



UNITED STATES MARINE CORPS
U.S. MARINE CORPS FORCES, EUROPE
U.S. MARINE CORPS FORCES, AFRICA
UNIT 30401
APO AE 09107-0401

MARFOREUR/AFO 6000.1A

HS

SEP 12 2016

U.S. MARINE CORPS FORCES, EUROPE U.S. MARINE CORPS FORCES, AFRICA ORDER
6000.1A

From: Commander
To: Distribution List

Subj: INDIVIDUAL MEDICAL READINESS

Ref: (a) DoD Instruction 6025.19
(b) ASD (HA) Individual Medical Readiness Goal Memorandum,
15 Jul 2015
(c) SECNAVINST 6120.3 Ch1
(d) ASD(HA) Policy 06-001
(e) MCO 6600.3a
(f) BUMEDINST 6150.35
(g) BUMEDINST 6230.15B
(h) DoD Instruction 6490.03
(i) MCRP 3-02A
(j) MARADMIN 631/10
(k) MCO 5000.12E

1. Situation. Individual Medical Readiness (IMR) is an integral component of force health protection and is a key indicator of a Service member's readiness status for deployment. A joint service committee has established requirements for standardized measurable key elements of IMR be tracked and reported to the Assistant Secretary of Defense (Health Affairs) (ASD (HA)) as outlined in the references. While readiness is a Commander's responsibility, U.S. Marine Corps Forces, Europe and Africa (MARFOREUR/AF) Health Services section actively supports commanders to ensure a fit and healthy force.

2. Cancellation. MARFOREUR/AFO 6000.1.

3. Mission. MARFOREUR/AF establishes policies and procedures for the tracking and reporting of IMR in order to maintain a ready force.

4. Execution.

a. Commander's Intent and Concept of Operations.

(1) Commander's Intent.

(a) Purpose. To meet full mission readiness and comply with Department of Defense Force Health Protection standards.

(b) Method. All units administratively and operationally assigned to MARFOREUR/AF will maintain a minimum Fully Medically Ready (FMR) status of 75 percent and a Total Force Medically Ready (TFMR) status of 85

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percent. Additionally, units will maintain 10 percent or less as Medical Readiness Indeterminate (MRI). Personnel attached to MARFOREUR/AF will take ownership of their IMR and unit Commanders should strive to exceed, but at minimum meet FMR/TFMR minimum standards at all times.

(c) End State. MARFOREUR/AF is able to provide U.S. European Command and U.S. Africa Command with a ready force.

(2) Concept of Operations.

(a) Individual Medical Readiness (IMR). In accordance with reference (a), IMR is a means to assess an individual member's or larger cohort's medical readiness level against established metrics in compliance with key elements of health and fitness standards to determine medical ability to deploy in support of operations. The six elements for an effective IMR program are:

1. Periodic Health Assessment (PHA).
2. Deployment Limiting Conditions.
3. Dental Readiness.
4. Readiness Laboratory Studies.
5. Individual Medical Equipment.
6. Immunization Status.

(b) IMR Classifications. Per reference (a), specific IMR categories are as follows:

1. Medical Readiness Indeterminate (MRI). Member's current health status is indeterminate because of missing health information. The member may be considered deployable if deficiencies will be corrected prior to deployment date or if services are available during deployment to complete readiness criteria. The member will not be considered FMR until all elements have been completed. Deficiencies can include but not limited to:

- a. Dental class 4.
- b. Incomplete/overdue PHA.
- c. Missing immunization record or health record.

2. Not Medically Ready (NMR). Existence of a condition in which the member is not fit for deployment, including the following:

- a. Dental class 3.
- b. A deployment limiting condition.

3. Partially Medically Ready (PMR). The member is missing items as outlined below. The member may be considered deployable if deficiencies will be corrected prior to deployment date or if services are available during deployment to complete readiness criteria. However, the

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member will not be considered fully medically ready until all elements have been completed. A PMR individual is lacking one or more of the following:

- a. Immunizations.
- b. Readiness Laboratory Studies.
- c. Occupational Health requirements.
- d. Individual medical equipment.

(c) Fully Medically Ready (FMR). The member is deployable and current in all aspects of the six elements in accordance with IMR standards.

(d) Total Force Medically Ready (TFMR). This is a combined total of individuals that are FMR and PMR. This readiness rate is established at 85 percent per reference (b).

(e) Individual Medical Readiness Standards.

1. Periodic Health Assessment (PHA). Per reference (c), the PHA is an annual assessment for changes in health status, especially changes that could impact a member's ability to perform military duties. It provides an annual review, verification, and correction of deficiencies in the IMR data. FMR status requires a current PHA completed within the last 12 months and documented in the Medical Readiness Reporting System (MRRS).

2. Deployment Limiting Conditions. To be considered deployment ready, personnel should not be on limited duty, on a Medical Evaluation Board or Physical Evaluation Board, pregnant (see reference (k)), in the postpartum period, hospitalized or convalescing due to illness or injury or have a current or healing injury/illness which requires specialty and/or rehabilitation services that will not be available during deployment. FMR status requires no deployment limiting conditions whatsoever.

3. Dental Readiness. Dental readiness requires an annual exam. Dental readiness is measured in classes, 1 through 4. Unit dental readiness must be maintained at 95 percent or better as outlined in references (d) and (e). FMR status requires personnel be dental class 1 or dental class 2 as determined by an annual dental exam within the last 12 months. This dental class must be accurately documented in members' dental record and MRRS.

4. Readiness Laboratory Studies. Basic studies required for personnel to be deployable are: blood type and Rh factor, G6PD status, sickle cell status, DNA specimen with receipt verified at the Armed Forces Repository of Specimen Samples for the Identification of Remains (AFRSSIR) and Human Immunodeficiency Virus (HIV) antibody. FMR status requires blood type and Rh factor, G6PD status, sickle cell status and DNA specimen with receipt verified at AFRSSIR to be documented in MRRS and the health record. Additionally, FMR status requires HIV antibody testing with results on file within the last 24 months to be documented in MRRS and the health record.

5. Individual Medical Equipment. This requirement affects only certain personnel within MARFOREUR/AF. Personnel needing visual correction per reference (c) must have two pairs of glasses and a set of gas

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mask inserts for the model of gas mask and/or ballistic eyewear issued. All personnel with recognized special health problems must have medical warning tags issued per reference (f). FMR status requires all personnel requiring individual medical equipment to be issued such and have the issue documented in MRRS and the health record.

(f) Immunization Status. Immunizations effectively prevent infectious diseases in the deployed as well as non-deployed environments. Immunizations will be monitored and kept current per reference (g).

(g) Occupational Health Requirements. Due to the demanding nature of operations, MARFOREUR/AF personnel in designated billets will have additional readiness requirements based on certain characteristics of their person or occupation. FMR status requires the following:

1. All personnel have vision testing every two years with the results documented in MRRS and the health record.

2. All personnel have a baseline and annual audiogram documented in MRRS and the health record.

3. All personnel who have not been identified previously as a Tuberculosis Skin Test (TST) reactor have a TST placed and interpreted annually, with the results documented in MRRS and the health record.

4. All personnel previously identified as TST reactors have a current annual screening with results documented in MRRS and health record.

5. All personnel requiring specific periodic occupational physical examinations (e.g., flight, dive, etc.) must have them completed within the required period and results documented in MRRS and health record.

6. All personnel who are executing pre-deployment or post-deployment must be current with their deployment cycle assessments per reference (h), with documentation in the "Deployment History" module of MRRS and health record.

b. Subordinate Element Missions

(1) Commanders/Assistant Chiefs of Staff/Officers in Charge.

(a) Ensure all personnel administratively and operationally assigned to MARFOREUR/AF log in to Marine OnLine (MOL), select "Personal Info," select "Individual Medical Record," and review their medical status to read: "IMR Status: Fully Medically Ready."

(b) Provide oversight and resources to MARFOREUR/AF's Health Services section in order to comply with the requirements of this Order.

(c) Ensure leave and temporary additional duty orders include a statement of Medical Readiness. Comment on any/all medical requirements that are pending. An example comment is "Member is FMR, PHA completed on DDMMYYYY, dental class 1 or dental class 2."

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(2) G-1.

(a) Ensure all personnel are attached via reporting unit code, monitored command code, appropriate duty status codes, duty limit codes and strength category codes in Marine Corps Total Force System (MCTFS) to facilitate accurate IMR reporting.

(b) Ensure the MCTFS database remains accurate for all personnel.

(c) Provide MARFOREUR/AF HS section with updated lists of MCTFS code definitions used by MRRS.

(3) MARFOREUR/AF Health Services (HS) Section.

(a) Provide the Commander with monthly IMR reports. The annual PHA is the primary tool for classifying an individual as medically qualified per reference (j).

(b) Record IMR data for all members in their area of responsibility at the time medical care is rendered, including new accessions to the unit.

(4) Marines Outside of the Stuttgart Area.

(a) Review your IMR by logging in to MOL.

1. Log on to MOL.

2. Select "Personal Info".

3. Select "Individual Medical Record".

4. Review medical status to read: "IMR Status: Fully Medically Ready".

(b) Take appropriate actions to correct identified deficiencies.

(c) Send updates to MARFOREUR/AF HS section.

(5) Training Chief. Ensure all individuals are medically qualified and have current PHA, prior to participating in command physical fitness programs per reference (i).

5. Administration and Logistics. The IMR Program is administered through the MARFOREUR/AF HSS office. Members are allotted 90 days to correct deficiencies from the point of notification. Failure to correct identified deficiencies within the 90 day period will result in a Page 11 counseling entry to be filed in the member's Official Military Personnel File.

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6. Command and Signal.

a. Command. This Order is applicable to all uniformed members administratively and operationally assigned to MARFOREUR/AF.

b. Signal. This Order is effective the date signed.


N.E. NELSON

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