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THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

03 FEB 99

**MEMORANDUM FOR:** SURGEON GENERAL OF THE ARMY  
SURGEON GENERAL OF THE NAVY  
SURGEON GENERAL OF THE AIR FORCE  
DEPUTY DIRECTOR FOR MEDICAL READINESS, J-4, THE JOINT STAFF

**SUBJECT:** Policy for DoD Global, Laboratory-Based Influenza Surveillance

The Department of Defense policy shall be to conduct global, operationally relevant, laboratory-based influenza surveillance. Influenza surveillance is essential to preserve readiness, enhance force protection, and support national and international efforts to detect new influenza viruses and to prevent or control endemic and pandemic influenza.

#### Operation of DoD Influenza Surveillance

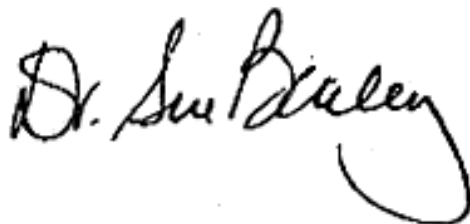
- The Surgeon General of the Air Force will be the Executive Agent for DoD influenza surveillance and will program and budget for the tri-Service program.
- The Department of Defense Global Emerging Infections Surveillance and Response System (DoD-GEIS) Central Hub will provide professional guidance and direction and will issue periodic and special reports to the ASD(HA), the Surgeons General, and the Centers for Disease Control and Prevention (CDC).
- The Defense Medical Surveillance System will maintain the surveillance database.
- Each service will identify one virology laboratory with expertise in the isolation and identification of influenza viruses to support DoD influenza surveillance. A detailed, annual execution plan will define each laboratory's support of DoD influenza surveillance.
- A DoD Joint Influenza Surveillance Working Group, including DoD-GEIS Central Hub representatives, will develop a detailed annual plan for conducting the surveillance effort, and will provide the plan and any recommendations to the ASD(HA) and the Surgeons General.
- Influenza surveillance will occur among selected military populations in the United States and stationed or deployed outside of the United States, and among other selected populations.
- The Working Group will review the operation of DoD influenza surveillance at least quarterly and will report to the Armed Forces Epidemiological Board at least annually.

The dynamic nature of the influenza viruses results in the frequent emergence of new strains that are beyond the scope of protection provided by existing vaccines and that may pose a pandemic threat. These viruses have a demonstrated capacity to cause great morbidity and mortality in our military forces and compromise operational readiness. The global dispersion and mobility of our forces and their families place them at risk for acquiring and quickly spreading an emergent virus. Mixing of people from diverse geographic areas, close living conditions and other factors place military training centers at high risk for influenza outbreaks. Additionally, our forces and facilities overseas sometimes are the only medical resources in a region that are capable of obtaining specimens and information on new influenza threats, which may be critical to the international surveillance effort.

The key to countering influenza is the early detection, identification, and characterization of emerging strains so that changes in the vaccine constituents may result in protective immunization. When timely vaccine modification is not possible, disease control still may be achieved through the use of antiviral drugs. Early and accurate assessment of the potential threat to military forces is critical to effective medical intervention and essential when military planners must develop contingencies to deal with large outbreaks when there are no medical interventions.

DoD influenza surveillance will: isolate and identify circulating influenza viruses; detect new virus variants or subtypes for possible vaccine modification; identify influenza outbreaks; and determine the incidence of influenza-like illness among sentinel military populations at high risk, such as basic training populations. Active duty populations will receive highest priority for surveillance. Among other DoD health care beneficiary populations, surveillance will be based upon priorities and available funds. Host nation populations will be studied in high priority geographical areas served by DoD's overseas medical research activities. DoD influenza surveillance will be coordinated with and will complement the national and international influenza surveillance efforts directed by the CDC and the World Health Organization.

This policy is effective immediately and shall be included in Service and Joint Staff plans and policies for joint medical surveillance and force health protection.

A handwritten signature in black ink that reads "Dr. Sue Bailey". The signature is written in a cursive style with a large, sweeping flourish at the end.

Dr. Sue Bailey

**HA Policy 99-008**

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Last update: 02/04/99