Post D	ployment Repo eployment Rep	rt ort		
Access to the second second second	Arristen Arreste	Statistics of the state	PDHRA Report		Post D		sessment T	We know the provide the	and the second
			PDHRA Aggrega	te Report	NCAT	Report			
-			PDHRA Aggrega	te Report (2008)	PHA R	eport			
MEDPROS UPDATES	Unit	Dashboard	PDHRA Aggrega	te Report (2012)					
			PDHRA Comman	nd Drill Down	_				
Latest Message - 2013/07/02	W3YTAA	- HQ USA TRADOO	ARNG PDHRA B	y State Summary	ookup:				
Japanese Encenhalitis Vaccine	DL1:	Green		100.00%		L	ookup		
As of this afternoon, the IEV	DL2:	Green		100.00%					
Vaccine (CDC Code 134) now	DL3:	Green		100.00% Ur	nit Reportin	2:			
requires a total of three	DL4:	Green		94.44%		-			
vaccinations given at 0, 28	DL5:	Green		100.00%	. MRC L	IMR Command	Drill Down		
days, and 1 year. Technically	DL6:	Green		100.00%	• UMR S	tatus Report			
the new protocol is a two shot	DNA:	Green		100.00%	<ul> <li>PDHR/</li> </ul>	A Report			
series with a one-time booster	DEN:	Green		88.89%	Cdr Pi	rofile Report			
given at one year for at risk	HIV:	Green		94.44%	<ul> <li>Conso</li> </ul>	kidated DLC R	eport		
populations, MEDPROS	IMM:	Green		88.89%					
Immunization Specifications	PHA:	Green		80.56%					
Tables on the Mainframe and MWDE are showing JEV/134) as a three shot series (with notes	Soldie	er Dashboa	rd						
indicating that shot #3 is									

Figure B-23. PDHRA Command Drill Down selection

(2) Scroll down and click on "W3YTAA" and continue to drill down to your organization (see figure B-24).

	FORCE HE	ALTH PRO	TECTION		Ho	ome Medic	al Readiness	Immunizatio	ms MHA	MRC Aler	s Referral	Reports E	xecutive Repo	orts Help/L	ogout				
	1997 - 19	T. See		TELO	27	To have	35		104 m		1								
Contraction of the local division of the loc	1.		100	120	2048	the second	STATE THE	O A h		<u> </u>	-	1.		-		10 m - 1	and the local	and the second	
		and the second second	No dia Ka						and the second second									-	
	Drill Do	wn Re	port																
UTINA	Dritt De	Juni Ke	port					- N	ODIFY FI	LTERS 🖈 I	REPORT LE	GEND 🐨							
									PD	HRA Drill Dov by UIC: US	n Report ARMY								
								Report Date	: 2013/07/	19 10:06 AM	Data as of I	ate: 2013/0	7/19						
	UIC Description	Assigned E	ommander's cemptions	Commander's Adj. Strength	To Required Ag Co	otal Army ggregate ompletion	Aggregate Completion	Remaining Pl C	otal DHRAs ompleted	PDHRAs Completed	Total Tier 2 Required	PDHRAs Completed	Completed Green (0-	Completed Amber (90-	Not Completed Red (181+)	Total Not Completed	Completed Red (0-89)	Completed Green (90- 180)	Comp Red (
WODEAA	MMEDIATE OFC	1,050	,	1,059	598	557	93.18	41	563	557	48			1007		1 41	25	2 301	
W3KPAA	HQ USARMY CRIM INVES CMD	2,017	21	1,996	1,229	1,197	97.48	32	1,213	1,195	97	18	55	i :	2 3	2 34	4 58	3 712	
W3P2AA	USA ELE US SO	1,249	0	1,249	799	736	92.18	63	734	724	69	10	10	<b>)</b> 1	2 6	3 75	5 29	366	
w302AA	US ARMY TEST AND EVAL CMD	454	8	446	350	351	98.0%	7	348	345	30	3	1		5	7 13	3 15	s 201	
(AA )	US ARMY MEDCOM	33,979	1,429	32,550	15,776	15,606	90.9%	170	15,743	15,572	1,093	171	104	3	9 17	0 208	722	10,570	,
	HQ USA FORSCOM	264,598	2,360	262,238	142,325	139,404	98.08	2,921	136,054	136,396	2,228	450	2,715	3,05	3 2,92	1 5,974	6,010	100,252	1
WSYTAA	HQ USA TRADOC CMD	79,432	534	78,898	35,939	35,201	98.08	738	35,324	35,052	1,653	272	137	14	9 73	8 887	1,633	3 23,244	•
W45VFF L	USASOC	30,967	526	30,441	16,080	15,224	94.7%	856	15,151	15,079	293	72	2,099	21	8 85	6 1,074	1,276	8,963	5
WANHAA M	NETCOM MHC	0,054	65	6,506	3,413	3,394	99.4%	19	3,428	3,306	156	42	+0		9 1	9 27	169	2,214	•
W4T8AA C	SPACE & MSL DEF CMD	1,171	14	1,157	543	530	97.68	13	523	518	38	5		1	3 1	3 26	30	) 319	÷
W68DAA II	USA NSTLLATION MGT CMD	4,570	19	4,551	2,883	2,750	95.48	133	2,753	2,721	144	32	12	2	• 13	3 162	. 126	3 1,820	,
WATGAA	DOO3 HQ HHC SRD ARMY	2,343	6	2,337	1,649	1,619	98.2%	30	1,627	1,615	84	12	50		6 3	0 36	J 96	925	5
WATLEF C	0007 HQ A HQ USAREUR 7A	23,278	255	23,023	13,675	13,392	97.9%	203	11,913	11,876	220	37	570	1,52	7 20	3 1,810	) 499	0,777	
a water	0000 но но	371		365	294	202	95.98	12	284	2.80	14	4			2 1	2 14	. 23	141	

Figure B-24. PDHRA Command Drill Down selection, continued

c. Individual completion of the PDHRA.

Inside AKO | Help | Terms of L

(a) Individual Soldiers complete their PDHRAs by opening their AKO home page, clicking on "Self Service", and selecting "My Medical Readiness" or by clicking "My Medical Readiness Status" in the sidebar (see figure B-25).



Figure B-25. AKO home page, "My Medical Readiness" selection

This information system is approved for UNCLASSIFIED//FOUO da

(b) On the next screen, expand "Post Deployment Health Reassessment (PDHRA)" and click on "here" link (see figure B-26).

AKD Home > Knowledge Networks > Knowledge Networks - Army > Medical Warfighter Forum (MedWHF) > My Medical > My Medical Readines	a > My Medical Readinese					
Questions?	My Medical Readiness (+) (					
For questions about your readiness status or content in the health assessments, send a message to mods-help@asmr.com or call 1-	(GREEN): Medical Readiness Status Print					
689-449-4341; DSN: 761-4970; Fax: (703) 681-4983. You must us listenst Explore to access the RHA application, not any other brevaser such as Fireflax.	AMBER:Plost Deployment Health Reassessment  AMBER:Plost Deployment Health Reassessment (PDHRA) was campleled on  A202010 '9 voltame not been accessed by a healthcare provider, please canted your druin of command for further PDHRA verseeining information  GREEN: DNA					
Medical Readiness Tools	According to the Medical Protection System (MEDPROS), you have a DNA on tile. No further action is required. View Detailed Information					
Periodic Health Assessment (PHA)	GREEN: Dende Bandiness. Class 1 and year need Annual Dental Exam is due 1/8/2015. View Dentaled Information					
Deployment Health Assessments	GREEN: HIV Unex nost HIV Test is due 7/29/2015. View Durbaled Information					
Post Deployment Health Reassessment (PDHRA)						
TOT DEFORMENT FLACE BASESSEET. The Army POHRA Pragram is a part of the CPO's overall Farra Health Protection Pragram. The screening is designed to address deployment-related behavioral and behaviors. Army Solides S-16 Iod oxy after returning from a contact deployment. The program for them health and well-being of solides and Department of the Army (CA), Outlines, the Army's Contact S-10 EAR, phase with the POINTA.MARD.argue to be instruction FORMA and II do 11 the O Them 2000 Link hears. (NOT: You will need your CA to access this DEMILA.MARD.argue to be instructions OFORMA and II do 11 the O Them 2000 Link hears. (NOT: You will need your CA to access the	GREERI: Innunitation Profile According to the Model Physical Instruction System (MEDPROS), you are current on all of your Routine Adult Innunitations. You can According to the Model Physical Instruction Stated (DD Ferra 2016/2) after closing on the View DataBet Instrumture Inits Instruction and the DF Prena). The State Constraints of the DF Prena). The State Constraints in the Constraint of the State Constraints of the Constraint of the Constraints of the Constrain					
page starting September L)	GREEN: Periodic Health Assessment Vour next Physical Exam is due by 116/2014. Your current PULHES code, which impacts your medical readiness, is: 111111. View Datable Information					
Dental Readiness						
My MEB/My PEB	REC: Vision Readiness I You as Vision Readiness Readiness Screening can be conducted by your unit at any fine. The screening accessor your adily to see and visidates the prosession of your glasses and gas mark finest. If your regular them. The screening is definitioned by your unit, but may also be					
My Vision	Included at SHPs and at your Periodic Health Assessment. Contact your unit readiness officer or NCO for further guidance. View Detailed Information					
Army MOVE!	CDCCH: Headen Developer					
Return to the My Medical page	I GHELEN: Hearing Readiness View Dataliad Information View Dataliad Information					
a Vitte, My Medical Readiness for Reservists	GREEN: DLC					
	According to the Medical Protection System (MEDPROS), you are being reported as having no Daptoyment Limiting Conditions. If this information is licensed, placed contact your primary care manager (Active Array) or State or RRC Surgeon's Office (Nat CaardAmmy Reserves) to how your status updated. View Datalied Information					
	GREEN: Unit Influenza Vez units percent compliance status for the 2013-2014 Influenza Season is 100%. The Army standard for this flu season is 99% by 16 December 2013. Year unit is Green. Veze Velinte Information Ø Online					

Figure B-26. PDHRA selection

(c) On the next screen, select the Post Deployment Health Reassessment tab (see figure B-27), click on "Start New Survey", complete the Soldier's portion of the PDHRA, and make an appointment with a health care provider to complete the PDHRA.

Concession and	PROS	IHA HEATH	A HAN	Terms IN
s Medical Health	Assessments	Park 0	06: URC M	Geneer
Pre Depayment DD2745	Post Deprovert DOLPHS	Paul Deployment Health Realized and	A DECKIN PILL MARKAN PARALE ALLA	chieres .
DHA 2012 Training Halant	1	all states and states a		
Post Deployme	nt Health Reasses	sment for:	_	
Post-Deptoyment Health			Indicates Forms Completed using the 0	l Form 2900 September 2012 variable. I Form 2900 January 2008 version.
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Figure B-27. Initiating PDHRA

#### Appendix C Accessing and reading e-Profiles

#### C-1. Description

e-Profile is a software application within MODS that allows tracking of Soldiers who have temporary or permanent medical conditions that may render them not medically ready to deploy. The e-Profile system creates, routes, and stores all DA Form 3349s (Physical Profile). It allows commanders and designated MEDPROS read-access personnel immediate visibility of Soldiers' profiles.

# C-2. Roles

Army policy provides for the following with regard to access to e-Profile:

a. Commanders, in order to ensure their Soldiers are receiving timely medical care for their conditions, or progressing in a medical board process if applicable.

b. Career Counselors, in order to facilitate their roles in the MAR2 process (see para 2-2d above). See para C-2h below for instructions.

c. Individuals appointed by the commander as administrators, managers, or clerks can view details of individual profiles, and status of board actions, on behalf of the commander.

Note: The roles for e-Profile are not specifically prescribed by Army policy (as are the roles for MEDPROS), however their descriptions within e-Profile guides align with those for MEDPROS.

#### C-3. Access and navigation

a. Go to <u>http://www.mods.army.mil/</u> and click on "e-PROFILE" in menu at left (see figure C-1).



Figure C-1. MODS homepage

b. At the next screen, select "What is e-Profile?" (see figure C-2).



**Figure C-2. e-Profile homepage** 

c. On the "About e-Profile" screen, select "For details on the e-Profile Application Roles and Permission, click here" (see figure C-3).



Figure C-3. "About e-Profile" page

d. Under "Roles and Permissions" and "Permissions by Organization, User Type:", select "Army" (see figure C-4).

e-Profile	e-Profile application version :: 3.14.1
Roles and Permissions	
	Return to 'About e-Profile'
Permissions by Organization, User Type:	
Army	
Army National Guard	

Figure C-4. "Roles and Permissions" page

e. The registrant will identify his or her role, i.e., "unit administrator" (at brigade and above), "unit manager" (at battalion and below), or "company commander clerk" (at all levels) (see para C-2c above and figure C-5 below).

	Return to 'About e-Profile
Dermissions by Organization User Type	
rennissions by organization, oser type.	
Army	
Role	Show Permissions - each role
Physician	4
Deputy Commander of Clinical Services	4
Unit Manager	4
PADC	▲
C1SA	▲
UCMDR	▲
Physician Clerk	▲
Care Manager	
MEB Doctor	
Physician Assistant/Nurse Practitioner	▲
Installation Administrator	
Company Commander Clerk	▲
Onit Administrator	
Sr HR Authority	
Installation HR	4
RMC_C1SA	4
RMC_AA	4
Active Army General Admin	

Figure C-5. "Roles and Permissions" page, expanded

f. Return to the e-Profile homepage (see figure C-2 above), and select "Register for e-Profile". An application registration page should appear as shown in figure C-6.

e-Profile	e-Profile application version :: 3.14.1
My Account > App	lication Registration
Please complet attempt to pass	the following form to register for e-Profile access. The data you submit will be used by MODS personnel for verification purposes only. Any alse information for the purpose of gaining access could lead to criminal prosecution.
	SSN• * ·
Eiret Namo	Last Name * ·
C	Figure C-6 Application Registration page

g. Complete the application registration and submit. Once accessed, your screen should appear as shown below (figure C-7).

e-Prof		TRONIC Filing Tem				t Administrator, FT EUSTIS Logout	
Profile	MEB	PEB	Reports	Administration	My Account		
Users Pend	ing Approva	i Users	Nearing Expirat	1011			
Welcom	e						help center
System M	essages					Action Items	

Figure C-7. Welcome page

h. Click on "help center" button in upper right screen, then either "Administrator User Guide", "Commander User Guide", or "MAR2 User Guide" as applicable.

A-Profile				Unit Administrator, FT EUSTIS
SYSTEM				Logout
Profile MEB PEB Repo	orts Administration	My Account	Contact Us	
Users Pending Approval Users Nearing	Expiration			
Back				
Help Center				?
				help center
Documentation: F.	AQs:			
<ul> <li>FAGS</li> <li>Info Paper New DLC Rating (DL7) and eProfile Mgt and PULHES Clean Up 2013/218 v2</li> <li>Getting Started User Guide</li> <li>Administrator User Guide</li> <li>MAR2 User Guide</li> <li>MAR2 User Guide</li> </ul> Videos: <ul> <li>e-Profile Provider's Demo</li> </ul> Administrative Documents: <ul> <li>ALARACT 185/2010 Soldier Readiness</li> <li>ALARACT 186/2010 Mandatory Use Of DA Form 3349</li> <li>Operation Order 10-75 (e-Profile Implementation)</li> <li>e-Profile for Commanders (PDTV)</li> </ul>	<ul> <li>How tory get access of CES</li> <li>How to get acditional acc</li> <li>Why am I not able to view a</li> <li>Can I delete a duplicate pro</li> <li>Can I delete a duplicate pro</li> <li>Lam trying to create a profile</li> <li>A user created a profile and</li> <li>I am creating a profile and</li> <li>Is there a maximum amout</li> <li>I have gotten back a profile</li> <li>When a provider enters cor</li> <li>profile is selected, the profile solution</li> <li>A soldier was MAR2 review will not tet me change ther</li> <li>I downgraded a profile for</li> <li>When selecting restrictions</li> <li>How are profiles not deleted</li> <li>How are profiles housed</li> </ul>	Profile she profiles profile I created for a Profile when the acco offile that was created ie on a soldier, but m d the provider assign tying it to a provider, bit m where the first provic mments on a returne lie is void of ANY info red and was put on a esuits, so how can I no a user's registra a under the Restrictio d into e-Profile, why of -8 Helm	als? or view referrals? soldier? ount was approved? ion a soldier or when an error ySSN is not matching. ed cannot see the profile. but the application will not all hat can be created on a sold fer signing the profile was al d profile, why is the prove uni- rmation. How can provise with epprobation for one year. e-Pr do this so that the soldier ca up the provider does not see ation if it does not appear in in s tab, why does the diagrar does it not show up under M/	or was made on the profile? er? so the approving authority on the same profile. able to see those comments? When the returned withe comments entered by the providers? offile says the soldier was referred to MEB/PEB. It n be boarded again? it as needing a signature. my approval list? n not light up? AR2 needed in order to schedule a MAR2

#### Glossary

#### Section I Abbreviations

1MI	1 mask insert
2PG	2 pairs eyeglasses
AIT	advanced individual training
DL	deployment-limiting (see table E-1)
DNA	deoxyribonucleic acid
DRC	dental readiness classification (see table E-1)
HAB	hearing aid with extra battery
HIV	human immunodeficiency virus
IME	Individual medical equipment
IMR	Individual medical readiness
MCEP-I	military combat eye protection insert
MEDPROS	Medical Protection System
MODS	Medical Occupational Data System
MTF	medical treatment facility
PHA	periodic health assessment
PDHRA	Post-Deployment Health Reassessment
MAR2	MOS Administrative Retention Review
RHRP	Reserve Health Readiness Program
STO	split-training option

# Section II

Terms

# AAA-162

Unit Personnel Accountability Report

# Available

In the context of unit status reporting, indicates those unit resources, to include subordinate elements, personnel and equipment, that currently are possessed or controlled by the reporting unit or, when applicable, are available to it within 72 hours that, in accordance with the relevant criteria, are qualified, ready and/or available to the unit to meet operational requirements.

#### Deoxyribonucleic acid (DNA)

Molecule in the nucleus of tissue and blood cells that encodes and transmits genetic information, unique to an individual; a bloodstain card is prepared once for each Service member and filed at an Armed Forces repository for the purpose of later matching to DNA from remains, if necessary, for identification. The requirement for DNA specimen collection is established in DoDI 5154.30.

#### Deployable

Able to deploy to a specific area of operation as an individual or as part of a unit.

#### Human immunodeficiency virus

The cause of acquired immunodeficiency syndrome (AIDS), a condition in which progressive failure of the immune system allows for life-threatening infections and cancers. The Army's policy concerning identification, surveillance, and administration of personnel infected with HIV is established in AR 600-110.

#### Individual medical equipment (IME)

2 pairs eyeglasses (2PG), 1 mask insert (1MI), hearing aid with extra battery (HAB), medical warning tag, 1 military combat eye protection insert (MCEP-I)).

# Individual medical readiness (IMR)

Elements of IMR are the following: Periodic health assessment; deployment-limiting medical conditions; dental readiness; immunizations; DNA specimen; current HIV test; hearing readiness; vision readiness; and pregnancy.

#### Medical evaluation board

A component of the Physical Disability Evaluation System (PDES); the board is comprised of two or more physician members (including a dentist or a psychiatrist, as indicated), convened to document a Soldier's medical status and duty limitations insofar as duty is affected by the Soldier's status. The board is comprised of two or more physician members (including a dentist or a psychiatrist, as indicated). A decision is made as to the Soldier's medical qualification for retention based on the criteria in AR 40–501, chapter 3. If the medical evaluation board determines the Soldier does not meet retention standards, the board will recommend referral of the Soldier to a physical evaluation board.

#### Medical Occupational Data System (MODS)

The authoritative database for the medical readiness information of Army personnel. NetUSR imports the medical readiness codes for individual Soldiers from MODS.

# Medical Protection System (MEDPROS)

The database of record for all medical readiness data elements. The Web module to MODS and the primary tool to record, track, and report the medical readiness for Soldiers and units.

#### Medical treatment facility

A facility established for the purpose of furnishing medical and/or dental care to eligible individuals.

# Medically ready

Soldiers classified as either MR1 or MR2 in MEDPROS.

#### MOS Administrative Retention Review (MAR2)

A component of the Physical Disability Evaluation System (PDES); an administrative process for Soldiers who meet the medical retention standards of AR 40-501, chapter 3, but who nonetheless may not be able to satisfactorily perform the duties of their primary MOS (PMOS) in a worldwide field environment because of medical limitations. The MAR2 process is used to determine whether a Soldier will be retained in his/her PMOS or reclassified into another PMOS. Soldiers who do not meet PMOS standards and who do not qualify for reclassification will be referred to the disability evaluation system (DES).

#### **Physical Evaluation Board**

A component of the Physical Disability Evaluation System (PDES); the board is composed of a Presiding Officer, Personnel Management Officer, and Medical Member, established to evaluate all cases of physical disability equitably for the Soldier and the Army. The physical evaluation board investigates the nature, cause, degree of severity, and probable permanency of the disability of Soldiers whose cases are referred to the board; evaluates the physical condition of the Soldier against the physical requirements of the Soldier's particular office, grade, rank, or rating; provides a full and fair hearing for the Soldier as required by under Title 10, United States, Section 1214, (10 USC 1214); and makes findings and recommendations required by law to establish the eligibility of a Soldier to be separated or retired because of physical disability (10 USC 61).

#### **Reserve Health Readiness Program (RHRP)**

A program managed by the Office of the Assistant Secretary of Defense, Health Affairs (OASD (HA)) to provide medical and dental readiness-related services to Reserve Component (RC) forces. RHRP provides PHA, PDHRA, and IMR services are for Active Duty service members by in-clinic appointment and at group events.

#### TRICARE

The Department of Defense's worldwide health care program available to eligible beneficiaries from the uniformed services. Eligibility for TRICARE is determined by information in the Defense Enrollment Eligibility Reporting System (DEERS).

#### **TRICARE** Prime

A TRICARE program that is similar to a managed care or health maintenance organization option, available to Active duty service members (ADSM), active duty family members, surviving spouses (during the first three years), and surviving dependent children, in specific geographic areas. Enrollment is required, however there are no enrollment costs for ADSMs.

#### **TRICARE Prime Remote**

A TRICARE program that is available to active duty service members (and their families) in designated remote locations in the United States (usually 50 miles or an hour drive time from a military hospital or clinic). Eligibility is determined by the service members' home and work ZIP codes.