



**DEPARTMENT OF DEFENSE
UNITED STATES SOUTHERN COMMAND
9301 NW 33rd STREET
DORAL, FL 33172-1202**

20 February 2019

SC Regulation 40-501

MEDICAL SUITABILITY SCREENING

TABLE OF CONTENTS

	Paragraph	Page
References	1	1
Purpose	2	1
Applicability.....	3	1
Summary.....	4	2
 Appendices.		
A. Responsibilities		A-1
B. Procedures		B-1
C. Glossary		C-1
 Attachments.		
A. USSOUTHCOM Medical Waiver		AA-1
B. USSOUTHCOM Amplification Standards		
C. Waiver Request Flow Chart		
D. SOUTHCOM Force Health Protection Guidance		
 1. References.		
a. DODI 1400.32, DOD Civilian Workforce Contingency and Emergency Planning Guidelines and Procedures, April 24, 1995.		
b. DODI 3020.32, Continuation of DOD Contractor Services During Crisis, November 6, 1990		
c. DODI 3020.41, Operational Contract Support, December 20, 2011		
d. DOD Instruction 6025.19, "Individual Medical Readiness (IMR)," June 9, 2014		
e. DOD Directive 6200.04, "Force Health Protection (FHP)," October 9, 2004		
f. DODI 6485.01, Human Immunodeficiency Virus(HIV) in Military Service Members, October 26, 2006		
g. DODI 6490.03, Deployment Health, August 11, 2006		
h. DODI 6490.07, Deployment-Limiting Medical Conditions for Service Members and DoD Civilian Employees, February 5, 2010.		
i. DoD Instruction 6490.13, "Comprehensive Policy on Traumatic Brain Injury-Related Neurocognitive Assessments by the Military Services," September 11, 2015, as amended		
j. Assistant Secretary of Defense for Health Affairs Memorandum, "Clinical Practice Guidance for Deployment-Limiting Mental Disorders and Psychotropic Medications," October 7, 2013		

*Supersedes SC Regulation 40-501, dated 22 April 2013

- k. DTM: Directive-type Memorandum 17-004, "Department of Defense Civilian Expeditionary Workforce," January 25, 2017
- l. USSOUTHCOM Policy Memorandum 1-12, Synchronized Predeployment and Operational Tracker (SPOT) in the USSOUTHCOM AOR, February 15, 2012
- m. SOUTHCOM Force Health Protection Guidance, September 23, 2018, as amended
- n. MOD Thirteen to US CENTCOM Individual Protection and Individual Unit Deployment Policy, March 23, 2017

2. Purpose. This regulation prescribes policy, responsibilities, and procedures for medical suitability screening when entering the United States Southern Command (USSOUTHCOM) Area of Responsibility (AOR).

3. Applicability. This regulation is provided to all Department of Defense (DOD) personnel and contractors on behalf of DoD, entering the USSOUTHCOM AOR or employed within the USSOUTHCOM AOR. United States Government (USG) Interagency partners under DoD command and control will be obligated to follow DoD guidelines unless the agency prescribes equally adequate standards for medical suitability screening for their own personnel. This regulation applies to subordinate commands (i.e., Air Force South, Army South, Marine Force South, Navy South, and Special Operations Command South) and joint task forces (i.e., JTF-Bravo, JTF-Guantanamo, and Joint Interagency Task Force South); hereafter referred to as components. This regulation applies to subordinate directorates, special staff offices, and security cooperation organizations, hereafter referred to as elements. Components and elements may require more or less stringent screening requirements to meet specific Service needs or to address interagency and non-governmental organizations (NGOs) coordination that are in direct support of DoD missions. Any Component with differing requirements will provide USSOUTHCOM Command Surgeon a copy of the Component policy for approval. Family members on accompanied tours will be regulated by the Service Members' (SM) parent service policies for screening.

4. Summary:

a. It is USSOUTHCOM's policy that all uniformed service members permanently assigned to the AOR (PCS personnel), command-sponsored dependents of uniformed service members assigned to the AOR, uniformed servicemembers scheduled to perform temporary duty in the AOR for a period greater than 30 days (TDY personnel), DoD personnel deploying to a contingency operation within the AOR, and contractors entering the USSOUTHCOM AOR will be medically screened prior to entering the theater and meet minimum medical suitability standards to ensure force health protection (FHP) and accomplishment of the mission.

b. Persons in paragraph 4a. above, not meeting the minimum medical standards may be granted a waiver based on the professional opinion of a medical provider that considers: (1) how the medical condition might impact an individual's ability to perform occupational responsibilities; (2) how the medical condition might be affected by

variables such as environment, altered sleep cycle, operational stress, etc.; and (3) available health service depending on the location and nature of operations before submitting a medical waiver.

c. It is policy of USOUTHCOM that all DoD civilian employees permanently assigned to the AOR receive a notice of medical services available in the country for which he or she will be assigned. The notice will be provided to the civilian employee upon offer of employment, and he or she will affirmatively acknowledge receipt of the information. The civilian employee will also provide a statement of understanding that he or she may be fiduciarily responsible for any Government expenditures that result from medical care received by the employee or family members at Government expense, to include MEDEVAC.

d. This policy is a collaborative effort with USCENTCOM and Secretary of Defense-Health Affairs to streamline deployment criteria common to all AORs. USSOUTHCOM Medical Limiting Conditions Guidelines are reflective of USCENTCOM Mod13- Tab A with the USSOUTHCOM noted exceptions outlined in this policy.

5. Records Management. Records generated by the implementation of this regulation will be maintained in accordance with (IAW) CJCSM 5760.01, Joint Staff Records Schedule and DODI 6040.45, "DoD Health Record Life Cycle Management", November 16, 2015, as amended.

6. Point of contact for this regulation the office of the Command Surgeon (SCSG) at COMM: 305-437-1327, or DSN 567-1327.

The proponent agency of this regulation is the US Southern Command. Users are invited to send comments and suggested improvements to: HQ USSOUTHCOM ATTN: SCSG, 9301 NW 33rd St., Doral, FL, 33172-1202.

FOR THE COMMANDER

PATRICIA M. ANSLOW
Major General, USA
Chief of Staff

DISTRIBUTION
D

APPENDIX A RESPONSIBILITIES

1. Commander US Southern Command is responsible for the Force Health Protection (FHP) of all forces deployed to USSOUTHCOM AOR IAW SOUTHCOM FHP Guidance (Attachment D). In accordance with DODI 6490.07, the CCDR serves as the medical waiver authority for all SMs in the AOR. He has delegated this authority to the USSOUTHCOM Command Surgeon who has further delegated this authority to the respective Service component Surgeons.
2. Command Surgeon (SCSG) will:
 - a. Monitor and report compliance with this policy
 - b. Integrate medical guidelines into the orders process for all operations in the AOR
 - c. Ensure Service and component specific procedures are maintained for appropriate reference.
 - d. Acts as the appellate authority for the waivers process (Attachment C). The USSOUTHCOM Command Surgeon is the final approval authority for all waivers. The Command Surgeon has delegated authority to Component Surgeons but retains final approval authority for any appeals
 - e. Log all waiver requests. Ensure that all requests are acted on in a timely manner.
 - f. Coordinate waiver requests with JTF and Component Surgeons for continuity and consistency.
 - g. On request, provide Medical Capability Reports from the TRICARE Overseas Program (TOP) contractor outlining the medical care environment with specificity of conditions that may not be adequately covered in the host nation.
3. Component Commanders will:
 - a. Publish and enforce medical suitability screening procedures, congruent with this regulation for their commands.
 - b. Ensure personnel in summary paragraph 4a. above are medically screened IAW this regulation. Ensure all USSOUTHCOM TDY/TAD travel orders greater than 30 days for countries within the AOR are informed of the medical requirements to enter the theater and that a SOUTHCOM Travel Worksheet is contained in DTS confirming medical screening.
 - c. Ensure personnel offices validate, IAW respective service policies, medical suitability for Permanent Change of Station (PCS) personnel being assigned to the

AOR. PCS personnel will coordinate with their respective service component medical elements for screening who will in turn comply with service guidance and this policy.

d. Ensure medical guidelines are incorporated into the orders process ICW USSOUTHCOM Directives

e. Ensure DOD contracts include USSOUTHCOM medical requirements to screen contract personnel entering the USSOUTHCOM AOR. In the event of a conflict between this policy and the language of a particular contract requiring activities in the USSOUTHCOM AOR, the language contained in the contract will have precedence. As a result it is incumbent on contracting activities in the USSOUTHCOM AOR to ensure contracts reflect the requirements of this policy, DODI 3020.41 and the applicable part of the Defense Federal Acquisition Regulation (DFAR) in order to conserve DOD resources.

f. Ensure all civilian contractors are provided suitability screening at no cost to the government in order to provide medically and physically qualified contingency contractor personnel to perform duties in applicable contingency operations as outlined in the contract.

4. Component Surgeons will:

a. Receive, review and log subordinate elements' waiver requests. Provide instructions for subordinate elements to submit waivers.

b. Review waiver requests within 7 business days and reply to the requestor based on sound medical judgment and knowledge of potential operational and/or component specific limitations.

c. Utilize available resources and Subject Matter Experts to appropriately disposition medical waiver requests. Conversation can also include the USSOUTHCOM Command Surgeon and/or JTF Surgeon responsible for the AOR.

d. Provide USSOUTHCOM Command surgeon a copy of all waivers, via email: southcom.miami.sc-cc.mbx.southcom-waivers@mail.mil

e. Ensure dissemination of this policy to sourcing units and medical commands/ Medical Treatment Facilities (MTFs) responsible for conducting medical screening of applicable personnel tasked to operate in the USSOUTHCOM AOR.

5. Contracting Officer's Representatives will:

a. Comply with USSOUTHCOM Policy Memorandum 1-12, Synchronized Pre-deployment and Operational Tracker (SPOT) in the USSOUTHCOM AOR, ensuring all contractors are in the SPOT database and obtain theater clearance via APACs IAW

DODI 3020.41 and the applicable part of the Defense Federal Acquisition Regulation (DFAR).

b. Ensure employees are provided a medical suitability screening prior to entering the SC AOR. Ensure employees have the appropriate level of health care coverage that will provide for hospital care OCONUS and patient movement/medical evacuation back to their country of origin or nearest medical center of excellence as required.

c. Ensure a SPOT generated Letter of Authorization (LOA) is issued by the contracting officer or otherwise designated by the CCDR. The contract shall require that all contingency contractor personnel who are issued a LOA will carry the LOA with them at all times.

d. All contracts with DoD shall include requirements to screen personnel entering the USOUTCHOM AOR for Medical Suitability, in accordance with SC published guidance.

e. Contracting companies must maintain medical documentation throughout contract employment and two years after termination of employment. Companies will also ensure screenings are conducted by licensed medical providers. Any disqualifying medical conditions will be immediately reported to the responsible contracting officer with a recommendation that the contractor not hire or immediately replace the individual at no cost to the government.

6. The Defense Health Agency through the Dwight D Eisenhower Medical Center will delegate screening responsibilities to the SOUTHCOM health clinic for personnel assigned to USSOUTHCOM HQ.

7. Director for Manpower, Personnel, and Administration (SCJ1) will:

a. Review service specific policies and regulations governing medical clearance of personnel assigned to the AOR. Coordinate with service components to provide guidance on obtaining waivers in order to meet medical clearance requirements.

b. Upon receipt of notification from members reassigned within the AOR for longer than 30 days, provide notification to the Command Surgeon's office. This notification will provide oversight for the SG in order to account for the possible degradation of medical care at the gaining location.

c. Civilian personnel (SCJ14) in conjunction with Civilian Personnel Advisory Center (CPAC) will monitor, as a condition of employment, members receive medical screening prior to hiring. Civilian personnel will ensure personnel accepting positions overseas with authorized dependents on their orders, complete the Exceptional Family Member Program Information Sheet (DA FORM 5863).

8. Security Cooperation Offices will:

a. Notify SOUTHCOM SG in the event there is a degradation or significant change in available medical care in country that could negatively impact healthcare for service members, civilian employees and/or dependents. Advise inbound personnel and dependents of available care through sponsors and appropriate POCs prior to arrival.

9. Member assigned to the AOR will:

a. Ensure completion of medical screening requirements prior to PCS or TDY. For DTS orders members must add a remark stating: "Medical suitability screening and briefings for travel have been completed IAW USSOUTHCOM REG 40-501".

b. Notify SCJ1 services desk(s) of any pending movement within the AOR spanning periods of 30 days or greater.

10. All Offices will maintain records generated by the implementation of this regulation, in accordance with CJCS Manual 5760.01, Joint Staff and Combatant Command Records Management Manual, Volumes I and II.

APPENDIX B PROCEDURES

1. General. DoD guidance and USSOUTHCOM amplification of minimal standards will be used to screen all persons that require screening pursuant to this regulation prior to entering the SOUTHCOM AOR(See Attachment B). Component or Service specific guidance may have more stringent requirements in order to meet specific service needs. Any Component with differing requirements will provide USSOUTHCOM Command Surgeon a copy of the Component policy for approval. Pre-employment and annual medical screenings of contractors will not be performed in military treatment facilities or by U.S. military personnel unless authorized by the contracting officer and respective MTF. Minimal standards are outlined below. In general, individuals with the following conditions shall not deploy :

a. Conditions affecting Force Health Protection. Conditions that prohibit immunizations or the use of Force Health Protection prescription products (FHPPs) required for the specific deployment. Depending on the applicable threat assessment, required FHPPs may include atropine, epinephrine, certain antimicrobials and anti-malarials.

b. Unresolved health conditions requiring frequent clinical visits and/or affecting the individual's ability to perform their duties in a satisfactory manner. Any unresolved acute or chronic illness or injury that would impair duty performance in a deployed environment during the duration of the deployment. This includes conditions that require routine evacuation out of theater continuing diagnostics or acute exacerbations of a physical or mental health condition that could significantly affect duty performance.

c. Condition that could cause sudden incapacitation. Recurrent loss of consciousness for any reason or any medical condition that could result in sudden incapacitation to include history of stroke or MI within the last 24 months, heat stroke, uncontrolled vertiginous disorders, recurrent syncope, seizure disorders and diabetes mellitus I or II treated with insulin. These conditions are NON WAIVERABLE.

d. Infectious disease. Active tuberculosis or known blood-borne diseases that may be transmitted to others in a deployed environment. Any request for waiver must have complete lab work including viral load and specialist recommendation. The SOUTHCOM Command Surgeon shall be consulted in all instances of HIV and HBV/HCV seropositivity before medical clearance is granted for deployment.

e. Mental Health Disorders. Chronic or medical conditions that require ongoing treatment with antipsychotics, lithium or anticonvulsants are NON WAIVERABLE. Any history of psychiatric/mental health/behavioral health hospitalization, including substance abuse, illicit drug use, and alcohol dependency/ abuse must be thoroughly assessed with behavioral health consultation. Any behavioral health condition requiring medication must demonstrate a minimum of three months stability on medication without any change of medication in those three months to be considered for a waiver.

Psychiatric disorders newly diagnosed during deployments require evacuation out of theater and must be replaced through the normal personnel process.

2. USSOUTHCOM Amplification of minimal standards. Medical examiners will use attachment B as the governing document for deployment screening. The following exceptions will be considered on a case by case basis with a waiver approval by the respective Surgeon and will be reviewed by the SOUTHCOM SG Office:

- a. Conditions outlined in Paragraph 1 above. Component Surgeon Approval.
- b. Injectable Medications. Component Surgeon Approval
- c. Opioids for chronic use. Component Surgeon Approval
- d. Immunosuppressants. Component Surgeon Approval
- e. Conditions that require surgery. Component Surgeon Approval
- f. Conditions requiring Durable Medical Equipment. Component Surgeon Approval.

3. Local National (LN)/Third Country Nationals(TCN). All local national and third country national employees whose job requires close or frequent contact with non-LN/TCN personnel (i.e, dining facility workers, interpreters etc.) must be screened for tuberculosis (TB). LN and TCN employees involved in food service, including water and ice production must be screened annually for signs and symptoms of infectious diseases. Contractors must ensure LN/TCN employees receive typhoid and hepatitis A vaccinations and ensure documentation in the employees' medical record. Vision readiness standards, hearing standards must be IAW service policy/guidance for all LNs/TCNs. LNs/TCNs must have a current dental exam in his/her medical record.

4. Waivers.

a. If a medical waiver is indicated, prepare and submit a medical waiver request (Attachment A) with appropriate supporting documentation to the specific USSOUTHCOM Component Surgeon based on component guidance. Ensure to encrypt your email.

b. If the individual does not meet medical suitability requirements to enter the theater, the screening health care provider (MD, PA, and NP) should consider the individual's job duties, medical condition, and duration of assignment in the theater, available health service support and other variables depending on the location and nature of operations before submitting a medical waiver.

c. Medical examiners must consider climate, altitude, billeting options, duty assignment and duration, and health support services available in theater when deciding whether an individual with a specific medical condition is deployable.

d. Contractors are responsible for requesting medical waivers for employment consideration from the contracting officer. Contracting officers will forward the waiver request to the responsible MTF for review and approval. Responsible MTF will provide a copy of approved waiver of contracting officer, contract company, employee medical record and the Command Surgeon IAW this regulation.

e. For visits of less than 30 days, the responsible unit or MTF medical personnel will determine medical suitability screening based on the anticipated medical risks and the individual's medical condition. No medical waiver is required.

f. An adequate healthcare support system must be validated by the component Surgeon prior to approving waivers for any condition requiring ongoing health care or use of medications. Medications must be available or accessible to the individual through existing pharmacy resources, within the military health system or through mail-order supply and have no special handling, storage or other requirements.

g. If a person is found deployed with a listed condition and without a waiver for that condition, a waiver request must be initiated by the JTF or Component Surgeon if they believe a waiver is warranted. If the waiver is denied, the individual will be redeployed ASAP and the personnel process will be used to replace the individual as needed.

h. The list of conditions is not intended to be all-inclusive. A list of all possible diagnosis which could result in potential non deployability, would be too extensive. It is the intent of this Medical Suitability Standard to provide a framework for healthcare providers to make informed decisions and to outline the process for addressing medical conditions which could adversely affect the individual or the mission while OCONUS in theater.

APPENDIX C
GLOSSARY

SECTION I – ABBREVIATIONS AND ACRONYMS

CCDR - Combatant Commander

DFAR - Defense Federal Acquisition Regulation

EFMP - Exceptional Family Member Program

HBV - Hepatitis B Virus

HCV - Hepatitis C Virus

HIV - Human Immunodeficiency Virus

IMR - Individual Medical Record

FHP - Force Health Protection

LN - Local National

MI – Myocardial Infarction

MD – Medical doctor

MTF - Military Treatment Facility

NP - Nurse Practitioner

PA - Physician Assistant

SCSG- SOUTHCOM Surgeon

SPOT - Synchronized Pre-deployment and Operational Tracker

TB - Tuberculosis

TCN - Third Country National

**ATTACHMENT A
USSOUTHCOM MEDICAL WAIVER REQUEST**



SOUTHCOM-ATTAC
HMENT A - WAIVER

**ATTACHMENT B
USSOUTHCOM Amplification of Minimal Standards**



USSOUTHCOM -
ATTACHMENT B- AM

**ATTACHMENT C
WAIVER REQUEST FLOW CHART**



Attachment
C_Waiver request.ppt

**ATTACHMENT D
SOUTHCOM FORCE HEALTH PROTECTION GUIDANCE**



USOUTHCOM Force
Health Protection Gi