DOD DIRECTIVE 6490.2, SUBJECT: JOINT MEDICAL SURVEILLANCE, AUGUST 30, 1997

Proponent

The proponent for this document is the Department of Defense (Health Affairs)

Web Site Location

This document is at http://www.ha.osd.mil/hsd/jmsdir.html.

Definition

Medical Surveillance - The regular or repeated collection, analysis, and dissemination of uniform health information for monitoring the health of a population, and intervening in a timely manner when necessary. It is defined by the Centers for Disease Control and Prevention as the ongoing, systematic collection, analysis, and interpretation of health data essential to the planning, implementation, and evaluation of public health practice, closely integrated with the timely dissemination of these data to those who need to know. The final link of the military medical surveillance system is the application of these data to prevention and control. A military medical surveillance system includes a functional capacity for data collection, analysis, and dissemination of information linked to public health programs.

Military Preventive Medicine - Encompasses the anticipation, prediction, identification, prevention, and control of preventable diseases, illnesses and injuries caused by exposure to biological, chemical, physical or psychological threats or stressors found at home stations and during deployments. Epidemiology, clinical preventive medicine, occupational medicine, industrial hygiene, environmental health sciences and engineering, medical entomology, health promotion and wellness, community health, mental health disciplines, toxicology and laboratory support sciences (environmental, occupational and radiological chemistry and microbiology) form military preventive medicine’s core disciplines.

Risk Communication - A process used to discuss risks, their impacts and how they should be communicated. Risks and their management decisions must be credibly communicated to help ensure that messages are constructively formulated, transmitted and received in a meaningful manner.

Synopsis

This Directive establishes policy and assigns responsibility for routine joint medical surveillance of all Military Service members during active Federal service before, during, and after deployment. It mandates that:

♦ service members are made aware of significant health threats and associated medical prophylaxis, immunization and other unit and individual countermeasures for the Area of Operations before and during deployment;
**Title and Subtitle**
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**Sponsoring/Monitoring Agency Name(s) and Address(es)**

**Abstract**

**Number of Pages**
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commanders shall provide their personnel the appropriate medical support and training, equipment and supplies to implement unit and individual countermeasures;

personnel, once deployed, shall be provided updates to health threats and countermeasures based upon need and situations encountered;

medical surveillance will be continuous before, during, and after deployment to:

⇒ monitor environmental, occupational and epidemiological threats and stressors;
⇒ assess disease and non-battle injuries, stress-induced casualties, and combat casualties, including those produced by chemical and biological and nuclear weapons; and,
⇒ reinforce command directed and individual preventive countermeasures and the provision of optimal medical care during and after deployment.

commanders shall be kept informed before, during and after deployment of the health of the force, health threats, stressors, risks, and available countermeasures;

there shall be a serum repository for medical surveillance for clinical diagnosis and epidemiologic studies. The repository shall be used exclusively for the identification, prevention and control of diseases associated with operational deployments of military personnel;

DoD Components conduct medical surveillance using joint technologies, practices and procedures before, during, and after deployments consistent across the Military Services; and

medical surveillance activities will include essential DoD civilian and contractor personnel directly supporting deployed forces as appropriate.

What Does This Mean for Military Public Health?

To effectively provide future preventive medicine support, we must:

⇒ integrate comprehensive, population-based functional and surveillance medical information systems such as: DMSS, DOHRS, DVIS, DEESS, HHA, MIDI, etc.;

The following are themes common to other documents on our list:

⇒ USACHPPM could serve as a center of excellence for the full spectrum of health promotion and preventive medicine services in managing the health of our soldiers and beneficiaries;

⇒ create a common culture throughout the DoD that values health and fitness. We will focus on value added products and services that will increase our ability to help shape the international HP & PM environment of tomorrow;

⇒ assist with the development of a Joint service approach in addressing the health promotion and preventive medicine needs of commanders, especially the CINCs;

⇒ work closely with the research, development, and acquisition communities, and assist the military services’ combat developers in developing solutions to address lessons learned and doctrine, training, leader development, organization, materiel, and soldiers (DTLOMS) deficiencies;

⇒ optimize the use of technology to obtain, evaluate, and disseminate preventive medicine information;

⇒ disseminate this integrated health information to commanders, policy makers and individuals who can act to influence health and prevent diseases and injuries; and

⇒ organize to provide commanders health risk information they can use to make informed operational decisions.