

# Healthcare Portal



## USER GUIDE

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## Chapter 1. Healthcare Portal

### 1.1 Introduction to the Healthcare Portal

The new Healthcare Portal includes the **e-Profile application**, Department of Defense **Periodic Health Assessment (DoD PHA)**, **Deployment Health Assessments Applications**, **SHPE**, a link to the **Medical Readiness Assessment Tool (MRAT)**, and **some Individual Medical Readiness (IMR) report functions** from the Medical Protection System (MEDPROS).

### 1.2 Purpose

As an integrated application, the Healthcare Portal shares data with other applications such as the Commander Portal and the Administrative Portal to provide Commanders, and Readiness Coordinators a more transparent picture of Soldier medical readiness, thereby enhancing a Commander's ability to make informed deployability determinations. There is a messaging tool on the provider's dashboard to facilitate communication between Commanders and Providers.

### 1.3 Prerequisites

Personnel that require access beyond their homepage must complete either the Medical Readiness Healthcare Portal (DHA-US298, Medical Readiness Healthcare Portal) or the Medical Readiness Administrative Portal (DHA US299, Medical Readiness Administrative Portal) and the HIPAA and Privacy Act Training (DHA US 0001) (1-hour) on the Joint Knowledge Online (JKO) before requesting system access. The link for JKO training is: <https://jkodirect.jten.mil/Atlas2/page/login/Login.jsf>.

The current DoD requirement for the DoD Mental Health Assessment (MHA) training (for non-behavioral health providers) will remain to meet DoD standards to complete the Mental Health Assessment portion of the DoD PHA. The link for the DoD MHA training is: <https://mhaquiz.dhhq.health.mil/>.

### 1.4 Information Technology (IT) System Requirements

Users must have a DoD Common Access Card (CAC) enabled computer with at least Internet Explorer (IE) Version 11 to access the Healthcare Portal.

### 1.5 System Access

To gain system access, users must have an active DoD CAC, complete the registration process, and identify their appropriate roles.

## Chapter 2. Role Type

### 2.1 User Roles

Restrictions are applied to each role, allowing the individual to view and access the appropriate information for that role. For example, Soldiers with no additional access are able to view their individual medical readiness and get system messages from their landing page.

1. **Provider – Physician (Physicians, Dentists, Podiatrists, and Audiologists)** can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), action items, and review and complete Health Assessments, create and manage reminders, be profile second signatures, and send in system messages to the Commander.
2. **Provider – Physician (RHRP)** (Physicians, Dentists, Podiatrists, and Audiologists) can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), action items, and review and complete Health Assessments, create and manage reminders, be profile second signatures, and send in system messages to the Commander.
3. **Provider – Non-Physician (Optometrists, Chiropractors, Nurse Practitioners, Nurse Midwife, Occupational Therapists, Physician Assistants, Physical Therapists, Licensed Clinical Psychologists, and Licensed Clinical Social Worker)** can view, initiate, expire, and submit temporary and permanent profiles. They can also view Individual Medical Readiness (IMR), action items, review and complete Health Assessments, create and manage reminders, send in system messages to Commanders, apply first signature permanent profile, and apply profile codes when applicable.
4. **Provider – Non-Physician (RHRP)** (Optometrists, Chiropractors, Nurse Practitioners, Nurse Midwife, Occupational Therapists, Physician Assistants, Physical Therapists, Licensed Clinical Psychologists, and Licensed Clinical Social Worker) can view, initiate, expire, and submit temporary and permanent profiles. They can also view Individual Medical Readiness (IMR), action items, review and complete Health Assessments, create and manage reminders, send in system messages to Commanders, apply first signature permanent profile, and apply profile codes when applicable.

5. **Medical Evaluation Board (MEB) Provider (Physician)** can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR) action items, review and complete Health Assessments, create and manage reminders, send in system messages to Commander, apply first or second signature, and apply post board profile codes deemed to meet retention standards or requiring entry into the Disability Evaluation System (DES).
6. **Medical Evaluation Board (MEB) Non-Physician** can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), action items, review and complete Health Assessments, create and manage reminders, send message to Commander, apply first signature, and apply and apply post board profile codes when applicable. (**NOTE:** This role does not allow the user to approve Soldiers for entry into DES).
7. **Profiling Approval Authority** can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), action items, review and complete Health Assessments, create and manage reminders, send message to Commander and review message between provider and Commander, apply first or second signature, F, S, V, W, X, and Y profile code and approve P3/P4 profiles.
8. **Athletic Trainer** can initiate temporary profiles using Initial Military Training (IMT) templates, view message between Commander and Providers, and apply first signature profile.
9. **Provider Support Staff** can view and initiate profiles, create and view health assessments, manage follow up reminders, conduct Soldier encounter, and run healthcare related reports.

## Chapter 3. Portal Access

### 3.1 Access Registration Process

The approval process for access to the Healthcare Portal is relatively straightforward: get trained, get registered, and get approved.

1. **Training:** Individuals that require access must complete DHA-US298 (Medical Readiness Healthcare Portal Training) or DHA-US299 (Medical Readiness Administrative Portal) on JKO and along with the Mental Health Assessment (only non-behavioral health providers conducting DoD PHA), HIPAA, and other PII training.
2. **Registering:** Users who previously held access to e-Profile had their roles translated into the Healthcare Portal. All new users must register for access through the Medical Readiness Portal Settings or directly via the User Management app (<https://authentication.mods.army.mil/MCP/Home>).
3. **Approval:** User Management will validate training completion and approved request.

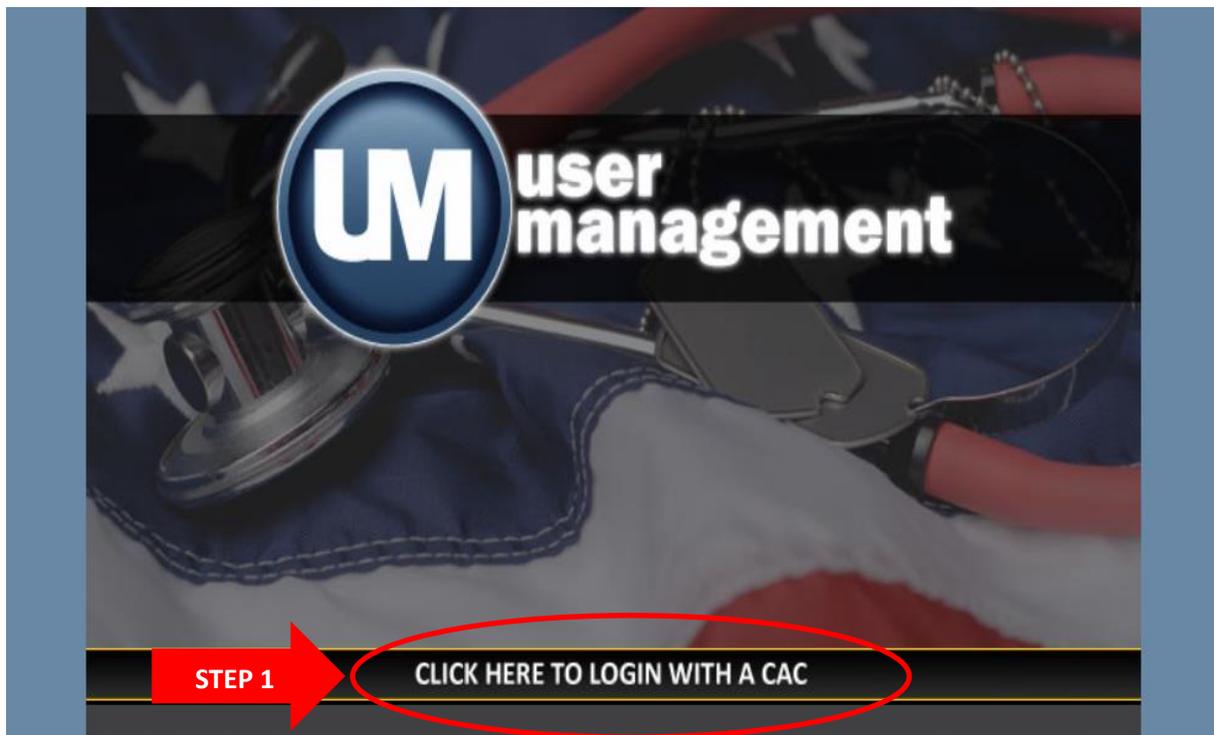
Health Care Portal Roles	MRC	Action Items	Reports	IMR Summary	VA Rating	Profiles	Profile Conditions	PHA (RR)	PHA (BH)	PHA (HCP)	DHAs	SHPE	IMR Deficiency	Reminders	Messages
Provider Support Staff	Read	Read	Read	Read	-	Write	-	Write	Read	Read	Write	Write	Read	Write	-
Athletic Trainer	-	Read	Read	-	-	Read	Read	-	-	-	-	-	-	Write	Read
Provider - Non-Physician	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Read
Provider - Physician	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Write
Profiling Approval Authority	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Read
MEB Provider Non-Physician	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Read
MEB Provider	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Read
Provider - Physician (RHRP)	Read	Read	Read	Read	Read	Write	Write	Write	Write	Write	Write	Write	Read	Write	Write
Provider Support Staff (RHRP)	Read	Read	Read	Read	Read	Write	-	Write	Read	Read	Write	Write	Read	Write	-

### 3.1.1 New User Registration for Healthcare Portal

**Step 1.** Log into MODS User Management Application (image on next page)

The system will automatically redirect users, who do not have access to the Portal, to the MODS User Management (UM) application to register. Users who have access yet need additional roles must log into the following MODS UM application with a CAC and follow the step-by-step instructions below.

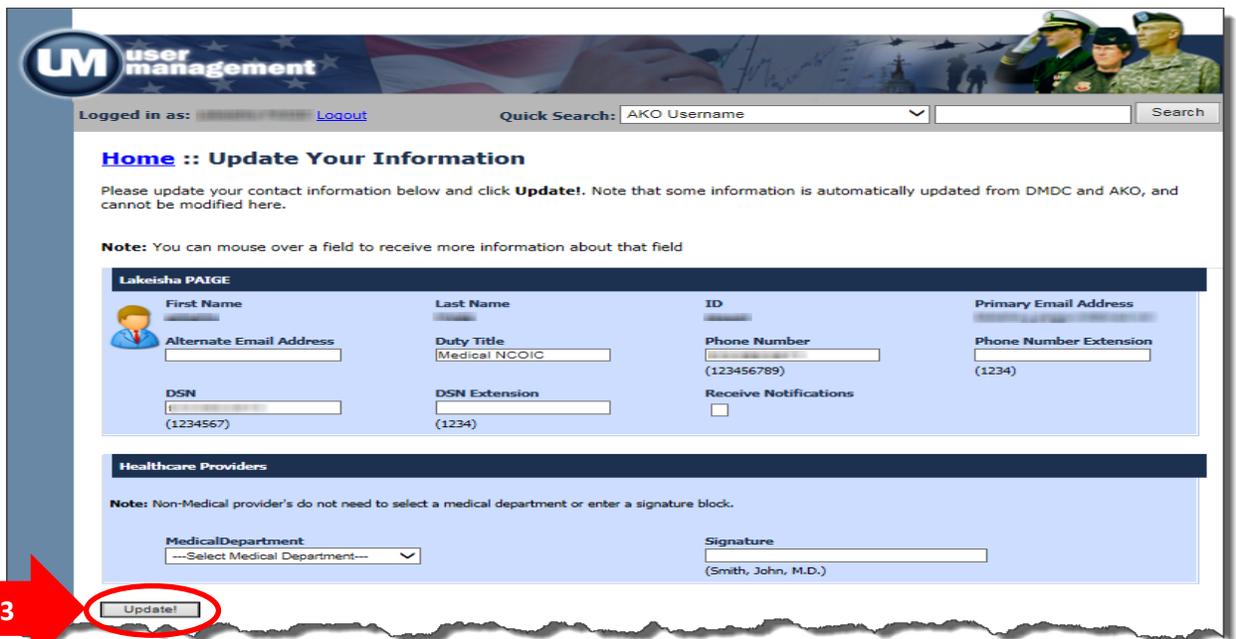
<https://authentication.mods.army.mil/MCP/Home>



**Step 2.** Click on “Request program access”



**Step 3.** Update all relevant information fields and click update



**Step 4.** Choose “MEDPROS Health Care Portal” as the Program Selection using the dropdown (image on next page)

The screenshot shows the 'user management' interface. At the top, there is a header with the 'UM user management' logo and a navigation bar. Below the header, there is a 'Logged in as' section with a 'Logout' link and a 'Quick Search' field containing 'AKO Username'. A success message states 'Your information was updated successfully!'. The main content area is titled 'Home :: Role Selection'. It features three sections: 'Program Selection', 'Role Selection', and 'Roles you have selected'. In the 'Program Selection' section, a dropdown menu is open, showing 'MEDPROS Health Care Portal' as the selected option. A red arrow labeled 'STEP 4' points to this dropdown. The 'Role Selection' section contains a list of roles and an 'Add Selected Role' button. The 'Roles you have selected' section contains a table with columns for 'Program Name', 'Role Name', and 'Role Description', and a message stating 'You have not selected any roles yet. Please choose the roles you wish to request access to from the list above.' At the bottom, there is a 'Continue' button.

**Step 5.** Select your role using the options available in the “Role Selection” window

**Step 6.** Click on “Add Selected Role”

**Step 7.** Select “Continue.”

UM user management

Logged in as [redacted] [Logout](#) Quick Search: AKO Username

✔ Your information was updated successfully!

### Home :: Role Selection

**Program Selection**

Roles are being selected from the program in the drop down below.

MEDPROS Health Care Portal   
MEDPROS Health Care Portal

**Role Selection**

Roles that are available for the program selected in the drop down above will appear below. To learn what a role will grant, click on it once and a description will appear to the right above **Add Selected Role**. If that is the desired role, click **Add Selected Role**.

Healthcare Program Role Administrator   
Provider Support Staff  
Provider - Physician  
Provider Role Manager  
Profiling Officer - Physician (LHI)  
MEB Provider

**STEP 6**

**Roles you have selected**

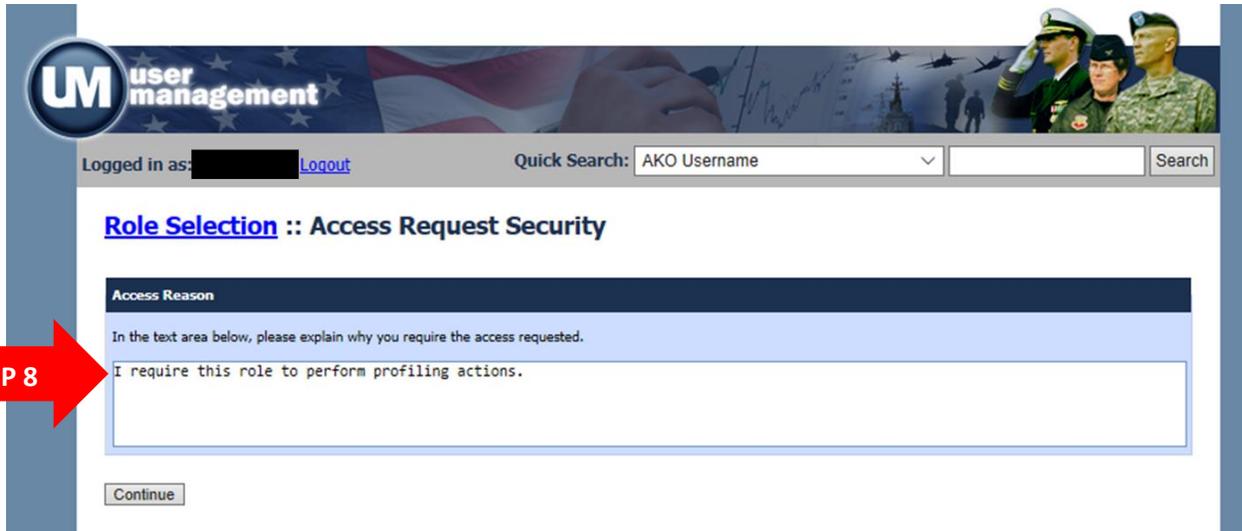
As roles are added using the list and button above, they will appear in the table below. To remove a role from the list, click the **Delete** button.

Program Name	Role Name	Role Description
You have not selected any roles yet. Please choose the roles you wish to request access to from the list above.		

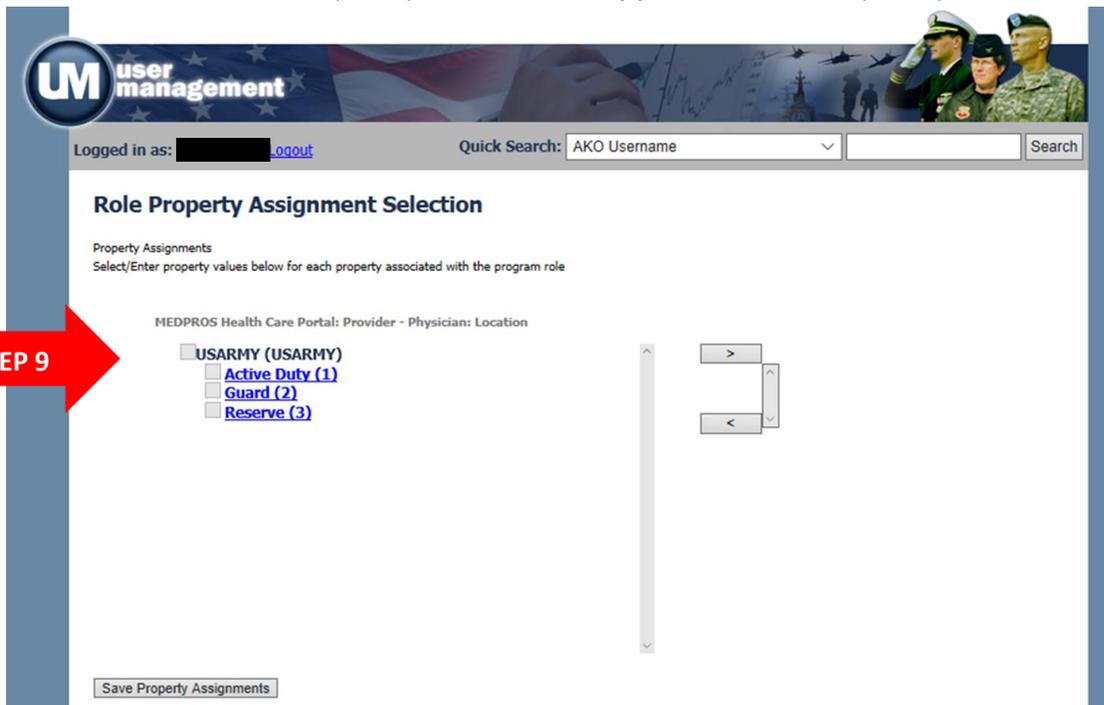
Once all desired roles have been selected, click **Continue** below.

**STEP 7**

**Step 8.** Enter a reason that you are requesting access. This will be available for your Access Manager to review. Then click the “Continue” button.



**Step 9.** Select the hierarchical properties of your role. You will first choose your Component. Active Army users will then choose RMC and then location (By Parent DMIS – more than one can be selected). ARNG users will then choose their State. USAR users will then choose their Regional Support Command (RSC) or Mission Support Command (MSC).



**Step 10.** Once the PDMIS location of the role is selected click on the arrow to move the selections to the box on the right.

**Step 11.** When all selections are in the box on the right, you will then click on “Save Property Assignments.”

The screenshot displays the 'Role Property Assignment Selection' page. At the top, there is a header with the 'UM user management' logo and a navigation bar showing 'Logged in as: [redacted] Logout' and a 'Quick Search' field containing 'AKO Username'. The main content area is titled 'Role Property Assignment Selection' and includes the instruction: 'Property Assignments Select/Enter property values below for each property associated with the program role'. Below this, a specific role is identified: 'MEDPROS Health Care Portal: Provider - Physician: Location'. Underneath, there are two selection options: 'RHC-ATLANTIC (RHCA)' and 'FT BRAGG-PDMIS (0089)'. The 'FT BRAGG-PDMIS (0089)' option is checked. To the right of these options is a selection box containing 'FT BRAGG-PDMIS (0089)'. A red arrow labeled 'STEP 10' points to the right-pointing arrow button between the two boxes. At the bottom left, a red arrow labeled 'STEP 11' points to the 'Save Property Assignments' button.

**Step 12.** The next screen will present all of the information included in your access request for you to review for accuracy. It is important that you only request access for necessary information and roles. Once you click on “Finish”, the system submits the request to your Access Manager.

**UM user management**

Logged in as: [redacted] [Logout](#) Quick Search: AKO Username [dropdown] [input] [Search](#)

### [Role Selection](#) :: Confirm Access Request

#### Confirm Access Request

Below is a summary of your access request. Please review this carefully before proceeding!

**Requested Roles:**

Program Name	Program Role
MEDPROS Health Care Portal	Provider - Physician

**Access Reason**

I require this role to perform profiling actions.

**Requested Program Role Properties:**

Program Name	Program Role	Property	Value
MEDPROS Health Care Portal	Provider - Physician	Location	FT BRAGG-PDM15 (0089)

**STEP 12** [Finish](#)

### 3.1.2 Logging into Healthcare Portal

1. Sign in to Healthcare Portal from the MODS Homepage (<https://www.mods.army.mil>). Click the “Medical Readiness Portal” link, which includes all readiness portals.

Getting Started	News and Events	Army Links
<ul style="list-style-type: none"> <li>• What is MODS?</li> <li>• How do I register for MODS applications?</li> <li>• How do I register for an AKO account?</li> <li>• How do I reset my AKO account?</li> <li>• Who do I contact for help?</li> </ul>	<ul style="list-style-type: none"> <li>• MODS: UPDATE: READINESS APPLICATIONS OFFLINE FEB 16-20 - 01/17/2018</li> <li>• MODS: System Outage Notice - 12/28/2017</li> <li>• MODS: Certificate Upgrade for MODS Sites - 01/04/2016</li> <li>• UM: Need access to a MODS application? - 05/29/2012</li> </ul> <p><a href="#">View All News and Events</a></p>	<ul style="list-style-type: none"> <li>• AKO - Army Knowledge Online</li> <li>• Army Medicine</li> <li>• U. S. Army Home Page</li> <li>• AMEDD C &amp; S</li> <li>• MILVAX</li> <li>• HRC Homepage</li> <li>• AMAP - Army Medical Action Plan</li> </ul>

iSalute

<https://www.mods.army.mil>

### 3.2 Who to contact for Help

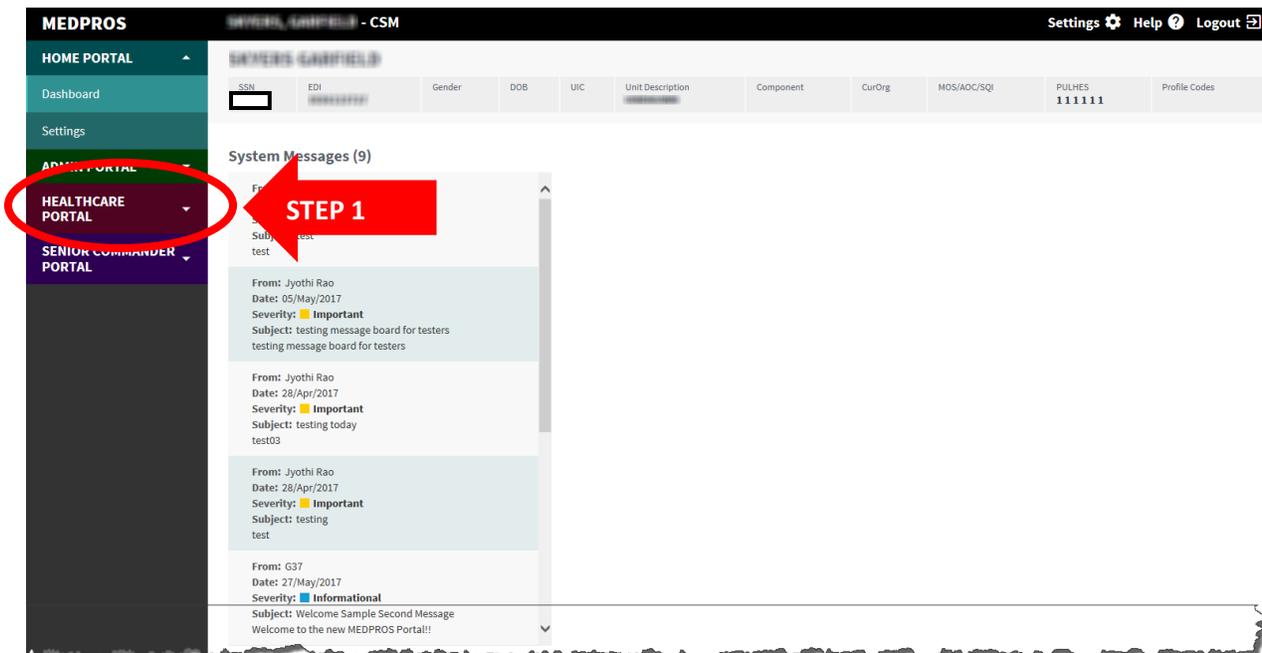
 **Need Help:** For further assistance with registering and questions regarding UIC structure, contact the MODS Help Desk at (888) 849-4341 or [mods-help@asmr.com](mailto:mods-help@asmr.com).

## Chapter 4. The Healthcare Portal

### 4.1 Healthcare Portal

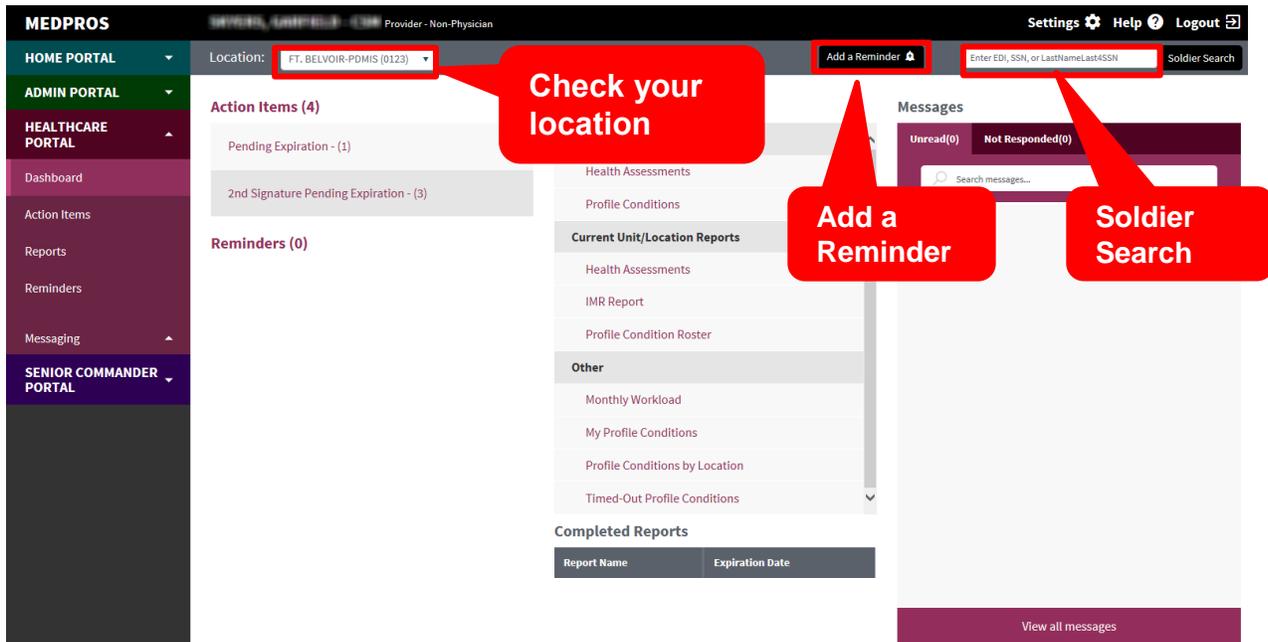
The **Healthcare Portal** is one of **five applications** that make up the **Medical Readiness Portal (MRP)** and the heart of the management of Soldiers medical readiness. The Healthcare Portal incorporates the **e-Profile application**, the Department of Defense (DoD) **Periodic Health Assessment Tool (formerly Military Health Assessment)**, and adds additional reporting functions not available previously in other applications. Access to the Healthcare portal is limited to individuals with a genuine need to manage the health readiness of a Soldier. Other individuals should consider leveraging the features in one of the other MRP application to manage and track their Soldiers medical readiness.

**Step 1.** To get to the Healthcare Portal dashboard select the Healthcare Portal tab.



## 4.2 Healthcare Portal Overview

The Healthcare Portal includes a Dashboard, Action Items, Reports, Reminders, and Messaging Tab. The Dashboard Tab is divided into four sections that provides an instant view and count of items that require an action, number of reminders, messages, read and unread, and access various types of report. Clicking on any item in the dashboard takes the user to that tab. For example, clicking on “Health Assessments” in the PCM section of the report column, takes the user to the Report Tab. The “Location” box at the top of the page is designed to allow users who may operate in multiple locations to select their current locations. This permits the system to apply unique filters for faster access to the data. Users must ensure that their location is correct. The “Add Reminder” is a fast and easy way to add reminders.

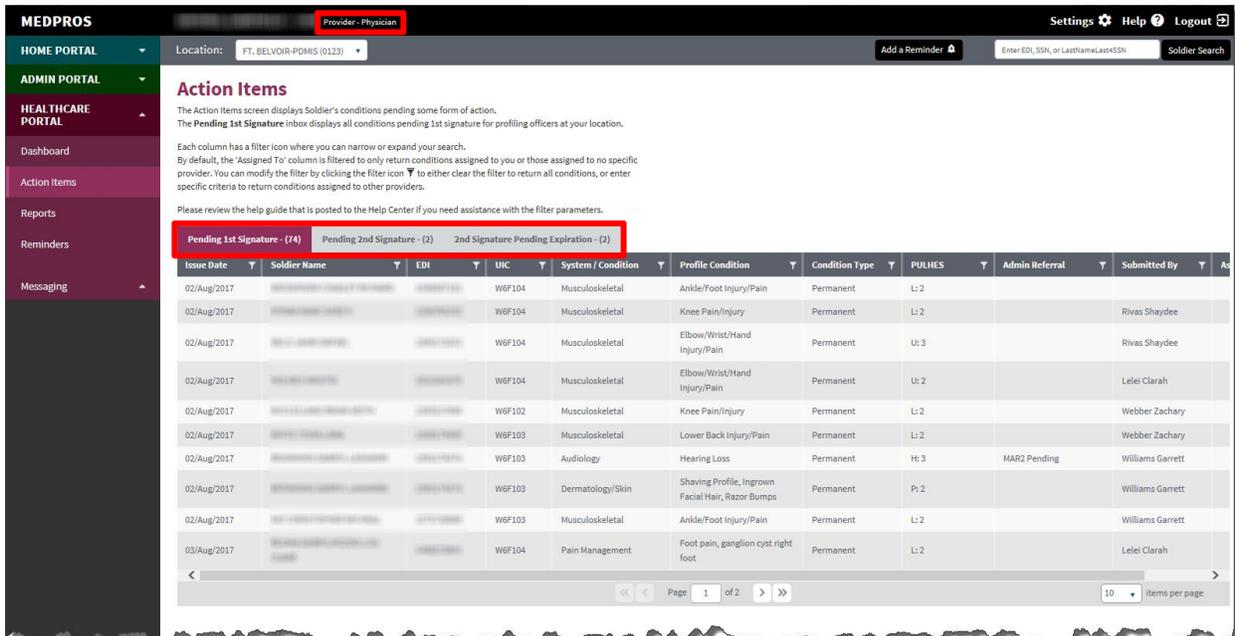


The “Soldier Search” at the top of each page let users search for Soldiers using their Department of Defense Identification Number (DoDID), (formerly referred to as the Electronic Data Interchange Personal Identifier (EDIPI)), SSN, or combine LastName Last4SSN (i.e. Jones1234).

### 4.2.1 Action Items Tab

The type and number of columns or inboxes displayed on the Action Items screen depends on the user role. For example, a user with Provider-Physician displays, **“Pending 1st Signature”**, **“Pending 2nd Signature”**, and **“2nd Signature Pending Expiration”** while a Provider – Non-Physician displays, **“Pending Expiration”** and **“2nd Signature Pending Expiration”**. For Provider – Physician, the “Pending 1st and 2nd Signature” columns display profiles conditions prepared for the provider and awaits the first signature or those submitted to a second signature authority for approval. The **“2nd Signature Pending Expiration”** displays all Soldiers with conditions pending expiration for profiles written by the user. For users with Physician – Non-Provider access, **“2nd Signature Pending Expiration”** list all conditions pending expiration for profiling officers at the default or selected location. The **“Pending Expiration”** displays all permanent conditions pending expiration at the default or selected location.

Each column has a filter icon  where you can narrow or expand your search. By default, the “Assigned To” column is filtered to only return conditions assigned to you or those assigned to no specific provider. You can modify the filter by clicking the filter icon to either clear the filter to return all conditions, or enter specific criteria to return conditions assigned to other providers.



Default Filter Criteria (Provider-Physician view)

**MEDPROS** Provider - Physician

Location: FT. BELVOIR-PDMS (0123) Add a Reminder Enter EDI, SSN, or LastNameLast4SSN Soldier Search

### Action Items

The Action Items screen displays Soldier's conditions pending some form of action. The **Pending 2nd Signature** inbox displays all conditions pending 2nd signature for profiling officers at your location.

Each column has a filter icon where you can narrow or expand your search. By default, the 'Assigned To' column is filtered to only return conditions assigned to you or those assigned to no specific provider. You can modify the filter by clicking the filter icon to either clear the filter to return all conditions, or enter specific criteria to return conditions assigned to other providers.

Please review the help guide that is posted to the Help Center if you need assistance with the filter parameters.

Pending 1st Signature - (74) **Pending 2nd Signature - (2)** 2nd Signature Pending Expiration - (2)

Issue Date	Soldier Name	EDI	UIC	System / Condition	Profile Condition	Condition Type	PULHES	Admin Referral	Submitted By
15/Sep/2017			W6F103	Musculoskeletal	Knee Pain/Injury	Permanent	L: 2		Jones Lori
15/Sep/2017			W6F102	Musculoskeletal	Foot Injury/Pain	Permanent	L: 2		Jones Lori

Page 1 of 1 10 Items per page

Number of profiles Pending 2nd Signature (Provider-Physician)

**MEDPROS** Provider - Physician

Location: FT. BELVOIR-PDMS (0123) Add a Reminder Enter EDI, SSN, or LastNameLast4SSN Soldier Search

### Action Items

The Action Items screen displays Soldier's conditions pending some form of action. The **2nd Signature Pending Expiration** inbox displays all permanent conditions pending expiration for profiling officers at your location.

Each column has a filter icon where you can narrow or expand your search. By default, the 'Assigned To' column is filtered to only return conditions assigned to you or those assigned to no specific provider. You can modify the filter by clicking the filter icon to either clear the filter to return all conditions, or enter specific criteria to return conditions assigned to other providers.

Please review the help guide that is posted to the Help Center if you need assistance with the filter parameters.

Pending 1st Signature - (74) Pending 2nd Signature - (2) **2nd Signature Pending Expiration - (2)**

Issue Date	Soldier Name	EDI	UIC	System / Condition	Profile Condition	Condition Type	PULHES	Admin Referral	Submitted By
12/Dec/2016			W03KAA	Musculoskeletal	Knee Pain/Injury	Permanent	L: 2		Davey Shaunette

Page 1 of 1 10 Items per page

Number of 2nd Signature Pending Expiration profiles (Provider-Physician and Provider – Non-Physician)

**MEDPROS** Provider - Non-Physician

Location: FT. BELVOIR-PDMS (0123) Add a Reminder Enter EDI, SSN, or LastNameLast4SSN Soldier Search

### Action Items

The Action Items screen displays Soldier's conditions pending some form of action. The **Pending Expiration** inbox displays all conditions pending expiration for profiling officers at your location.

Each column has a filter icon where you can narrow or expand your search. By default, the 'Assigned To' column is filtered to only return conditions assigned to you or those assigned to no specific provider. You can modify the filter by clicking the filter icon to either clear the filter to return all conditions, or enter specific criteria to return conditions assigned to other providers.

Please review the help guide that is posted to the Help Center if you need assistance with the filter parameters.

**Pending Expiration - (1)** 2nd Signature Pending Expiration - (3)

Issue Date	Soldier Name	EDI	UIC	System / Condition	Profile Condition	Condition Type	PULHES	Admin Ref
22/Jul/2016				Dental	Dental Condition	Temporary		

Page 1 of 1 10 Items per page

Default Filter Criteria (Provider – Non-Physician Role)

### 4.2.2 Healthcare Portal - Filtering

Each column, except System/Condition, can be filtered for items with values that “Is equal to”, “Not equal to”, “Starts with”, “Contains”, “Does not contains”, “Ends with”, “Is null”, “Is not null”, “Is empty”, or “Is not empty” and a second “And” or “Or” criteria of the values listed previously. The System/Condition column provides two filter options, the “Is equal to” and “Not equal to” along with a drop-down list of profile conditions. You can apply any combination of filters for all elven columns. For example, you could apply the “Is not equal to” filter to the UIC column, then a filter for conditions that “**Contains**” ‘Next’ and “**Does not contains**” ‘Back’ in the Profile Condition column.

The screenshot shows the MEDPROS interface with the 'Action Items' section active. A table lists various medical conditions. A filter dropdown menu is open over the 'UIC' column, showing options like 'Is equal to' and 'And'. The table data is as follows:

Issue Date	Soldier Name	EDI	UIC	System / Condition	Profile Condition	Condition Type	PULHES	Admin Referral	Submitted By
02/Aug/2017	[Redacted]	[Redacted]	[Redacted]	Musculoskeletal	Ankle/Foot Injury/Pain	Permanent	L:2		Rivas Shaydee
02/Aug/2017	[Redacted]	[Redacted]	[Redacted]	Musculoskeletal	Knee Pain/Injury	Permanent	L:2		Rivas Shaydee
02/Aug/2017	[Redacted]	[Redacted]	[Redacted]	Musculoskeletal	Elbow/Wrist/Hand Injury/Pain	Permanent	U:3		Rivas Shaydee
02/Aug/2017	[Redacted]	[Redacted]	[Redacted]	Musculoskeletal	Elbow/Wrist/Hand Injury/Pain	Permanent	U:2		Lelei Clarah
02/Aug/2017	[Redacted]	[Redacted]	[Redacted]	Musculoskeletal	Knee Pain/Injury	Permanent	L:2		Webber Zachary
02/Aug/2017	[Redacted]	[Redacted]	W6F103	Musculoskeletal	Lower Back Injury/Pain	Permanent	L:2		Webber Zachary
02/Aug/2017	[Redacted]	[Redacted]	W6F103	Audiology	Hearing Loss	Permanent	H:3	MAR2 Pending	Williams Garrett
02/Aug/2017	[Redacted]	[Redacted]	W6F103	Dermatology/Skin	Shaving Profile, Ingrown Facial Hair, Razor Bumps	Permanent	P:2		Williams Garrett
02/Aug/2017	[Redacted]	[Redacted]	W6F103	Musculoskeletal	Ankle/Foot Injury/Pain	Permanent	L:2		Williams Garrett
03/Aug/2017	[Redacted]	[Redacted]	W6F104	Pain Management	Foot pain, ganglion cyst right foot	Permanent	L:2		Lelei Clarah

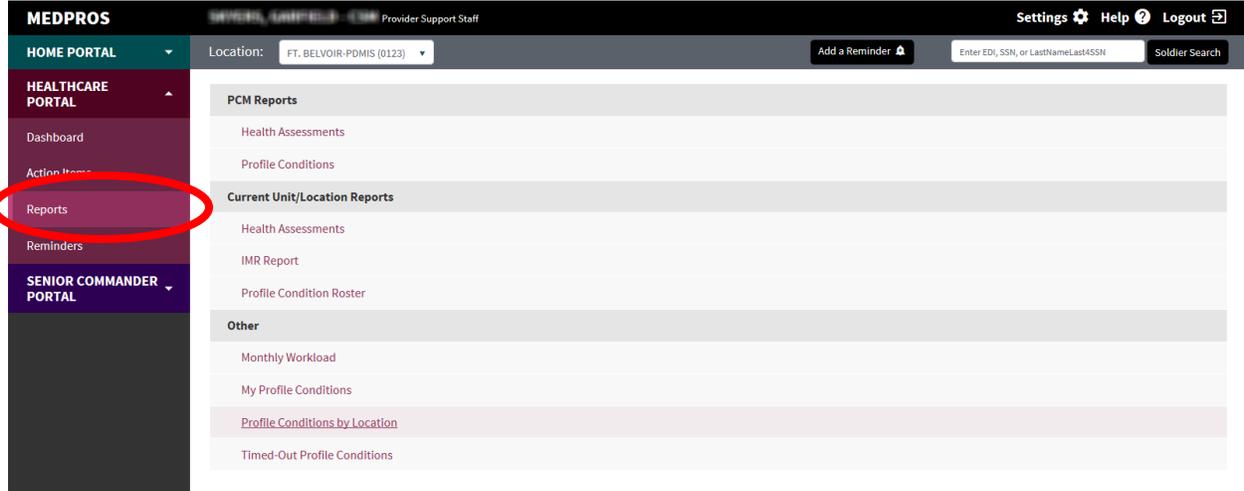
Filter Option

The screenshot shows the MEDPROS interface for a Provider-Physician at FT. BELVOIR-PHMS (0123). The main content area is titled "Action Items" and contains a table of medical conditions. A filter dropdown menu is open, showing options for "Is not equal to" and "Is equal to". A red callout box with the text "Is not equal to filter" points to the "Is not equal to" option.

Issue Date	Soldier Name	EDI	UIC	System / Condition	Profile Condition	Condition Type	PULHES	Admin Referral	Submitted By	As
02/Aug/2017	W6F104		W6F104	Musculoskeletal	Ankle/Foot Injury/Pain	Permanent	L: 2			
02/Aug/2017	W6F104		W6F104	Musculoskeletal	Knee Pain/Injury	Permanent	L: 2			
02/Aug/2017	W6F104		W6F104	Musculoskeletal	Elbow/Wrist/Hand Injury/Pain	Permanent	L: 2			
02/Aug/2017	W6F104		W6F104	Musculoskeletal	Elbow/Wrist/Hand Injury/Pain	Permanent	L: 2			
02/Aug/2017	W6F102		W6F102	Musculoskeletal	Knee Pain/Injury	Permanent	L: 2			
02/Aug/2017	W6F103		W6F103	Musculoskeletal	Lower Back Injury/Pain	Permanent	L: 2			
02/Aug/2017	W6F103		W6F103	Audiology	Hearing Loss	Permanent	L: 2		Williams Garrett	
02/Aug/2017	W6F103		W6F103	Dermatology/Skin	Shaving Profile, Ingrown Facial Hair, Razor Bumps	Permanent	P: 2		Williams Garrett	
02/Aug/2017	W6F103		W6F103	Musculoskeletal	Ankle/Foot Injury/Pain	Permanent	L: 2		Williams Garrett	
03/Aug/2017	W6F104		W6F104	Pain Management	Foot pain, ganglion cyst right foot	Permanent	L: 2		Lelei Clarah	

### 4.2.3 Healthcare Portal – Reports

The report page allow users to produce various types of reports. The PCM (Primary Care Managers) Report section produces Heath Assessments and Profile Conditions reports for Service Members in the PCM current, other locations selected from his/her profile. Similar reports can be produced for PCMs at current or other locations. The Current Unit/Location Report area provides users the ability to create Health Assessments, Individual Medical Requirement, and Profile Condition Reports for the current location. Individuals with multiple locations in their profile can produce report of Soldiers in other locations. The reports in “Other” section of the page produce workload and profile conditions reports.



*PCM Assessment and Profile Report*

#### 4.2.4 Producing Current Unit/Location Health Assessment Reports

**\*\*For Health Assessment Current Unit/Location Report, the data is not displayed on the screen like other reports. Instead, the application compiles the data in the background and save to the individual's desktop as a Microsoft Excel file.\*\***

**Step 1.** Select the location from the list of locations in the location field.

**\*\*Click the setting link next to the "Help" link at the top right of the page to change the default location and to request access additional locations.\*\***

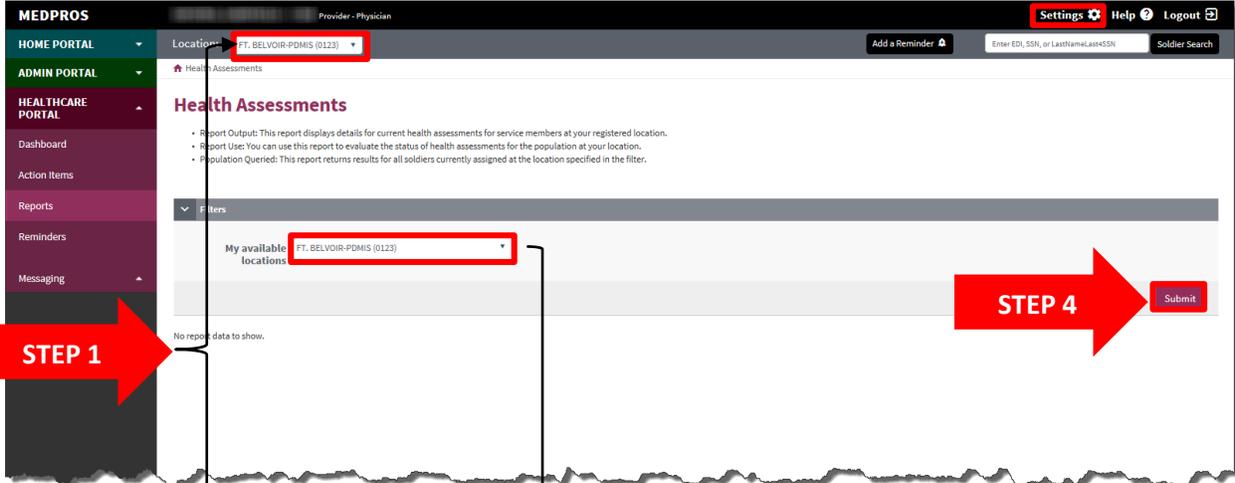
**Step 2. Provider – Physician:** Select location from "My available locations."

**Provider - Non-Physician:** Enter the PCM's EDI, SSN, LastName, LastFour SSN, in the "PCM" field, and then click "Search" to locate the Physician. Go to Step 3 once Physician is located.

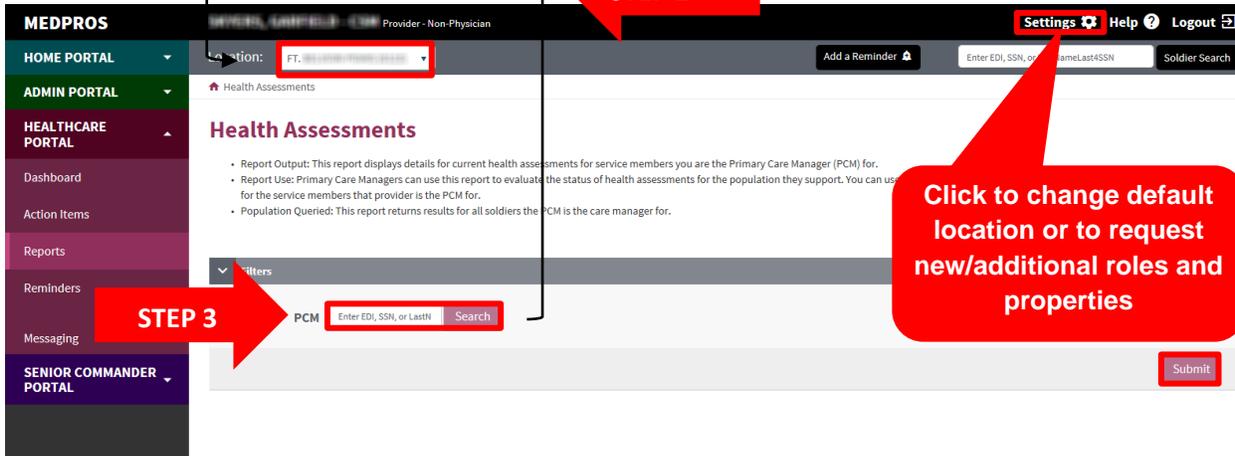
**Step 3.** (Optional) Click the down arrow next to "Filters" to hide the "My available locations" or "PCM" box.

**Step 4.** Click "Submit" to generate the report.

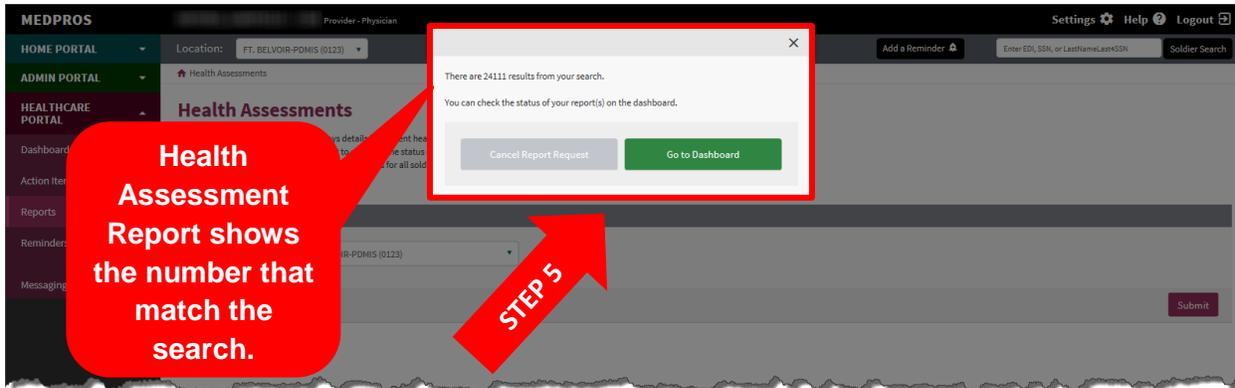
**Step 5.** Click "Go to Dashboard" to generate the report, or "Cancel Report Request" to cancel the request. (Figures on next page)



Health Assessment Report Request: Provider – Physician



Health Assessment Report Request: Provider – Non-Physician



**Pending Reports Section shows the type of report that is pending**

Portal	Report Name	Request Date
Health Care Portal	Health Assessments 2017-10-20 14:13:34	20/Oct/2017 @ 2:13PM

*Pending reports give an alternate path to click on reports.*

## 4.2.5 The Individual Medical Readiness Report

The Individual Medical Readiness (IMR) Report is used to track or evaluate the IMR results and medical readiness of all Soldiers currently assigned at a specific location. The list of locations from are available in the user profile and can be selected from “My available locations” from the IMR Report page. This filtered report can list the Soldier EDI, Name (Last Name, First Name, and Middle Name), UIC, Unit Designation, Medical Readiness Classification (MRC), Deoxyribonucleic Acid (DNA), last HIV test date, Immunization, PHA date, Vision Readiness Classification 4 (VRC4), and Hearing Readiness Classification 4 (HRC4) status. Each column can be filtered and data exported to Microsoft Excel for reports that are more precise. In addition, the “Select Columns to Display” filter allow users to display the data the user requires. Only columns that are displayed will be exported to Excel. Use these steps to produce the IMR report.

**Step 1.** Select the location from the list of locations in the location field.

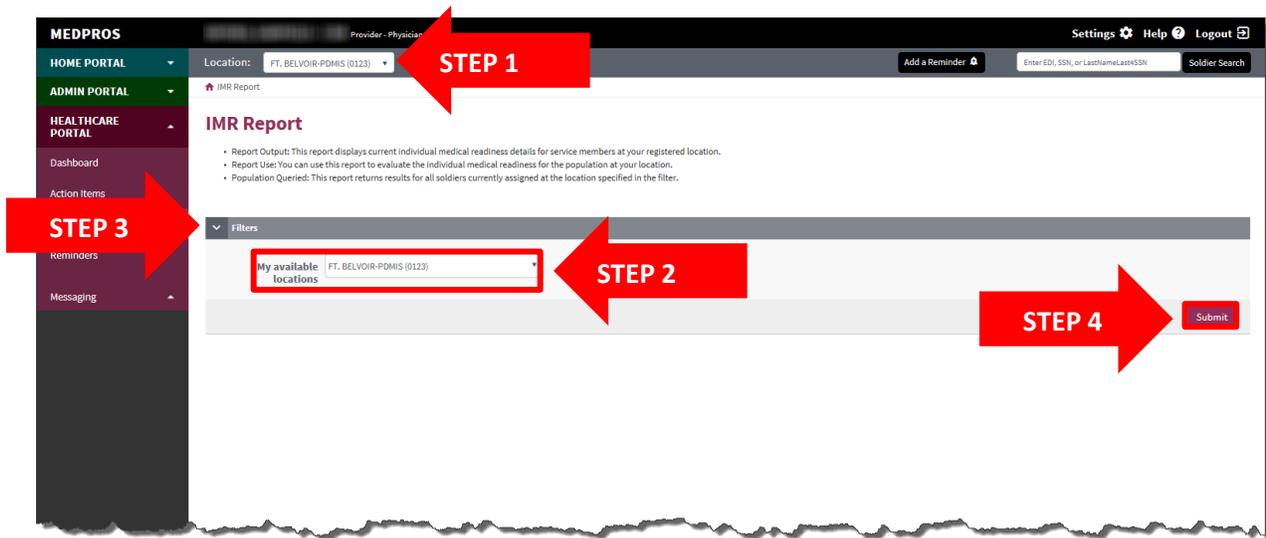
**\*\*Click the setting link next to the “Help” link at the top right of the page to change the default location and to request access additional locations.\*\***

**Step 2. Provider – Physician:** Select location from “My available locations”

Provider - Non-Physician: Enter the PCM's EDI, SSN, LastName, LastFour SSN, in the "PCM" field, and then click "Search" to locate the Physician.

**Step 3.** (Optional) Click the down arrow next to "Filters" to hide the "My available locations" or "PCM" box.

**Step 4.** Click "Submit" to generate the report.



The screenshot shows the same MEDPROS interface, but the 'Filters' section is collapsed. The 'My available locations' dropdown is now expanded to show a list of locations. Below this, a table displays the IMR report data for the selected location. The table has columns for Soldier EDI, Soldier Name, UIC, Unit Desc, MRC, DNA, HIV, IMM, and PHA. The data is enclosed in a red border.

Soldier EDI	Soldier Name	UIC	Unit Desc	MRC	DNA	HIV	IMM	PHA
111111111	11111111111111111111	W6UX01	US ARMY CYBER COMMAND ELM	2			15/Apr/2017	Flu,Tdap
111111111	11111111111111111111	W46FAA	USA ELE DF LEGAL SVCS.AGC	3				Flu,MOX,Tdap
111111111	11111111111111111111	W024AA	OFC CHIEF ARMY RES	2				Flu,Tdap,Var
111111111	11111111111111111111	W6G1AA	SCC BELVOIR	2			17/Sep/2017	Flu,Tdap,Tet
111111111	11111111111111111111	W1B3AA	USA ELM OSD	4				Flu,Tdap
111111111	11111111111111111111	W4W110	SPEC ACTV STUD OFCR	4				Flu,MOX,Tdap,Tet,Var
111111111	11111111111111111111	W1KJAA	DEF THREAT RED AGCY	4				Flu,Tdap
111111111	11111111111111111111	W4ZZZE	ARMY G3 AFPAK HANDS	2				Flu,Tdap
111111111	11111111111111111111	W1B3AA	USA ELM OSD	2				Flu,Tdap
111111111	11111111111111111111	W2DH27	USA HLTH CLN PENTAGON	2				Flu,Tdap
111111111	11111111111111111111	W6LHAA	W6LH USA PROTECTIVE SVC BIN	4			04/Aug/2017	Flu,Tdap
111111111	11111111111111111111	W3KPAA	HQ USARMY CRIM INVES CMD	4			19/Oct/2017	Flu,Tdap

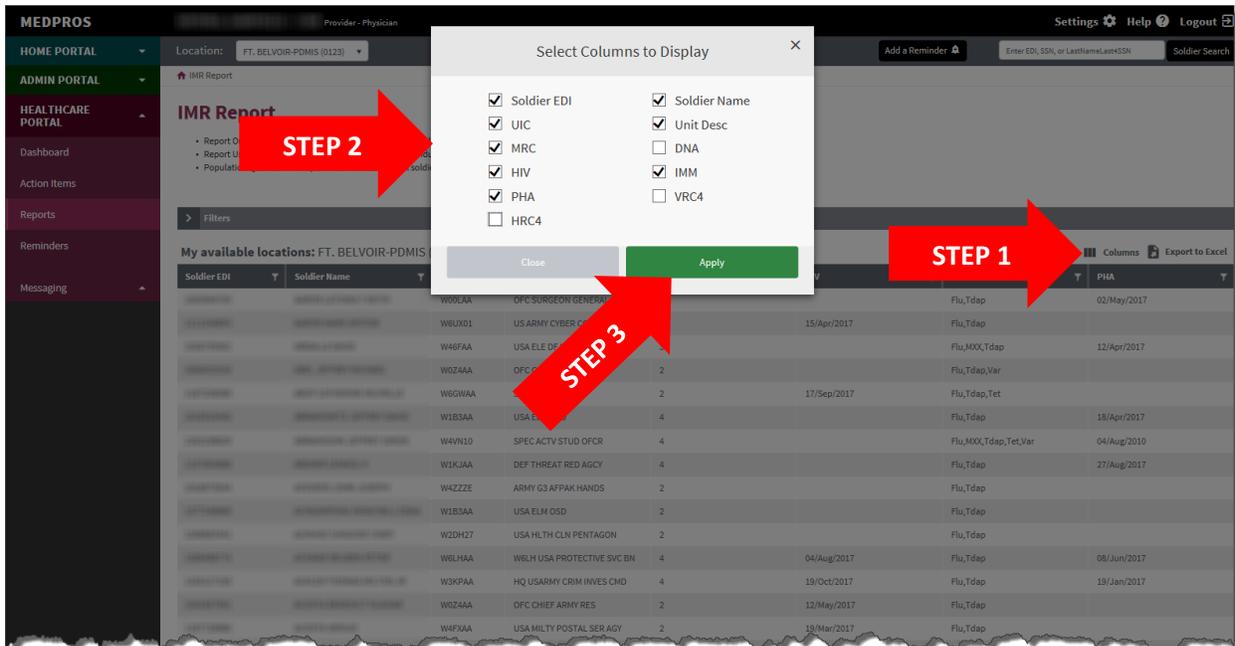
View of IMR Report

### 4.2.6 Apply Filter to IMR Report

Similar to other spreadsheet applications, a filter allows the user to view specific columns or data in a table while hiding other columns. The two types of filters that you find in any Healthcare Portal reports are, the “Column to display” filter that is used to select or hide columns, and “Header Row” filter that has a dropdown list of options for each column.

### 4.2.7 Applying Columns Filter

- Step 1.** Click the “Columns to Display” icon on top right (next to “Export to Excel”) of the report’s columns headers.
- Step 2.** Uncheck the columns to remove from the report.
- Step 3.** Click “Apply”.



IMR – List of columns selected for report

**IMR Report**

- Report Output: This report displays current individual medical readiness details for service members at your registered location.
- Report Use: You can use this report to evaluate the individual medical readiness for the population at your location.
- Population Queried: This report returns results for all soldiers currently assigned at the location specified in the filter.

My available locations: FT. BELVOIR-PDMIS (0123)

Soldier EDI	Soldier Name	UIC	Unit Desc	MRC	HIV	IMM	PHA
		W00LAA	OFC SURGEON GENERAL	4			02/May/2017
		W6UX01	US ARMY CYBER COMMAND ELM	2	15/Apr/2017		
		W46FAA	USA ELE DF LEGAL SVCS AGC	3			12/Apr/2017
		W024AA	OFC CHIEF ARMY RES	2			
		W6GWAA	SCC BELVOIR	2	17/Sep/2017		
		W1B3AA	USA ELM OSD	4			18/Apr/2017
		W4WN10	SPEC ACTV STUD OFCR	4			04/Aug/2010
		W1KJAA	DEF THREAT RED AGCY	4		Flu,Tdep	27/Aug/2017
		W4ZZZE	ARMY G3 AFPAK HANDS	2		Flu,Tdap	
		W1B3AA	USA ELM OSD	2		Flu,Tdep	
		W2DH27	USA HLTH CLN PENTAGON	2			
		W6LHAA	W6LH USA PROTECTIVE SVC BH	4	04/Aug/2017		
		W3KPAA	HQ USARMY CRIM INVES CMD	4	19/Oct/2017		
		W024AA	OFC CHIEF ARMY RES	2	12/May/2017		
		W4FXAA	USA MILTY POSTAL SER AGY	2	19/Mar/2017		

IMR – Modified Report

### 4.2.8 Saving IMR Report in Excel File

The report generated can be saved to the user’s computer or network drive. Use these steps to save report to personal computer.

- Step 1.** Click the “Export to Excel” icon.
- Step 2.** Click downward arrow to open the save option, then select “Save As” to name file and select file location.
- Step 3.** Click “Save” to save file. (Figures on next page)

**MEDPROS** Provider - Physician Settings Help Logout

Location: FT. BELVOIR-PDMIS (0123) Add a Reminder Enter EDI, SSN, or LastName.Last4SSN Soldier Search

### IMR Report

- Report Output: This report displays current individual medical readiness details for service members at your registered location.
- Report Use: You can use this report to evaluate the individual medical readiness for the population at your location.
- Population Queried: This report returns results for all soldiers currently assigned at the location specified in the filter.

Filters

My available locations: FT. BELVOIR-PDMIS (0123) Export to Excel

Soldier EDI	Soldier Name	UIC	Unit Desc	MRC	PHA
		W02LAA	OFC SURGEON GENERAL	4	02/May/2017
		W6LX01	US ARMY CYBER COMMAND ELM	2	
		W4FPA	USA ELE DF LEGAL SVCS AGC	3	12/Apr/2017
		W0ZAAA	OFC CHIEF ARMY RES	2	
		W6GWAA	SCC BELVOIR	2	
		W1B3AA	USA ELM OSD	4	18/Apr/2017
		W4VN10	SPEC.ACTV STUD OFCR	4	04/Aug/2010
		W1KJAA	DEF THREAT RED AGCY	4	27/Aug/2017
		W4ZZE	ARMY G3 AFPAK HANDS	2	
		W1B3AA	USA ELM OSD	2	
		W2DH27	USA HLTH CLN PENTAGON	2	
		W6LHAA	W6LH USA PROTECTIVE SVC BN	4	08/Jun/2017
		W3KPAA	HQ USARMY CRIM INVES CMD	4	19/Jan/2017
		W0ZAAA	OFC CHIEF ARMY RES	2	

Do you want to save Export.xlsx (300 KB) from medprostage.mods.army.mil? Save Cancel

Save As

Libraries Documents My Documents Brigade Healthcare Provider Course

Organize New folder

Documents library  
Brigade Healthcare Provider Course

Name	Date modified	Type
Healthcare Portal Report	10/23/2017 2:11 PM	File

File name: Fort Bxxxxx IMR Report

Save as type: Microsoft Excel Worksheet (\*.xlsx)

Save Cancel

Soldier EDI	Soldier Name	UIC	Unit Desc	MRC	PHA	VRC4
W00LAA			OFC SURGEON GENERAL	4		5/2/2017
W6UX01			US ARMY CYBER COMMAND ELM	2		
W46FAA			USA ELE DF LEGAL SVCS AGC	3		4/12/2017
W024AA			OFC CHIEF ARMY RES	2		
W6GWAA			SCC BELVOIR	2		
W1B3AA			USA ELM OSD	4		4/18/2017
W4VN10			SPEC ACTV STUD OFCR	4		8/4/2010
W1KJAA			DEF THREAT RED AGCY	4		8/27/2017
W4ZZZE			ARMY G3 AFPAK HANDS	2		
W1B3AA			USA ELM OSD	2		
W2DH27			USA HLTH CLN PENTAGON	2		
W6LHAA			W6LH USA PROTECTIVE SVC BN	4		6/8/2017
W3KPAA			HQ USARMY CRIM INVES CMD	4		1/19/2017
W024AA			OFC CHIEF ARMY RES	2		
W4FXAA			USA MILTY POSTAL SER AGY	2		
WNF8X1			0001 IO BN COMPO 1	2		
W4ZZH3			DMO PDA NCR	4		7/8/2017
W022AA			DCS FOR OPNS AND PLANS	2		
W627AA			USA CYBER CMD ACOIC	4		
W027AA			J ADVOCATE GEN	3		
W00TAA			USA ELM DEF INT AGCY	3		6/15/2017
W6LHAA			W6LH USA PROTECTIVE SVC BN	4		7/19/2017
W6WCAA			AMRG	3		
W1DMAA			USA ELE DEF POW MIA ORG	4		10/30/2016

IMR Report displayed in Excel report

Soldier EDI	Soldier Name	UIC	Unit Desc	MRC	PHA	VRC4
W1DMAA			USA ELE DEF POW MIA ORG	4		10/30/2016
W00CAA			CHIEF CHAPLAINS	4		3/21/2017
W027AA			J ADVOCATE GEN	4		8/21/2016
WNF8X1			0001 IO BN COMPO 1	4		9/13/2017
W023AA			DCS LOGISTICS	4		7/28/2017
W023AA			DCS LOGISTICS	4		9/22/2017
W00YAA			W00Y HQ USA INTEL SEC CMD	4		4/23/2016
W4ZZOC			DMO DAIG	4		3/14/2017
W00TAA			USA ELM DEF INT AGCY	4		6/14/2017
W022AA			DCS FOR OPNS AND PLANS	4		9/27/2017
W00GAA			OFC ASA FIN MGT AND COMPT	4		8/20/2017
W00CAA			CHIEF CHAPLAINS	4		3/1/2017
WNBFX1			0249EN	4		8/26/2017
W0F8AA			W0F8 USA ELE DEF HUM SERVICE	4		6/23/2016
W00TAA			USA ELM DEF INT AGCY	4		7/1/2017
W4ZZT5			DMO CASCOM	4		6/29/2017
W023AA			DCS LOGISTICS	4		9/23/2017
W0Y407			12TH AVN BAT C COMPANY	4		9/15/2017
W1Y5AA			OFC ADMIN ASST SEC ARMY	4		7/27/2017
W303AA			AGY DEPT ARMY IG	4		7/25/2017
W027AA			J ADVOCATE GEN	4		1/6/2017
W4MEAA			USA PER PLN & MGT ACTY	4		8/20/2017
W40RAA			USA MDW ENGINEERING CO	4		8/4/2017
W6AH1A			US ARMY PRIME POWER SCH	4		7/20/2017

IMR Report as an Excel table, filtered for MRC 4

### 4.2.9 Profile Condition Report

Profile Condition report displays details of active profile conditions of Service Members for which you are the Primary Care Manager (PCM). PCMs can use the report to evaluate the status of active profile conditions for the population they support. The filter allows you to search for other PCMs by EDI, SSN, or LastNameLast4SSN and to view details of Service Members active profile conditions that those providers are the PCM. Users with Provider-Physician role cannot enter search by other PCM. The report returns results for all Soldiers whose care the PCM manages. The steps for creating the Profile Condition Roster are similar to those used for creating the IMR report.

**Step 1.** Select the location from the list of locations in the location field.

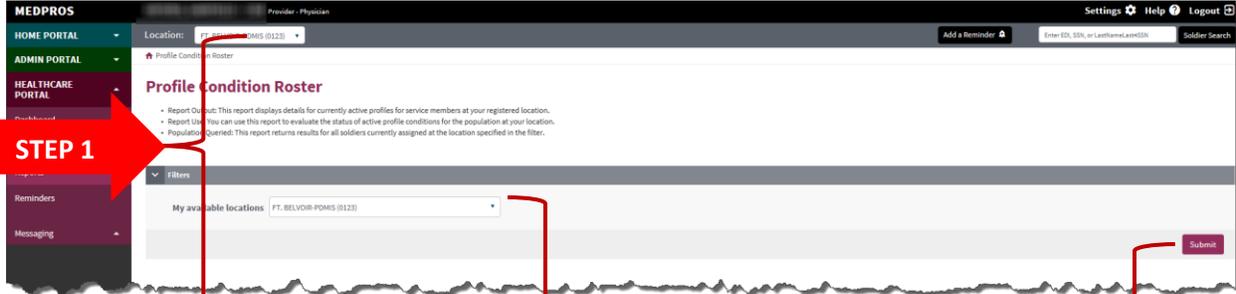
**\*\*Click the setting link next to the “Help” link at the top right of the page to change the default location and to request access additional locations.\*\***

**Step 2. Provider – Physician:** Select location from “My available locations”

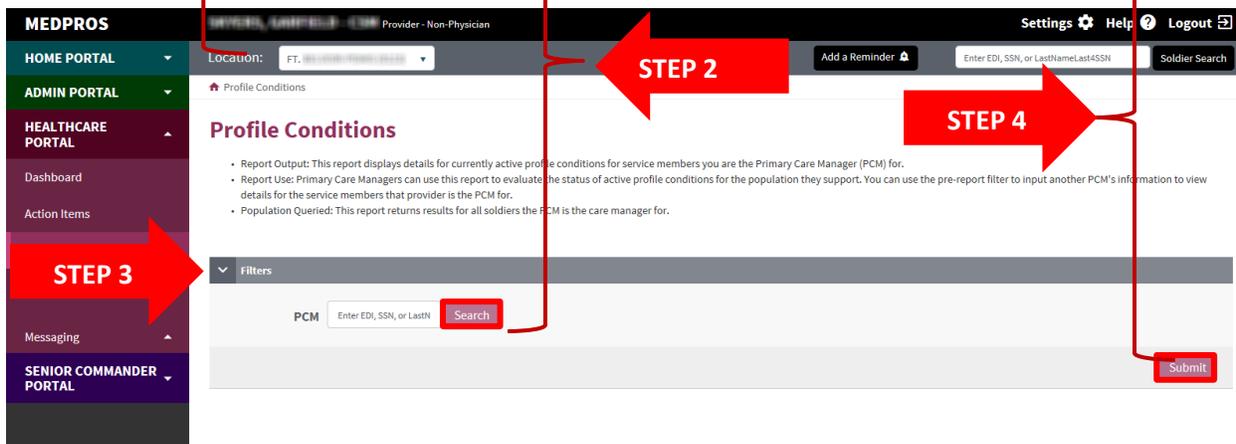
**Provider - Non-Physician:** Enter the PCM’s EDI, SSN, LastNameLastFour SSN, in the “PCM” field, and then click “Search” to locate the Physician. Go to Step 3 once Physician is located.

**Step 3.** (Optional) Click the down arrow next to “Filters” to hide the “My available locations” or “PCM” box.

**Step 4.** Click “Submit” to generate the report. (Figures on next page)



Profile Condition Report – Provider –Physician



Profile Condition Report – Provider – Non-Physician

Soldier EIR	Soldier Name	Condition Status	Condition Type	Condition	Issue Date	Expiration Date	Days on Profile	PIR/RES	Admin Referral	Profile Codes
		Valid (Signed)	Permanent	Knee Pain/Injury	07/Aug/2017		0	L2		
		Valid (Signed)	Permanent	Ankle/Foot injury/Pain	19/Jun/2017		0	L2		
		Valid (Signed)	Temporary	Uncomplicated Pregnancy	03/Jul/2017	08/Feb/2018	37			
		Valid (Signed)	Permanent	Ankle Injury/Pain	06/May/2017		0	L2		
		Valid (Signed)	Permanent	Diabetes: uncontrolled/episodes of low blood sugar	30/Sep/2016		0	P3		Y
		Valid (Signed)	Permanent	Illness/Disease	30/Sep/2016		0	P3		Y
		Valid (Signed)	Permanent	Shoulder Injury/Pain	30/Sep/2016		0	U2		
		Valid (Signed)	Permanent	Long QT Syndrome	27/Feb/2017		0	P3	MEB	FV
		Valid (Signed)	Permanent	LEFT FOOT HEEL PAIN (PLANTAR FASCITIS)	05/Aug/2016		0	L2		F
		Valid (Signed)	Temporary	Shoulder Injury/Pain	03/Aug/2017	07/Sep/2017	83			
		Valid (Signed)	Permanent	Knee Pain/Injury	18/Jan/2017		0	L2		
		Valid (Signed)	Permanent	Depressive Disorder	18/Jan/2017		0	S2		
		Valid (Signed)	Permanent	Pauses in breathing during sleep	28/Jun/2016		0	P2		
		Valid (Signed)	Permanent	Knee Pain/Injury	28/Jun/2016		0	L2		
		Valid (Signed)	Permanent	Muscle weakness after intense exercise	28/Jun/2016		0	P2		
		Perm Valid- Provisional	Permanent	Hypokalemic Periodic Paralysis	25/Jul/2017		0	P3	MEB	

Profile Condition Report- Provider -Physician

**Profile Condition Roster**

Report Output: This report displays details for currently active profiles for service members at your registered location.  
Report Use: You can use this report to evaluate the status of active profile conditions for the population at your location.  
Population Queried: This report returns results for all soldiers currently assigned at the location specified in the filter.

My available locations: FT. BELVOIR-PDMS (0123)

Soldier EDI	Soldier Name	Condition Status	Condition Type	Condition	Issue Date	Expiration Date	Days on Profile	PULHES	Admin Referral	Profile Codes
		Valid (Signed)	Temporary	Uncomplicated Pregnancy	03/Jul/2017	08/Feb/2018	37			
		Valid (Signed)	Temporary	Shoulder Injury/Pain	03/Aug/2017	07/Sep/2017	83			
		Valid (Signed)	Temporary	Knee Pain/Injury	17/Jul/2017	15/Sep/2017	23			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	01/Aug/2017	15/Aug/2017	8			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	18/Oct/2017	41			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	28/Sep/2017	42			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	10/2017	30			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	12/2017	26			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	10/2017	28			
		Valid (Signed)	Temporary	Dental Condition	03/Jul/2017	03/2017	120			
		Valid (Signed)	Temporary	Knee Pain/Injury	20/Jul/2017	03/2017	20			
		Valid (Signed)	Temporary	Alcohol Use Disorder	15/Jan/2017	03/2017	55			
		Valid (Signed)	Temporary	Dental Condition	20/Jul/2017	18/Aug/2017	231			
		Valid (Signed)	Temporary	Uncomplicated Pregnancy	23/Feb/2017	01/Nov/2017	187			
		Valid (Signed)	Temporary	Lower Back Injury/Pain	03/Aug/2017	17/Sep/2017	33			
		Valid (Signed)	Temporary	Lower Leg Injury/Pain	15/May/2017	10/Aug/2017	86			
		Valid (Signed)	Temporary	Ankle/Foot Injury/Pain	03/Aug/2017	30/Oct/2017	7			

Profile Condition Report- (filtered by temporary conditions)

### Selecting Columns to Display

**Select Columns to Display**

- Soldier EDI
- Condition Status
- Condition
- Expiration Date
- PULHES
- Profile Codes
- Soldier Name
- Condition Type
- Issue Date
- Days on Profile
- Admin Referral

Buttons: Close, Apply

Use Same Steps as 4.2.7

Soldier EDI	Soldier Name	Condition Status	Expiration Date	Days on Profile	PULHES	Admin Referral	Profile Codes
		Valid (Signed)	Temporary	Uncomplicated Pregnancy	03/Jul/2017	08/Feb/2018	37
		Valid (Signed)	Temporary	Shoulder Injury/Pain	03/Aug/2017	07/Sep/2017	83
		Valid (Signed)	Temporary	Knee Pain/Injury	17/Jul/2017	15/Sep/2017	23
		Valid (Signed)	Temporary	Lower Back Injury/Pain	01/Aug/2017	15/Aug/2017	8
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	18/Oct/2017	41
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	28/Sep/2017	42
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	10/2017	30
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	12/2017	26
		Valid (Signed)	Temporary	Lower Back Injury/Pain	26/Jul/2017	10/2017	28
		Valid (Signed)	Temporary	Dental Condition	03/Jul/2017	03/2017	120
		Valid (Signed)	Temporary	Knee Pain/Injury	20/Jul/2017	17/Oct/2017	20
		Valid (Signed)	Temporary	Alcohol Use Disorder	15/Jan/2017	13/Sep/2017	55
		Valid (Signed)	Temporary	Dental Condition	20/Jul/2017	18/Aug/2017	231
		Valid (Signed)	Temporary	Uncomplicated Pregnancy	23/Feb/2017	01/Nov/2017	187
		Valid (Signed)	Temporary	Lower Back Injury/Pain	03/Aug/2017	17/Sep/2017	33
		Valid (Signed)	Temporary	Lower Leg Injury/Pain	15/May/2017	10/Aug/2017	86
		Valid (Signed)	Temporary	Ankle/Foot Injury/Pain	03/Aug/2017	30/Oct/2017	7

Profile Condition Report- Column filtered selection

## Report with columns removed

**Profile Condition Roster**

- Report Output: This report displays details for currently active profiles for service members at your registered location.
- Report User: You can use this report to evaluate the status of active profile conditions for the population at your location.
- Population Queried: This report returns results for all soldiers currently assigned at the location specified in the filter.

My available locations: FT. BELVOIR-PDMS (0123)

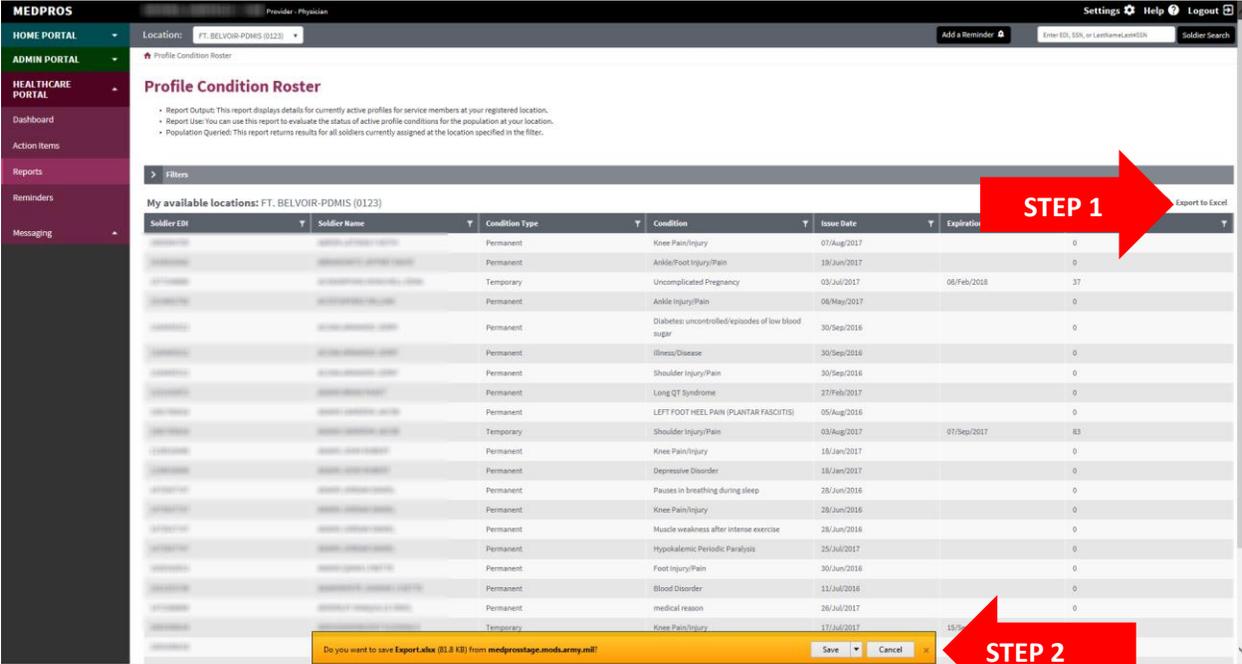
Soldier ID#	Soldier Name	Condition Type	Condition	Issue Date	Expiration Date	Days on Profile
		Permanent	Knee Pain/Injury	07/Aug/2017		0
		Permanent	Ankle/Foot Injury/Pain	19/Jun/2017		0
		Temporary	Uncomplicated Pregnancy	03/Jul/2017	08/Feb/2018	37
		Permanent	Ankle Injury/Pain	08/May/2017		0
		Permanent	Diabetes: uncontrolled/episodes of low blood sugar	30/Sep/2016		0
		Permanent	Illness/Disease	30/Sep/2016		0
		Permanent	Shoulder Injury/Pain	30/Sep/2016		0
		Permanent	Long QT Syndrome	27/Feb/2017		0
		Permanent	LEFT FOOT HEEL PAIN (PLANTAR FASCITIS)	05/Aug/2016		0
		Temporary	Shoulder Injury/Pain	03/Aug/2017	07/Sep/2017	83
		Permanent	Knee Pain/Injury	18/Jun/2017		0
		Permanent	Depressive Disorder	18/Jun/2017		0
		Permanent	Pauses in breathing during sleep	28/Jun/2016		0
		Permanent	Knee Pain/Injury	28/Jun/2016		0
		Permanent	Muscle weakness after intense exercise	28/Jun/2016		0
		Permanent	Hypokalemic Periodic Paralysis	25/Jul/2017		0
		Permanent	Foot injury/Pain	30/Jun/2016		0
		Permanent	Blood Disorder	11/Jul/2016		0
		Permanent	medical reason	26/Jul/2017		0
		Temporary	Knee Pain/Injury	17/Jul/2017	15/Sep/2017	23
			Knee Pain/Injury	14/Sep/2016		0

Profile Condition Report- with filtered columns removed

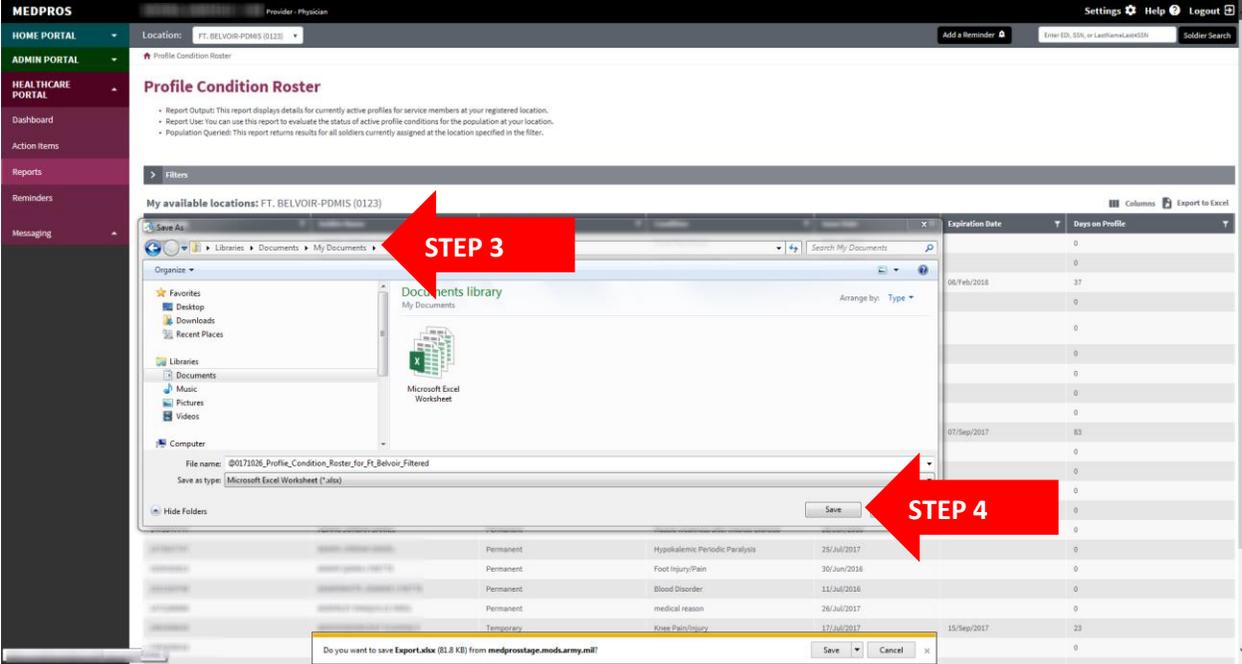
### 4.2.10 Saving Condition Report in Excel File

Healthcare Portal allows users to save reports to a computer or network drive. Use these steps to save report to personal computer.

- Step 1.** Click the “**Export to Excel**” icon.
- Step 2.** Click downward arrow to open the save option, then select “**Save As**” to name file and select file location.
- Step 3.** Select location for the file.
- Step 4.** Change the default name (if needed), then click “**Save**” to save file. (Figures on next page)



Profile Condition Report- File Export



Profile Condition Report- Naming and Saving to Selected Location

Formatting the file as an Excel table allow uses to take advantage of Excel table features such as the built-in dropdown filters, visible column headings, automatic totals, and banded rows for easier read.

	A	B	C	D	E	F	G	H
	Soldier EDI	Soldier Name	Condition Type	Condition	Issue Date	Expiration Date	Days on Profile	IT
14			Temporary	Lower Back Injury/Pain	5/25/2017	8/23/2017	342	
15			Temporary	Lower Back Injury/Pain	5/23/2017	8/11/2017	331	
30			Temporary	Lower Leg Injury/Pain	7/3/2017	9/1/2017	317	
36			Temporary	Asthma (recently diagnosis)	5/26/2017	8/24/2017	286	
37			Temporary	Knee Pain/Injury	6/16/2017		286	
39			Temporary	Shoulder Injury/Pain	7/6/2017		282	
43			Temporary	Knee Pain/Injury	5/19/2017		268	
45			Temporary	Ankle/Foot Injury/Pain	5/25/2017		266	
57			Temporary	Shoulder Injury/Pain	7/5/2017		254	
59			Temporary	Ankle/Foot Injury/Pain	6/27/2017		251	
67			Temporary	Shoulder Injury/Pain	5/31/2017		238	
68			Temporary	Dental Condition	7/20/2017		231	
75			Temporary	Knee Pain/Injury	7/13/2017		225	
76			Temporary	tibialis anterior tendinosis and e	6/15/2017		216	
87			Temporary	Knee Pain/Injury	7/21/2017		215	
90			Temporary	Hip Pain/Injury	8/7/2017		215	
98			Temporary	Hip Pain/Injury	8/2/2017		212	
110			Temporary	Uncomplicated Pregnancy	1/11/2017	8/20/2017	210	
111			Temporary	Dental Condition	6/26/2017	7/26/2017	210	
112			Temporary	Uncomplicated Pregnancy	1/13/2017	8/24/2017	208	

Profile Condition Report- Excel table, filtered by condition and Days on Profile greater than 180

### 4.3 Other Types of Reports

The four other reports available are the monthly workload report, my profile report, profile condition by location, and timed out report.

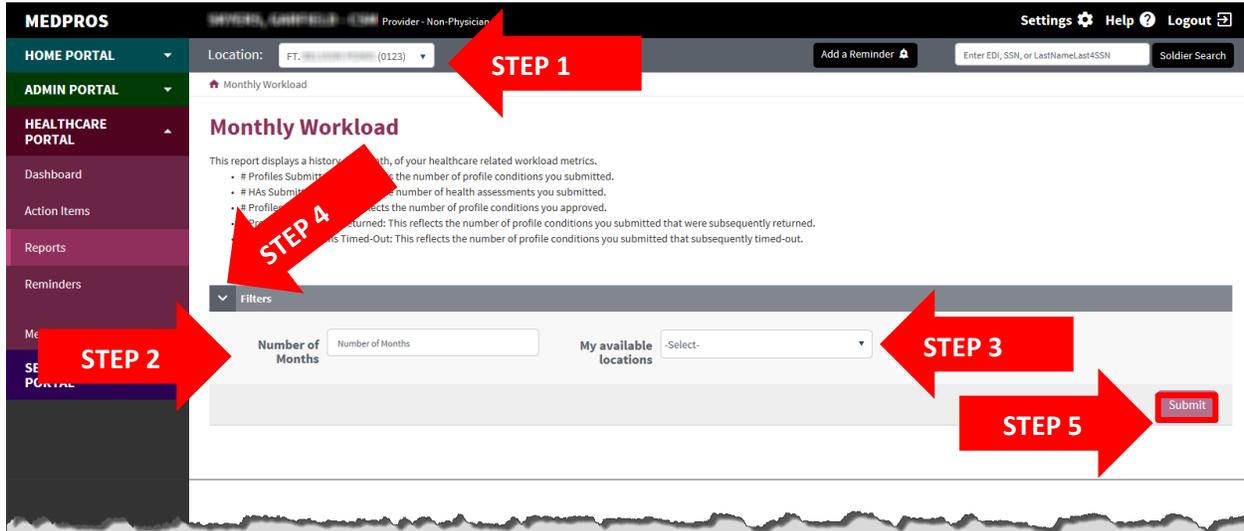
#### 4.3.1 Monthly Workload Report

The monthly workload report displays information for five categories, #Profile Submitted, #HAs Submitted, # Profiles Approved, # Profile Submissions Returned, and # Profile Submissions Timed-Out, which healthcare personnel can use to track monthly workload from locations within the user profile. The description for each report is at the top of the Monthly Workload page. Each column of the report provides additional filtering that the user can use to create more detailed reports. Follow these steps and the information on the screen to create each report.

- Step 1.** Select the location from the list of locations in the location field.
- Step 2.** Input the number of months in the “**Number of Months**” area for the report that is being produced.
- Step 3.** Select the location from “**My available locations.**”

**Step 4.** (Optional) Click the arrow next to “Filter” to hide the filtered fields.

**Step 5.** Click the “Submit” button to generate the report.



The screenshot displays the 'Monthly Workload' report for a provider-physician at FT. BELVOIR-PDMIS (0123). The report shows a history of healthcare-related workload metrics by month. The table below summarizes the data for the year 2017 and the month of December 2016.

Month	Year	# Profiles Submitted	# HAs Submitted	# Profiles Approved	# Profile Submissions Returned	# Profile Submissions Timed-Out
October	2017	0	0	0	0	0
September	2017	0	0	0	0	0
August	2017	2	0	2	0	0
July	2017	0	0	0	0	0
June	2017	0	0	0	0	0
May	2017	0	0	0	0	0
April	2017	0	0	0	0	0
March	2017	0	0	0	0	0
February	2017	0	0	0	0	0
January	2017	0	0	0	0	0
December	2016	0	0	0	0	0

View of Monthly Workload Report – Provider - Physician

### 4.3.2 Applying the Columns to Display filter

As with other previously described reports, the Monthly Workload Report allow users to select the columns that they want to include in their report.

- Step 1.** Click the “Columns to Display” icon on top right (next to “Export to Excel”) of the report’s columns headers.
- Step 2.** Uncheck the columns to remove from the report.
- Step 3.** Click “Apply”.

The screenshot shows the MEDPROS interface for the Monthly Workload Report. A modal window titled "Select Columns to Display" is open, showing a list of columns with checkboxes. A red arrow labeled "STEP 2" points to the modal. Another red arrow labeled "STEP 3" points to the "Apply" button in the modal. A third red arrow labeled "STEP 1" points to the "Columns" icon in the report header. A red callout box labeled "Location and months" points to the "My available locations" and "Number of Months" filters. Another red callout box labeled "Select 'Export to Excel' to export data that is displayed to Excel." points to the "Export to Excel" button.

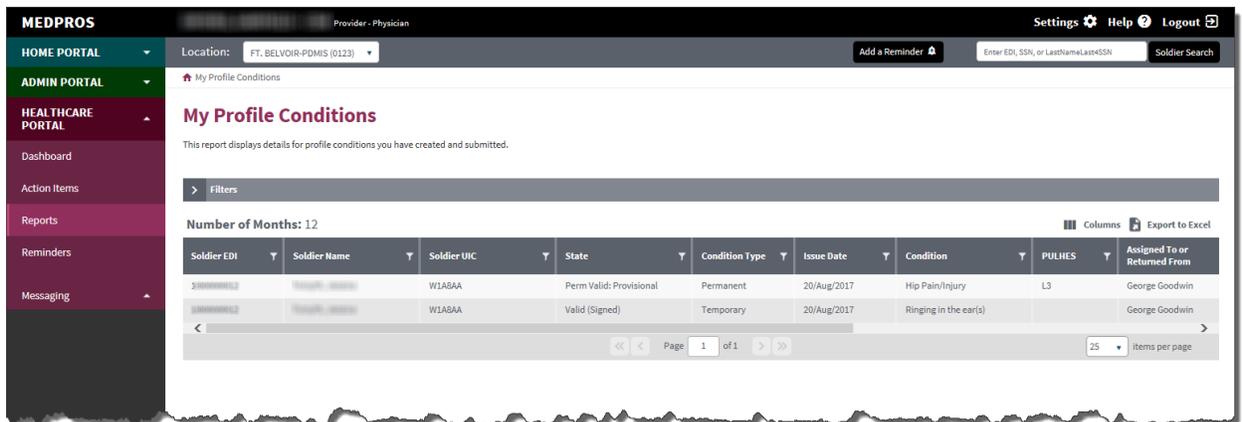
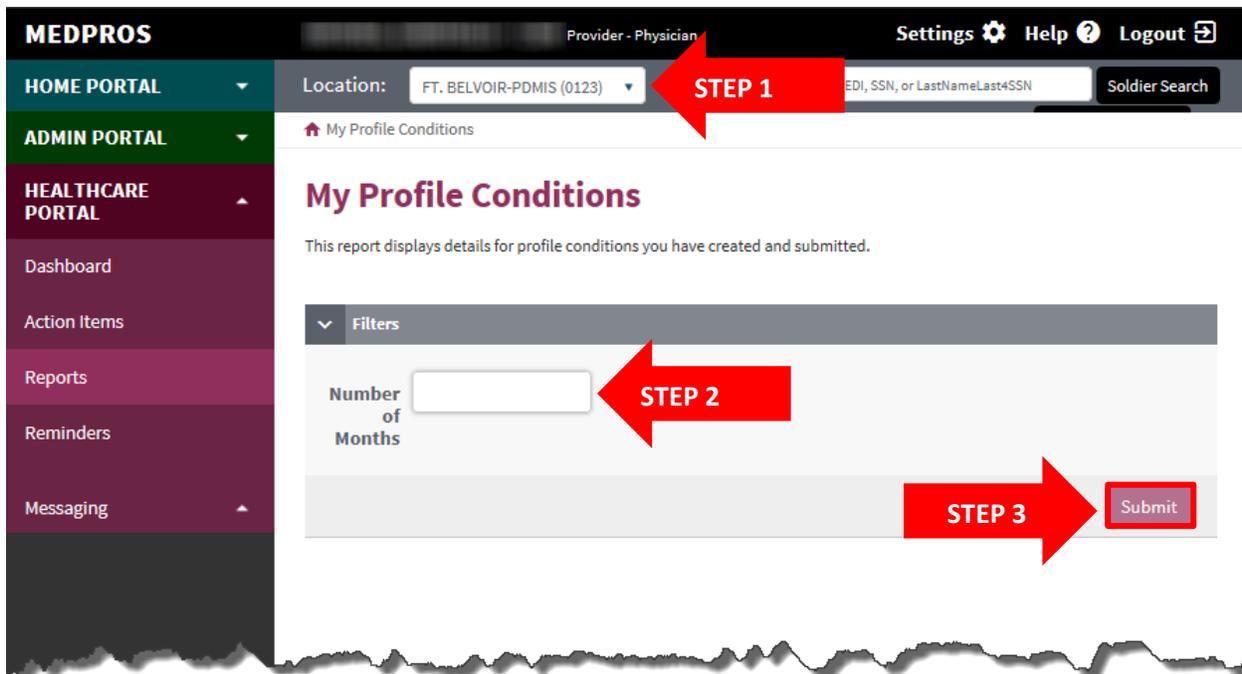
Month	Year	# Profiles Submitted	# HAs Submitted	# Profiles Approved	# Profile Submissions Returned	# Profile Submissions Timed-Out
June	2017	0	0	0	0	0
May	2017	0	0	0	0	0
April	2017	0	0	0	0	0
March	2017	0	0	0	0	0
February	2017	0	0	0	0	0
January	2017	0	0	0	0	0
December	2016	0	0	0	0	0
November	2016	0	0	0	0	0
October	2016	0	0	0	0	0

Column Filter for Monthly Workload Report

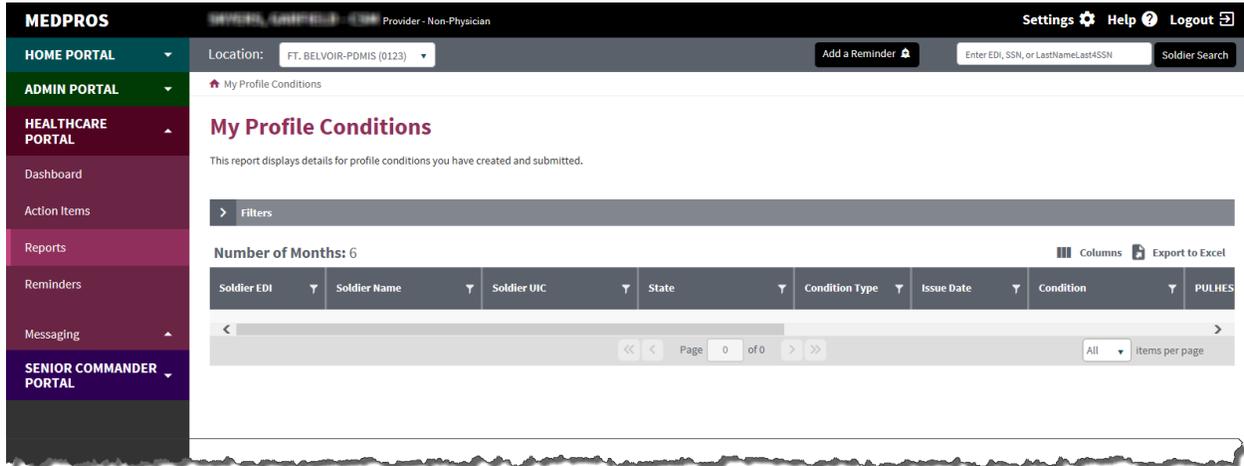
### 4.3.3 My Profile Conditions Report

My Profile Conditions Report displays details of profiles that the healthcare provider has submitted.

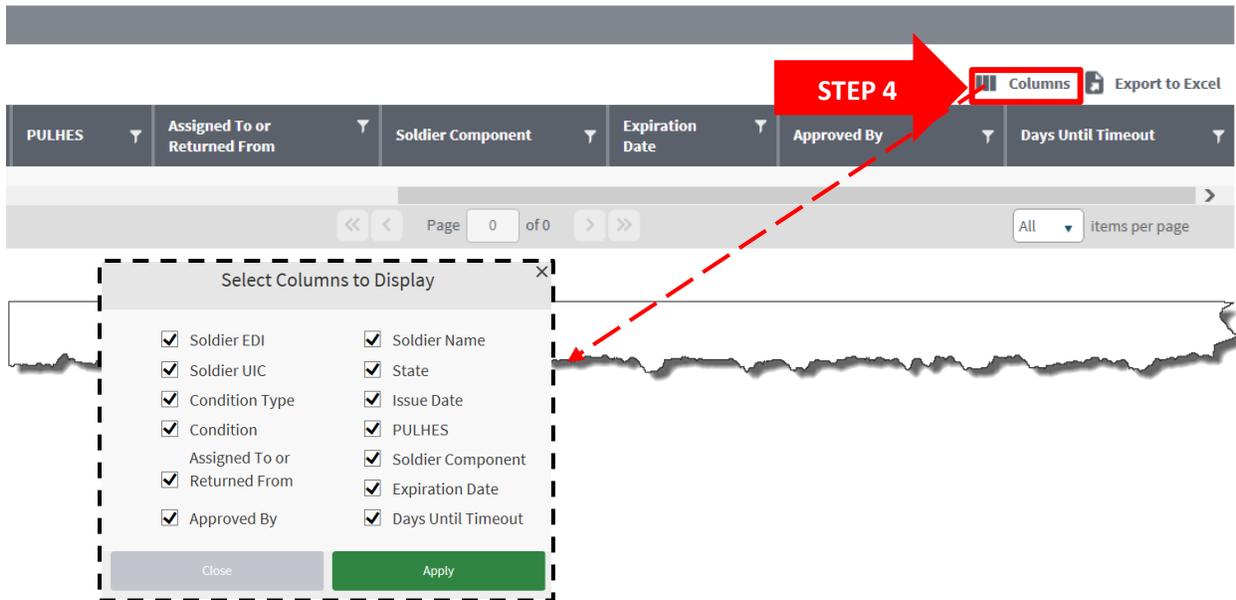
- Step 1.** Select location
- Step 2.** Select number of months
- Step 3.** Click “Submit”.
- Step 4.** Review report and apply filters as needed.



Profile Conditions Report – Provider - Physician



Profile Conditions Report – Provider – Non-Physician



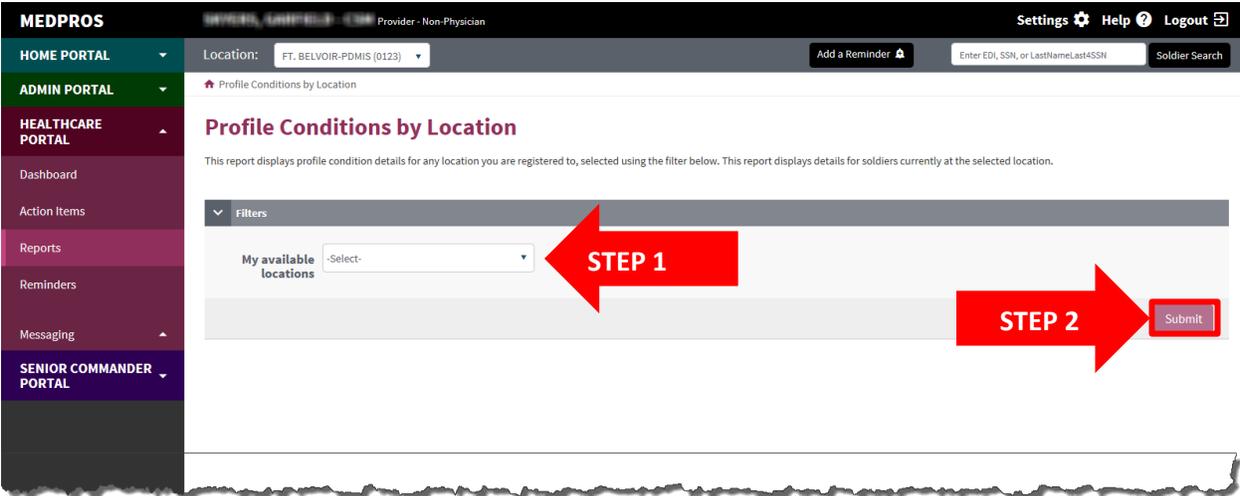
### 4.3.4 Profile Conditions by Location Report

Profile Conditions by Location Report shows profile condition details for any location for which you are registered and displays details for Soldiers currently at the selected location

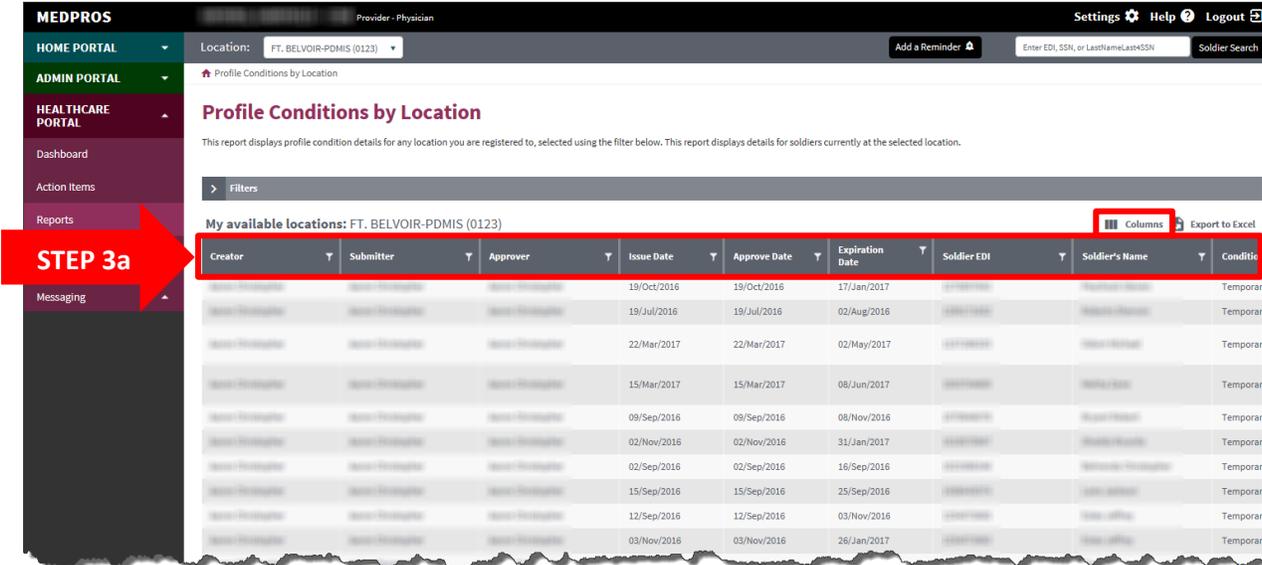
**Step 1.** Select location

**Step 2.** Click “Submit”.

Step 3a/b. Review report and apply filters as needed.



View of Profile Condition by Location Report



Soldier's Name	Condition Type	State	Condition	Days Until Archive Timeout
[Redacted]	Temporary	Archived: Expired	Neck Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Neck Injury/Pain	
[Redacted]	Temporary	Archived: Extended	Elbow/Wrist/Hand Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Elbow/Wrist/Hand Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Foot Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Lower Back Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Foot Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Foot Injury/Pain	
[Redacted]	Temporary	Archived: Extended	Lower Back Injury/Pain	
[Redacted]	Temporary	Archived: Extended	Lower Back Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Foot Injury/Pain	
[Redacted]	Temporary	Archived: Expired	Lower Back Injury/Pain	
[Redacted]	Temporary	Archived: Extended	Lower Back Injury/Pain	



**Select Columns to Display**

- Creator
- Approver
- Approve Date
- Soldier EDI
- Condition Type
- Condition
- Submitter
- Issue Date
- Expiration Date
- Soldier's Name
- State
- Days Until Archive Timeout

Close Apply

**Columns to display list**

### 4.3.5 Timed-Out Profile Conditions

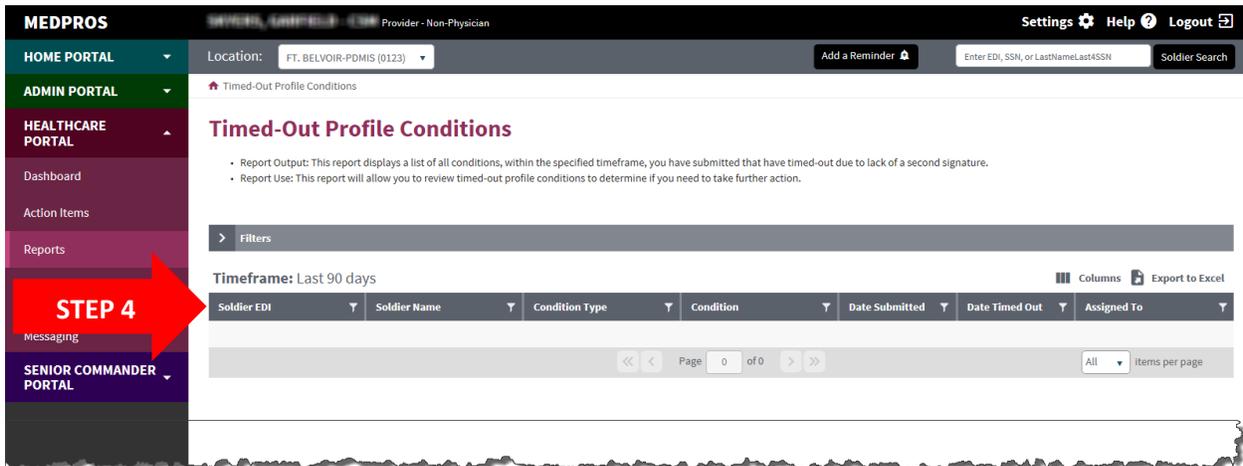
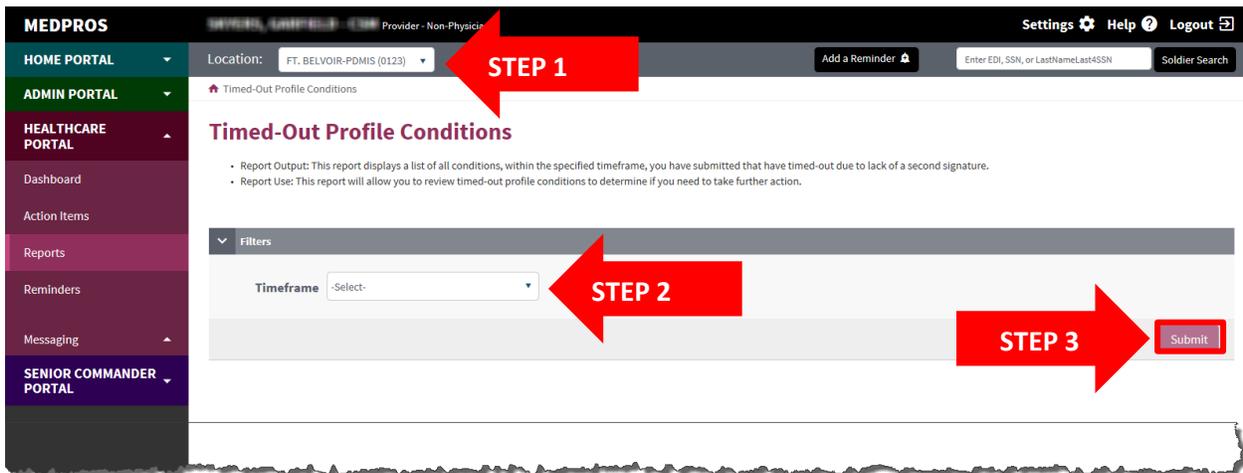
The timed-out profile condition report displays a list of all conditions, within the specified timeframe, that the Healthcare Provider submitted that have timed-out due to lack of a second signature. This allows the Healthcare Provider to review timed-out profile conditions to determine if further action is required.

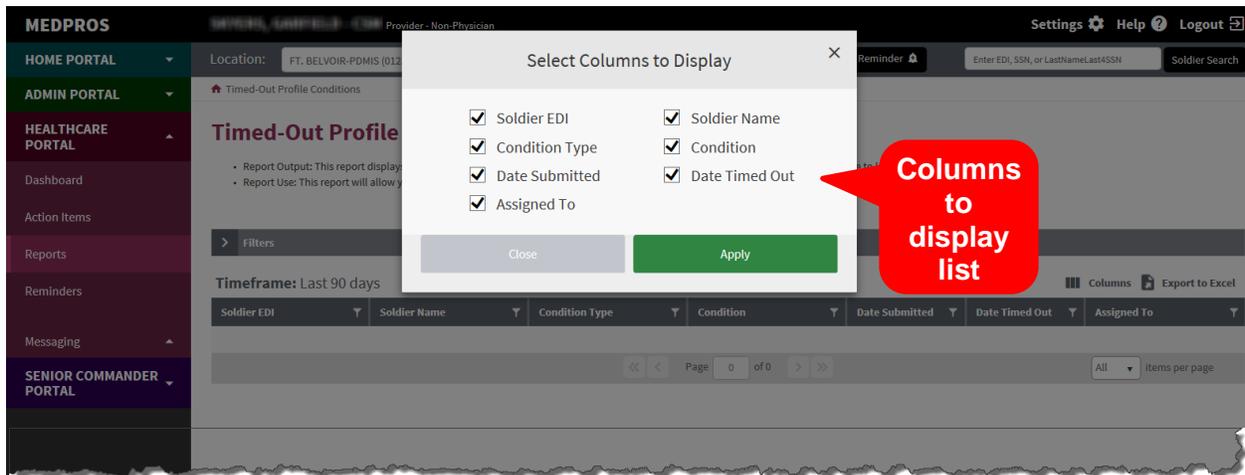
**Step 1.** Select location.

**Step 2.** Select timeframe.

**Step 3.** Click “Submit.”

**Step 4.** Review, apply filter, and download report.





## 4.4 Other Portal Functions

### 4.4.1 Reminders

Reminders are one of the many new features of the Healthcare Portal and one of the more useful tools that a Provider or Staff can use to stay on task, complete an action later, or follow up on an issue with a Soldier. Like the Soldier Search feature, the “Reminder” feature is available at the top of every page in the Healthcare Portal. Use the following steps to add a reminder. Users can view all of their reminders from the “Current Reminder” page. Steps for adding or reviewing reminders

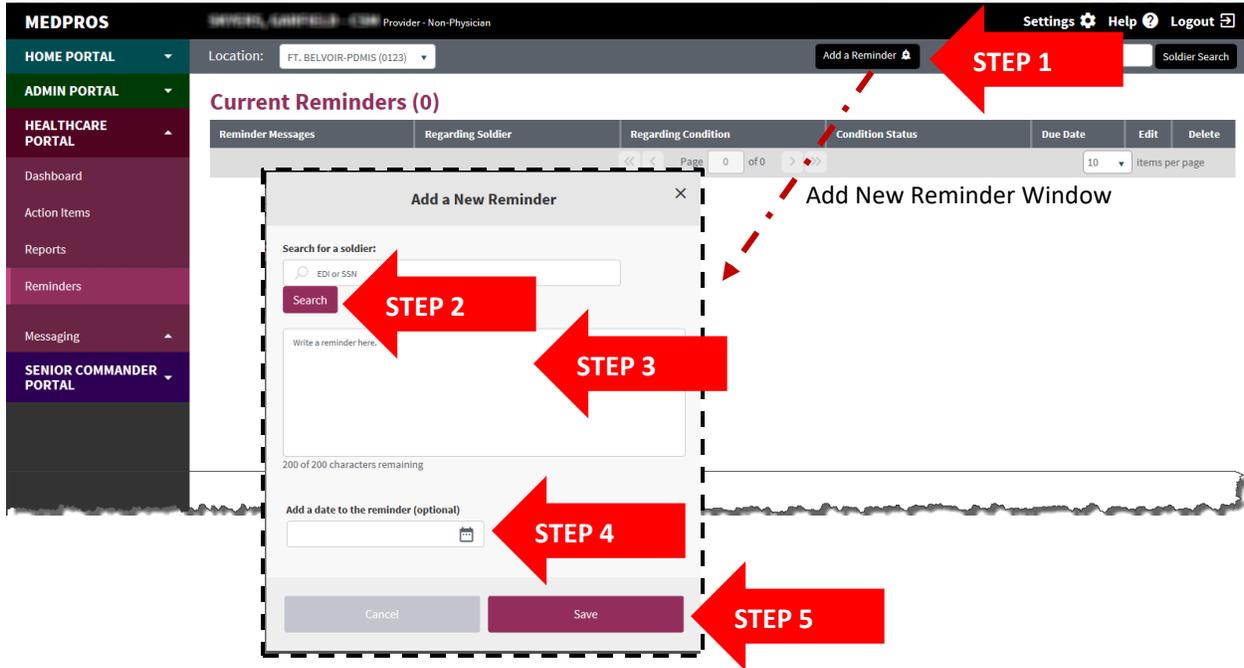
**Step 1.** Click the **Add a Reminder** at the top of the page. The Add New Reminder window opens.

**Step 2.** Enter the Soldier’s EDI or SSN in the “**Search for Soldier**” box and click “**Search.**”

**Step 3.** Write the reminder in the area provided. You are limited to 200 characters.

**Step 4.** Use the “**Add a date to the reminder**” to add a date when to be reminded. A date is not required to complete the reminder.

**Step 5.** Click “**Save**” to save the reminder. (Figures on next page)



#### 4.4.2 Healthcare Portal Message

The messaging feature allow for synchronous messages between a provider and the Soldier’s Commander. The messaging feature is view by most Command Teams as one of the most useful tools within the Healthcare Portal because it enables improved communication and transparency between the Healthcare Provider (medical) and the Command Team (non-medical) with the purpose of improving Soldier medical readiness. Unlike the Commander Portal where Commanders log into the portal to check for messages, the messaging feature in the Healthcare Portal sends message notifications to users via the Enterprise Mail System (EMS) (Outlook). The content of the message is not visible in the EMS. Users must log into the Healthcare Portal to view, read, and respond to messages.

#### 4.4.3 Access Healthcare Portal Messages

Access to Messages is available from the Dashboard and the Message Tab. The Message Area of the Dashboard does not offer all of the features that are available in the tab. You are able to view the count of “Unread” and “Not Responded” messages. Clicking on the “View all messages” tab takes you to the Message tab where you can view unread, not responded, all, and archived messages and where you can create new messages.

#### 4.4.4 Creating New Messages

**Step 1.** Click the **“Messaging”** tab to compose a new message. The message page opens where you can view the number of unread, not responded, all, or archived messages. The search feature allows searching of messages by criteria the user specify.

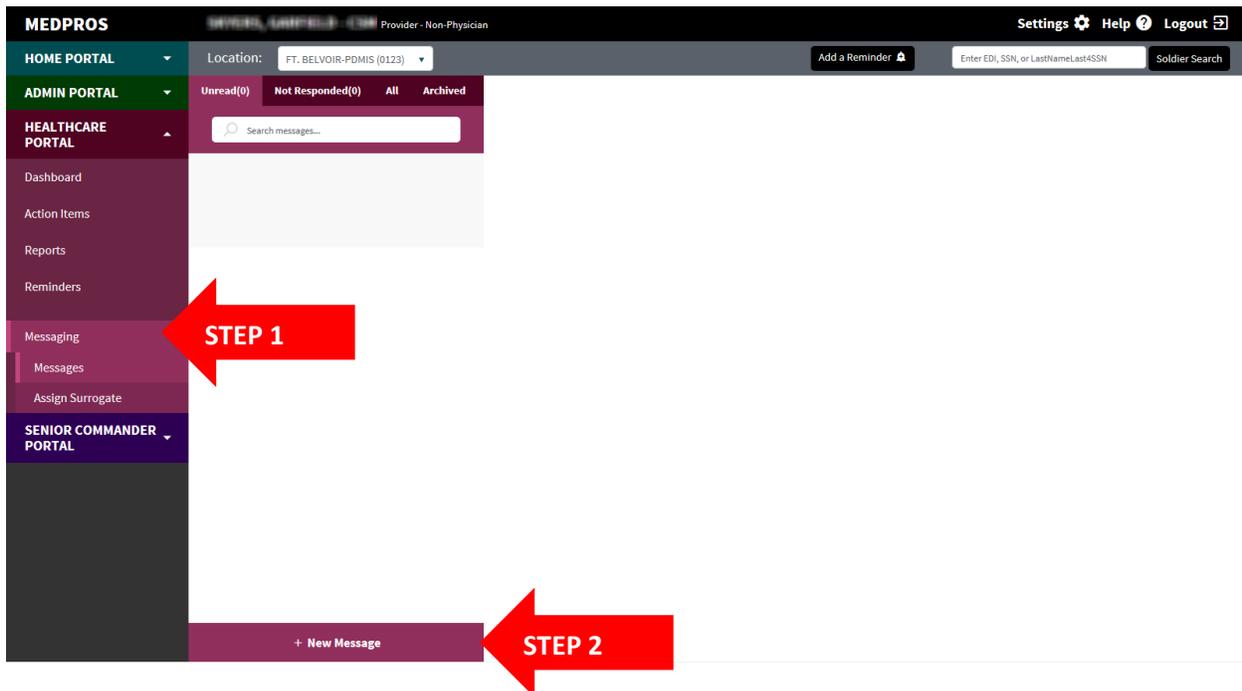
**Step 2.** Clicking on **“+ New Message”** at the bottom of the page opens the **“New Message”** box where the message is created.

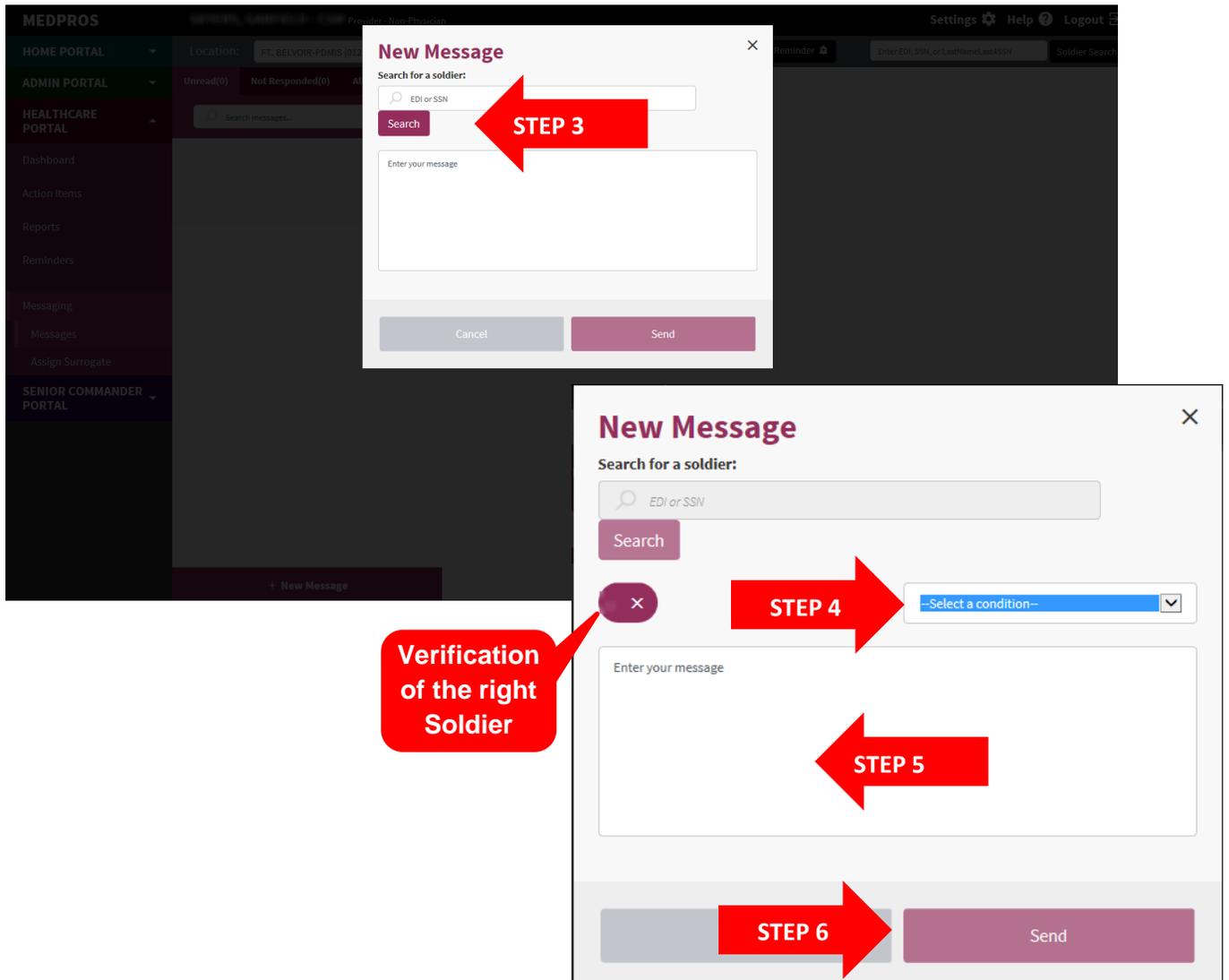
**Step 3.** Enter the **Soldier EDI or SSN** in the search box and click submit.

**Step 4.** Select a **condition** from the list of conditions in the dropdown box.

**Step 5.** **Compose message.**

**Step 6.** Click **“Send”** to send the message.





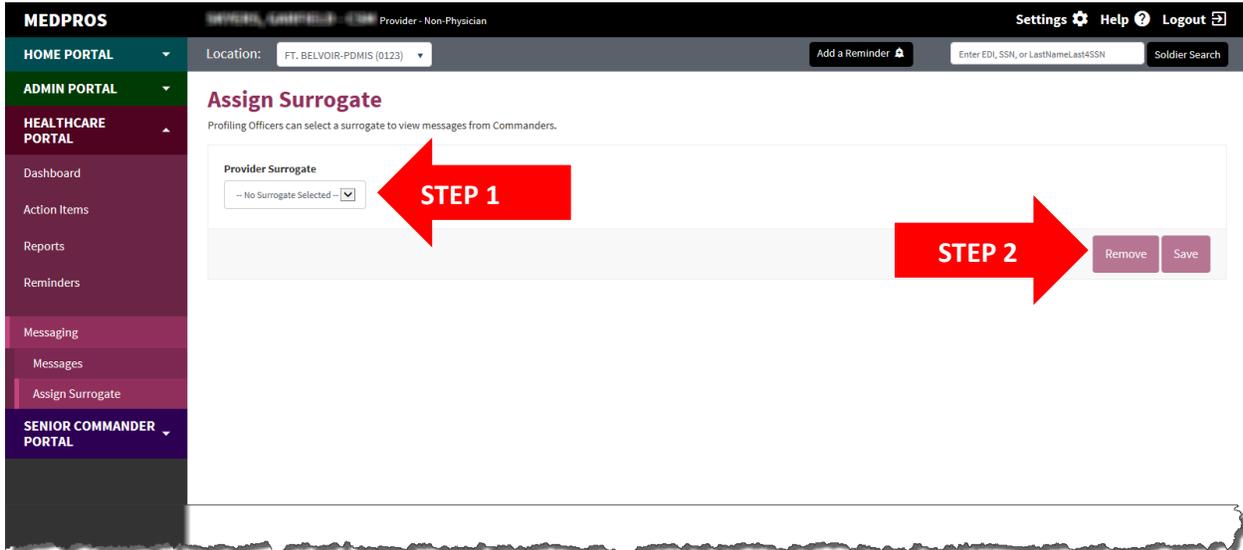
#### 4.4.5 Assigning Surrogate

There may come a time when a provider is not available to access the Medical Readiness Portal and there is correspondence between him/her and a Soldier's Commander that is relevant to the Soldier's readiness. The Surrogate feature allows another Care Manager to act in his/her place and be able to read messages sent to him/her from the Soldier's Commander.

## How to Assign / Remove Surrogate

**Step 1.** Select Surrogate from drop-down list in the “Provider Surrogate” section

**Step 2.** Click “Save” to assign surrogate or “Remove” surrogate.



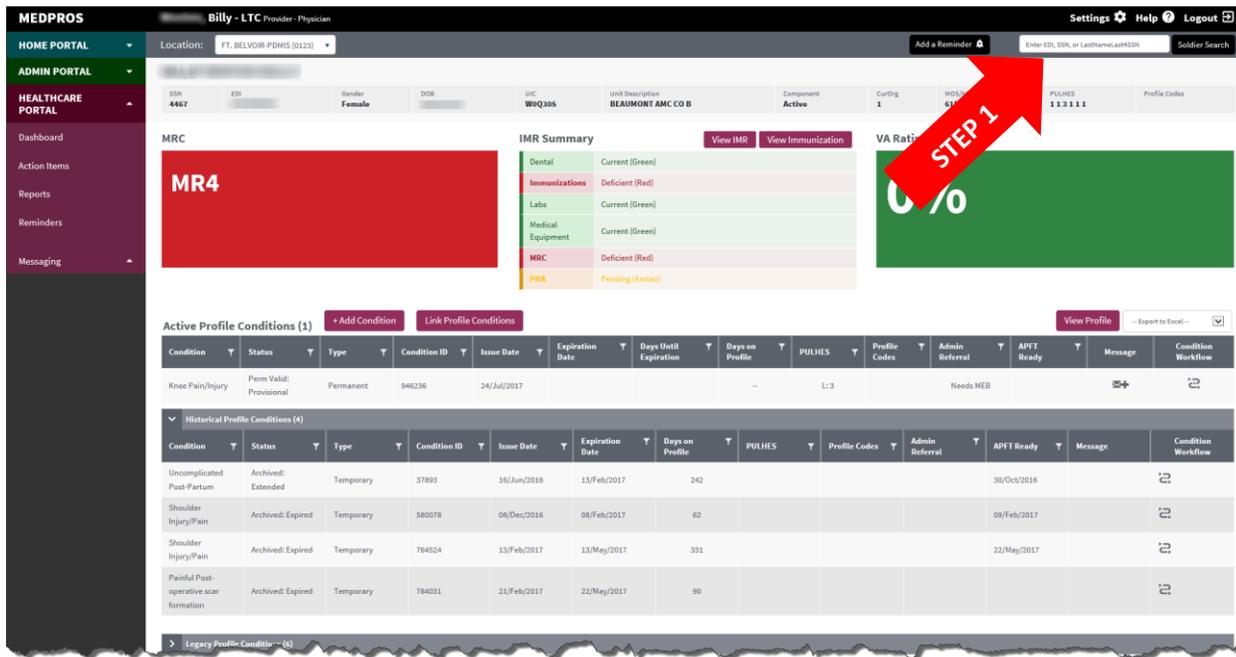
# Chapter 5. Department of Defense (DoD) Periodic Health Assessment

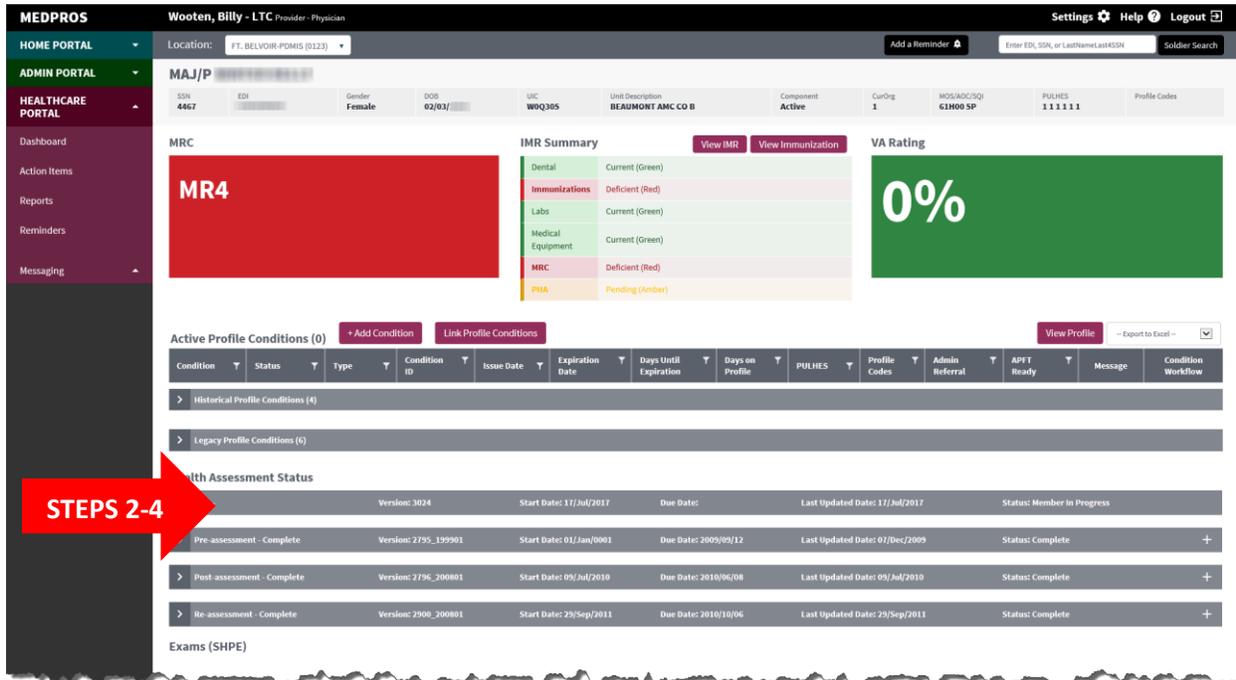
## 5.1 Accessing the DoD PHA

The DoD PHA tool is an embedded application within the Healthcare Portal. Like previous versions of the PHA, the Soldier must complete the Assessment Section before the Healthcare Team review and complete the Assessment.

The Healthcare Team (Physician, Medical Provider – Non-Physician, Behavioral Health Provider, or Record Reviewer) must locate the Soldier record first in order to access the DoD PHA. Use the steps below to locate the Soldier record and review or complete the DoD PHA.

- Step 1:** Search for the Soldier using his/her EID, SSN, or last name plus last four of SSN (Jones1234).
- Step 2:** Scroll to the Health Assessment Status section.
- Step 3:** Click on the arrow next to “PHA” to reveal current and past periodic health assessment.
- Step 4:** Select the PHA for review or completion.





Clicking the record that is to be reviewed or completed opens the DoD PHA tool window.

Every PHA visit by a Soldier is now a Readiness visit. The aim of all Medical Readiness portals is to provide transparency, foster greater communication between Commanders and Providers, and streamline readiness reporting, so Commanders can maximize the deployability of their units.

Access Health Assessments through the Soldier Record for review and action.

**\*\*See Appendix C for a matrix of inter-Service DoD PHA process flows.\*\***

## 5.2 Part B: Record Reviewer Portion

The Record Reviewer Section provides the ability to review Soldier responses (completed in Part A), check existing records for DoD IMR requirements, and provide comments for the healthcare provider who will sign the DoD PHA. The Record Reviewer section is typically completed by a nurse or medic, but can also be completed by a provider.

Any text or tables that appear in blue indicate responses submitted by the Soldier during the survey portion of the PHA. This material is provided for convenience and can be used to respond to appropriate questions.

The screenshot displays the 'Annual Periodic Health Assessment' (PHA) interface. At the top, the 'MEDPROS MHA' logo is visible, along with navigation links for 'Forms', 'Help', 'User Management', and 'Logout'. Below the logo, a header bar contains user information: 'Type SSN / EDIPN or Scan ID Card', 'Enter SSN', 'SSN: 3983', 'Name: [REDACTED]', 'Rank: PFC', 'DOB: 1983-01-19', 'UIC: 162596', and 'Gender: M'. The main content area is titled 'Annual Periodic Health Assessment' and includes tabs for 'Instructions', 'Member Portion', and 'Record Reviewer'. A 'SAVE' button is located in the top right corner of the form area. Below the tabs, there are links for 'Living Profile' and 'Enter Conditions'. The form is divided into sections, with the current section being 'PART B. RECORD REVIEW AND RECOMMENDATIONS (RECORD REVIEWER ONLY)'. Under this section, there is a sub-section titled 'I. RECORD REVIEWER INFORMATION' which contains 14 numbered fields for data entry:

- 1. Last Name: [ROMANA]
- 2. First Name: [BRIAN]
- 3. Middle Name: [ ]
- 4. Service Branch/Affiliation: [Army]
- Other (List): [ ]
- 5. Status: [ ]
- Other (List): [ ]
- 6. Title: [ ]
- Other (List): [ ]
- 7. Email: [ ]
- 8. Facility: [test]
- 9. Unit: [test]
- 10. Address: [test]
- 10. City: [test]
- 11. State: [PA]
- 12. Zip Code: [ ]
- 13. Phone (Commercial): [00000]
- 14. Date Record Review Initiated (dd/mmm/yyyy): [19/Jan/2017]

### 5.2.1 Section I: Record Reviewer Information

After logging into the healthcare portal, and accessing the completed service member portion of the DOD PHA module the record reviewer is prompted to enter personal information. Information available from the record reviewer’s credentials will auto populate into applicable fields on this page. Any fields that do not auto-populate need to be completed by the record reviewer.

**II. MEDICAL SCREENING**

1. Date of Service member's most recent PHA (dd/mmm/yyyy):   No PHA Documented

2. Service member's most recently documented height: Feet:  Inches:  Date (dd/mmm/yyyy):   No Height Documented

3. Service member's most recently documented weight: Pounds:  Date (dd/mmm/yyyy):   No Weight Documented

4. What is the Service member's most recently documented blood pressure reading?  
Date (dd/mmm/yyyy):  Systolic/Diastolic:  /   No Blood Pressure Documented

5. Does the Service member have a history of abnormal blood pressure in the past 12 months, or since their last PHA?

6. What is the date of the Service member's most recently documented cholesterol test?  
Date (dd/mmm/yyyy):   No Cholesterol Test Documented

7. (For individuals  $\geq 50$  years of age) What is the date of the Service member's most recently documented colon cancer screening?  
Date (dd/mmm/yyyy):   No Colon Cancer Screening Documented

8. List of Service member's active medications listed in their permanent medical record: (List):

9. Is there a discrepancy between the active medication record review and the Service member's self-reported list of medications? (Medications from OTH3 and MHA3)

Medications from OTH3 and MHA3:

If "Yes," list discrepancies:

10. List documented significant care the Service member has received in the past 12 months, or since their last PHA from a provider OUTSIDE the Military Health System (for example a civilian or non-military facility). This includes privately paid elective surgeries.  
List:   No Outside Care Documented

## 5.2.2 Section II: Medical Screening

**Item 1:** The record reviewer can check the date of the Soldier's most recent PHA by reviewing the Soldier's PHA history in the Healthcare Portal.

**Items 2-4:** If the Soldier is present, items 3 and 4 should be measured and recorded. If the Soldier is not present obtain the information from the electronic health record or follow component specific guidance.

**Item 5:** Complete by reviewing the Soldier's health record or by Soldier disclosure.

**Item 6:** If there is a cholesterol test result within the Soldier's health record populate the date. If no documentation is available, mark the corresponding box

**Item 7:** If the Soldier is 50 years of age or older, and there is a documented colon cancer screening in their health record populate the date. If no documentation is available, mark the corresponding box.

**Item 8:** Populate with active medications listed within the Soldier’s medical record. If no active medications are documented, mark the corresponding box.

**Item 9:** If there is a discrepancy between the medications listed in the permanent medical record and those that the Soldier has listed (in other medical designated as OTH3 and/or for the mental health assessment designated MHA 3) choose “Yes” from the drop-down and note the discrepancies in the text box.

The blue text appearing here provides the Soldier’s response to this question. If no text follows the colon, the Soldier did not provide any response.

**Item 10:** If the Soldier had had any significant medical treatment or care outside of the military health system within the past 12 months choose “Yes” from the drop-down and note the discrepancies in the text box.

Outside care from OTH5: No outside care reported.

If “Yes,” list discrepancies: had neck and GI issues

12. List documented significant care the Service member has received in the past 12 months, or since their last PHA from a provider INSIDE the Military Health System.

List:   No Inside Care Documented

13. (If Service member reported having surgery since their last PHA in DLC4) Is there documentation in the record for each surgery listed below?

CONDITION	TYPE OF SURGERY	
(List 1 from DLC5) <input type="text"/>	(List 1 from DLC5) <input type="text"/>	<input type="text"/>
(List 2 from DLC5) <input type="text"/>	(List 2 from DLC5) <input type="text"/>	<input type="text"/>
(List 3 from DLC5) <input type="text"/>	(List 3 from DLC5) <input type="text"/>	<input type="text"/>

14. (If Service member answered “Yes” in DLC10.a.) Confirm that vaccine exemptions are listed in the medical record and that Service member has documented exemption(s) in the appropriate system of record (AHLTA, ASIMS, MEDPROS, MRRS, etc.) for each vaccine listed (from DLC.10.b.).

Comments:

15. (If Service member reported allergies in IMR1) Review available medical documentation and compare with Service member responses. Document any discrepancies.

Comments (if “Discrepancies with Record”):

Service member’s reported allergies (from IMR2):

**III. OCCUPATION-SPECIFIC EXAMINATIONS**

1. (If the Service member indicated they are required to have a special operational duty physical exam in OCC2) When was the Service member’s most recently documented special operational duty physical exam (e.g., flight, jump, dive, missile, reliability program, or Special Forces, etc.)?

Date (dd/mmm/yyyy):   No Documented Exam  Record Unavailable

2. (If the Service member indicated they are enrolled in a medical surveillance/occupational health program in OCC3) When was the Service member’s most recently documented evaluation (for example: hearing conservation, radiation health, healthcare worker/hospital employee monitoring, etc.)?

Date (dd/mmm/yyyy):   No Documented Evaluation  Record Unavailable

**IV. FAMILY HISTORY AND LIFESTYLE**

The blue text appearing here provides the Soldier’s response to this question. If no text follows the colon, the Soldier did not provide any response.

**Item 11:** If there is a discrepancy between the Soldier’s listed items of outside care and any outside care found within their health record note the discrepancy in the text box.

The blue text appearing here provides the Soldier's response to this question. If no text follows the colon, the Soldier did not provide any response.

**Item 12:** List any conditions for which the Soldier may have received care within the military health system. (**Note:** this does not include care through the VA). If no such care is recorded, mark the appropriate box.

**Item 13:** If the Soldier reported having surgery since their last PHA use the drop-down box to the right of "type of surgery" to verify whether documentation is available within the health record for that condition.

**Item 14:** If the Soldier answered yes to question DLC10.a, confirm the medical documentation is available in the health record to validate their vaccine exemption.

The blue text appearing here provides the Soldier's response to this question. If no text follows the colon, the Soldier did not provide any response.

**Item 15:** If the Soldier reported allergies in survey section IMR1, confirm the medical documentation is available within their health record to validate their stated allergy or allergic reaction. List any noted discrepancies in the comment box.

### 5.2.3 Section III: Occupation-Specific Examinations

**Items 1 and 2:** If the Soldier indicated that they are required to have a special operational duty physical exam or medical surveillance occupational health program, place the date of the last exams in the box provided if available. If not, indicate this documentation is not available.

**IV. FAMILY HISTORY AND LIFESTYLE**

**Family history from LIF2, LIF3, LIF4, LIF5:**

2. To the best of your knowledge, do or did any of the following blood relatives - parents, grandparents, brothers, or sisters - ever have any of the following medical problems? Mark all that apply.

Cancer or malignancy of any kind

Heart-related conditions (high blood pressure, heart attack, heart disease, cardiac arrhythmia)

Diabetes

No/Don't Know

3. (If Cancer marked in 2) Which of the following family members has/had the history of cancer? Mark all that apply.

**FAMILY HISTORY OF CANCER**

Breast	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Colon	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Ovarian	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Prostate	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Unknown Type of Cancer	<input checked="" type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister

4. (If Heart-related conditions marked in 2) Which of the following family members has/had the history of heart-related conditions? Mark all that apply.

**FAMILY HISTORY OF HEART-RELATED CONDITIONS**

High Blood Pressure	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
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### 5.2.4 Section IV: Family History and Lifestyle

The portion containing blue text and tables in this section provides the Soldier's responses to relevant questions and should be reviewed by the record reviewer.

Cardiac Arrhythmia/Irregular Heartbeat	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Sudden Cardiac Death	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Other (List) <input type="text"/>	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Unknown	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister

5. If Diabetes marked in 2) Which of the following family members has/had the history of diabetes? Mark all that apply.

FAMILY HISTORY OF DIABETES

Type I	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Type II	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister
Unknown	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Any Grandmother	<input type="checkbox"/> Any Grandfather	<input type="checkbox"/> Any Brother	<input type="checkbox"/> Any Sister

1. Does the DD 2766 reflect the Service member's reported family history (form LIF2-5)?

If "No" describe needed update(s):

2. (For males who identify "I am at risk" in (LIF20) is there a record of the Service member receiving a syphilis, chlamydia and gonorrhea test in the past 12 months, or since their last PHA?

**V. WOMEN'S HEALTH**

1. (If Service member reported she is or may be pregnant OR delivered in past 6 months in WOM1) The Service member indicated a possible pregnancy, pregnancy, or recent delivery. Does the Service member have an appropriate profile and/or waiver in accordance with Service policy?

**Items 1 and 2 (below the family history chart):** Check to see if the DD form 2766 reflects the service members reported family history. If it does not, list the discrepancies in the available box to the right of question 1 at the bottom of the page. For question 2, for males who identify at risk, check the Soldier's health record to see if appropriate testing has been completed within the past 12 months or since their last PHA.

## 5.2.5 Section V: Women’s Health – see below

**V. WOMEN'S HEALTH**

1. (If Service member reported she is or may be pregnant OR delivered in past 6 months in WOM1) The Service member indicated a possible pregnancy, pregnancy, or recent delivery. Does the Service member have an appropriate profile and/or waiver in accordance with Service policy?

2. Review the appropriate health records associated with this pregnancy and summarize, noting if the Service member has been evaluated for any occupational health concerns.

Notes:

3. (If Service member reported she has not had a total hysterectomy in WOM2) What is the date and result of the Service member's most recent Pap test?

Date (dd/mmm/yyyy):

4. (If Service member is age 50 or greater) What is the date of the Service member's most recently documented mammogram?

Date (dd/mmm/yyyy):   No Documented Mammogram

5. (If Service member is or may be pregnant (WOM1), and/or is a female who identifies "At Risk" (LJF20) Is there a record of the Service member receiving a syphilis, chlamydia, and gonorrhea test in the past 12 months, or since her last PHA?

**VI. DEPLOYMENT-RELATED HEALTH ASSESSMENTS**

1. (If Dep3 date is within past 3 years' Service member indicated a return from deployment within the past 3 years. What is the status of each of the post-deployment health assessments?

ASSESSMENT TYPE	
Post-Deployment Health Assessment (+/- 30 days of redeployment), DD Form 2796	<input type="text"/>
Post-Deployment Health Re-Assessment (90-180 days after return from deployment), DD Form 2900	<input type="text"/>
Mental Health Assessment (180 days to 18 months after return from deployment), DD Form 2978	<input type="text"/>
Mental Health Assessment (18 to 30 months after return from deployment), DD Form 2978	<input type="text"/>

2. (If DEP4 marked "YES") Service member indicated a scheduled deployment in the next 120 days. Has the Service member completed the Pre-Deployment Health Assessment (DD Form 2795) for their upcoming deployment (if required)?

## 5.2.6 Section V: Women’s Health

**Item 1:** If the Soldier reported possible or confirmed pregnancy, does the Soldier have an appropriate profile documented with e-Profile?

**Item 2:** Review the appropriate health records associated with pregnancy, noting if the Soldier has been evaluated for any occupational health concerns.

**Item 3:** If the Soldier reported having a total hysterectomy, what is the date and result of the Soldier's most recent Pap smear test?

**Item 4:** If the Soldier is age 50 or greater, is there a date of the Soldier’s most recently documented mammogram? If no documentation is available, click the box to the right indicating no documented mammogram.

**Item 5:** If the Soldier is or may be pregnant, or has identified as at risk of pregnancy, is there any documentation noting the Soldier received appropriate testing within the past 12 months (or since last PHA)?

## 5.2.7 Section VI: Deployment-Related Health Assessments

**Item 1:** If the Soldier reported a deployment date within the past three years, validate the status of required post-deployment/mental health assessment by verifying the date of completion in the Healthcare Portal.

**Item 2:** If the Soldier is scheduled to deploy within the next 120 days indicate in the drop-down box whether or not the Soldier has completed a pre-deployment health assessment (DD Form 2795).

**VII. INDIVIDUAL MEDICAL READINESS**

Deployment-Limiting Medical & Dental Conditions

1. (For Army or Air Force Members only) Does the Service member have a permanent profile (if Army), or an Assignment Limitation Code C (if Air Force)?

Yes

2. (If answered "Yes" or "Yes, but" to DLC 12.a.) How many months in the past year has the Service member been in temporary duty / temporary profile / light duty / limited duty / LIMDU / MEDHOLD / NMA / MRR / LOD status?

Number of Months:  Date Temporary Situation Expires (dd/mm/yyyy):   No Record of Temporary Situation

Dental Assessment

3. When was the Service member's most recently documented dental exam?

Date (dd/mm/yyyy):  Classification:   No Dental Exam Documented

Immunizations

4. Is the Service member current on all required immunizations in the immunization tracking system?

No  If "No" List Overdue Immunization(s):

Individual Medical Equipment

5. (If Service member reported wearing corrective lenses in IMR4) Is the Service member current with Service-specific requirements for glasses and gas mask inserts?

(List):

Medical Readiness & Laboratory Studies

6. Does the Service member have the following laboratory tests documented in their permanent medical record?

TEST TYPE	Yes/No
Human Immunodeficiency Virus (HIV) test within the PAST 24 MONTHS	<input type="button" value="v"/>
G6PD results on file	<input type="button" value="v"/>
Blood type and Rh on file	<input type="button" value="v"/>

## 5.2.8 Section VII: Individual Medical Readiness

**Item 1:** Indicate whether the Soldier has a permanent profile or an assignment limitation code utilizing the drop-down box.

**Item 2:** List the number of months the Soldier has been on a temporary light duty or limited profile. If none, mark the box to the right indicating no record of temporary situation (i.e. profile). For Soldier's, this information can be validated by clicking on the **living profile** button in the top right corner of the screen.

**Item 3:** List the Soldier's most recently documented dental exam and associated classification. If there is no documentation available, use the box to the right to check no dental exam documented.

**Item 4:** Verify the Soldier’s required immunization status. For an Army Soldier’s this can be done via the Soldier Record in the Healthcare Portal. Use the box to the right to list any the outstanding immunization requirement.

**Item 5:** If the Soldier wears corrective lenses, confirm the Soldier has gas mask inserts and two pair of glasses. Use the drop-down box and box to indicate their appropriate status.

**Item 6:** Use the drop-down boxes located to the right of each of the laboratory tests to indicate whether the service member has each test on file.

Blood type and Rh on file

DNA test on file

**VIII. RESERVE COMPONENT (GUARD AND RESERVE ONLY)**

1. *If Service member indicated they have a VA disability rating in RE56) What is the Service member's VA disability rating?*

Percent VA Disability Rating (%):   No Documented VA Disability Rating (%)

**IX. ADDITIONAL RECORD REVIEWER COMMENTS**

1. *If the record review indicates the potential need for provider notification or referral, mark below. Consult with a provider as necessary and annotate action(s) taken under "comments" in Question 2. Mark all that apply.*

Provider Notified  Command Notified  Notification is NOT required

2. *Provide any additional comments about this record review that need to be forwarded to the Health Care Professional completing PART C (Provider Review, Interview, Assessment, and Recommendations) of this form.*

Comments:

**IMR Status Chart**

IMR Element	Ready	Not Ready
Deployment-Limiting Medical Conditions	Cannot Compute	
Dental Readiness	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Immunization Status	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Medical Readiness Laboratory Studies	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Individual Medical Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**X. RECORD REVIEWER DIGITAL SIGNATURE AND COMPLETION DATE**

certify this section has been completed.

Record Reviewer Digital Signature:

Date Record Review Completed:

### 5.2.9 Section VIII: Reserve Component (Guard and Reserve Only)

**Item 1:** If the Soldier has a VA disability rating this percentage should auto populate within the box. If not, and the Soldier tells you that they have a rating, note the percentage in the text box. If there is no disability rating populated and the Soldier confirms, check the box to the right stating no documented VA disability rating.

### 5.2.10 Section IX: Additional Record Reviewer Comments

**Item 1:** If the record reviewer feels that there is a need to notify a provider or the Soldier’s commander, mark the appropriate box. Each Army component provides the protocol to be followed if a notification is indicated.

**Item 2:** Here, the record reviewer can make a short and concise note of issues that the record reviewer feels should be relayed to the provider. For example, if the Soldier’s record indicates that they recently had surgery and they have no profile within e- profile a comment may state; "neck surgery 2 months ago -no profile found".

This section is *not* intended to provide significant details or make an assumed diagnosis. It is simply to alert the completing provider of items they may want to address with the Soldier.

**IMR Status Chart:** This will auto populate as ready or not ready for each row based on system data.

### 5.2.11 Section X: Record Reviewer Digital Signature and Completion Date

Once complete, the record reviewer checks the box to indicate the section has been completed. This will provide a CAC-based signature and automatically populate the date. (**Note:** Once this section is signed it cannot be amended.)

The screenshot displays the 'PART C. HEALTH CARE PROVIDER' section of the Healthcare Portal. The form is titled 'PART C. HEALTH CARE PROVIDER (HCP ONLY)(Provider Review, Interview, Assessment and Recommendations)'. It contains the following fields:

- 1. Indicate which assessment(s) you are completing: [Dropdown menu]
- I. MENTAL HEALTH ASSESSMENT (MHA) PROVIDER INFORMATION
  - 2. First Name: Laurie
  - 3. Middle Name: [Empty]
  - 4. Service Branch: [Dropdown menu]
  - 5. Status: [Dropdown menu]
  - 6. Select the appropriate title: [Dropdown menu]
  - 7. Email: [Text field]
  - 8. Facility: [Text field]
  - 9. Unit: [Text field]
  - 10. Address: [Text field]
  - 10. City: [Text field]
  - 11. State: [Dropdown menu]
  - 12. Zip Code: [Text field]
  - 13. Phone (Commercial): [Text field]
  - 14. Date MHA Provider Review Initiated (dd/mmm/yyyy): 23/Mar/2017

## 5.3 Part C Behavioral Health Portion

\*If a behavioral health provider is available, they can complete and sign just the mental health assessment portion of the DoD PHA with the Soldier. If not, the healthcare provider that will complete the rest of the DoD PHA may complete the behavioral health portion of the PHA, as well.

All healthcare providers (NOT including Behavioral Health providers) must have completed the **DoD Mental; Health Assessment (MHA) training** and have the MHA certificate loaded into DTMS and as part of their provider file in order to sign off the MHA section within the PHA.

### 5.3.1 Section I: Mental Health Provider (MHA) Provider Information

Information available from the credentials for the user completing this section will auto-populate into applicable fields on this page. Any fields that do not auto-populate need to be completed by the record reviewer.

**II. MENTAL HEALTH ASSESSMENT (Corresponds with Service Member Section VI. Behavioral Health (MHA))**

Service member reports most recent deployment was to (Country): , and has deployed:  times before in the past five years.

1. Major life stressor as reported on Service member (MHA1.a.).

a. Did Service member mark they have a concern or a difficulty with a major life stressor?

If "Yes" list Service members concern(s):

b. If "Yes," ask additional questions to determine level of problem:

c. Consider need for referral. Referral indicated?

2. Address concerns as reported in Service member questions (MHA2 and MHA3).

Service member question	Service member's response:	Provider comments (if indicated):
History of mental health care	<input type="text" value="N/A"/>	<input type="text"/>
Medications	<input type="text" value="N/A"/>	<input type="text"/>

3. Alcohol use as reported in Service member question (MHA4).

a. Service member's AUDIT-C screening score was:  If score between 0-4 (men) or 0-3 (women) nothing required, go to 10  Not answered by Service member

Number of drinks per week:  Maximum number of drinks per occasion:

### 5.3.2 Section II: Mental Health Assessment

After Section I of the Mental Health Assessment, **items will be highlighted yellow** if they must be addressed with the provider.

Alcohol Use Intervention Matrix		
Assess Alcohol Use	AUDIT-C Score (Men 5 - 7) Women (4 - 7)	AUDIT-C Score (Men and Women ≥ 8)
Alcohol use WITHIN recommended limits: Men: ≤ 14 drinks per week OR ≤ 4 drinks on any occasion Women: ≤ 7 drinks per week OR ≤ 3 drinks on any occasion	Advise patient to stay below recommended limits	Refer if indicated for further evaluation AND conduct BRIEF counseling*
Alcohol use EXCEEDS recommended limits: Men: >14 drinks per week OR > 4 drinks on any occasion Women: > 7 drinks per week OR > 3 drinks on any occasion	Conduct BRIEF counseling* AND consider referral for further evaluation	

\* BRIEF counseling: Bring attention to elevated level of drinking; Recommend limiting use or abstaining; Inform about the effects of alcohol on health; Explore and help/support in choosing a drinking goal; Follow-up referral for specialty treatment, if indicated.

b. Referral indicated for evaluation:  State reason if AUDIT-C Score was 8+:

4. PTSD screening as reported in Service member question (MHA5).

a. Did Service member mark yes on two or more of questions (MHA5.a. through MHA5.d)?

b. If yes, Service member's responses to questions (MHA5.e. through MHA5.u.) resulted in a PCL-C score of (X), and the Service member's response to level of impairment with life events (MHA5.v.) is indicated in the table below.

Enter PCL-C Score:   (MHA5.e.) through (MHA5.v.) were not answered or are incomplete

The **Alcohol Use Intervention Matrix** assigns an audit C score based on the Soldier's consumption responses. The matrix then gives the provider guidance to address the noted score with the Soldier whether or not a referral is indicated. If no other positive responses are noted, the provider will go to the next section.

Based on the PCL-C score, the Service member's level of functioning, and your exploration of responses, follow the guidance below.

Post-Traumatic Stress Disorder Intervention Matrix				
Self-Reported Level of Functioning	PCL-C Score < 30 (Sub-Threshold or no Symptoms)	PCL-C Score 30 - 39 (Mild Symptoms)	PCL-C Score 40 - 49 (Moderate Symptoms)	PCL-C Score ≥ 50 (Severe Symptoms)
<input type="checkbox"/> Not Difficult at All or Somewhat Difficult	No Intervention	Provide PTSD Education		Consider referral for further evaluation AND provide PTSD education*
<input type="checkbox"/> Very Difficult to Extremely Difficult	Assess need for further evaluation AND provide PTSD education*	Consider referral for further evaluation AND provide PTSD education*		Refer for further evaluation AND provide PTSD education*

\* PTSD Education = Reassurance/supportive counseling, providing literature on PTSD, encourage self-management activities, and counsel Service member to seek help for worsening symptoms.

c. Referral indicated?

5. Depression screening as reported in Service member question (MHA6).

a. Did Service member mark "More than half the days," or "Nearly every day" on question (MHA6.a. or MHA6.b.)?

b. If yes, Service member's responses to questions (MHA6.a. - MHA6.h.) resulted in a PHQ-8 score of (X), and the Service member's response level of impairment with life events (MHA6.i.) is indicated in the table below.

Enter PHQ-8 Score:   (MHA6.c.) through (MHA6.i.) were not answered or incomplete

The **Post Traumatic Stress Disorder Intervention Matrix** assigns a PCL-C score based on the Soldier's responses. The matrix then gives the provider guidance to

address the noted score with the Soldier and whether or not a referral is indicated. If no other positive responses are noted, the provider will go to the next section.

Based on the PHQ-8 score, Service member's level of functioning, and exploration of responses, follow the guidance below.

Depression Intervention Matrix					
Self-Reported Level of Functioning	PHQ-8 Score 1 - 4 (No Symptoms)	PHQ-8 Score 5 - 9 (Sub-Threshold Symptoms)	PHQ-8 Score 10 - 14 (Mild Symptoms)	PHQ-8 Score 15 - 18 (Moderate Symptoms)	PHQ-8 Score 19 - 24 (Severe Symptoms)
<input checked="" type="checkbox"/> Not Difficult at All or Somewhat Difficult	No Intervention	Depression Education*		Consider referral for further evaluation AND provide depression education*	Consider referral for further evaluation AND provide depression education*
<input type="checkbox"/> Very Difficult to Extremely Difficult	Assess need for further evaluation AND provide depression education*		Consider referral for further evaluation AND provide depression education*	Consider referral for further evaluation AND provide depression education*	Refer for further evaluation AND provide depression education*

\*Depression Education = Reassurance/supportive counseling, provide literature on depression, encourage self-management activities, and counsel Service member to seek help for worsening symptoms.

c. Referral indicated?

---

6. Suicide risk evaluation.

a. Ask "Over the PAST MONTH, have you been bothered by thoughts that you would be better off dead or of hurting yourself in some way?"

b. If 6.a. was yes, ask: "How often have you been bothered by these thoughts?"

c. If 6.a. was yes, ask: "Have you had thoughts of hurting yourself?"

d. Ask "Have you thought about how you might actually hurt yourself?"

If Yes, how?

The **Depression Intervention Matrix** assigns a PHQ score based on the Soldier's responses. The matrix then gives the provider guidance to address the noted score with the Soldier and whether or not a referral is indicated. If no other positive responses are noted, the provider will go to the next section.

**Item 6.a.:** The provider is **required** to ask every Soldier if, "Over the past month, have you been bothered by thoughts that you would be better off dead or hurting yourself in some way?" If there is a positive response, the provider will then select appropriate answers from the drop-down menu for questions 6 b, c, and d.

e. Ask "There is a big difference between having a thought and acting on a thought. How likely do you think it is that you will act on these thoughts about hurting yourself or ending your life over the next month?"

f. Ask "Is there anything that would prevent or keep you from harming yourself?"

If Yes, what?

g. Ask "Have you ever attempted to harm yourself in the past?"

If Yes, how?

h. Conduct further risk assessment (e.g., interpersonal conflicts, social isolation, alcohol/substance abuse, hopelessness, severe agitation/anxiety, diagnosis of depression or other psychiatric disorder, recent loss, financial stress, legal disciplinary problems, or serious physical illness).  
Comments:

i. Does Service member pose a current risk of harm to self?

7. Violence/harm risk evaluation.

a. Ask "Over the past month have you had thoughts or concerns that you might hurt or lose control with someone?"

If yes, ask additional questions to determine extent of problem (target, plan, intent, past history).  
Comments:

b. Does the member pose a current risk to others?

If no, briefly state reason:

**Item 7.a.:** The provider is **required** to ask every Soldier if, "Over the past month have you had thought or concerns that you might hurt or lose control with someone?" If there is a positive response, the provider will then answer the remaining questions in item 7.

8. Service member issues with this assessment (mark as appropriate):

Service member declined to complete this form  Service member declined to complete interview/assessment

Assessment and Referral: After review of the Service member's response and interview with the Service member, the assessment and need for further evaluation is indicated in blocks 9 through 12.

9. Summary of Provider's identified concerns needing referral(s) (Mark all that apply):

a. None Identified	<input type="checkbox"/>	g. Depression Symptoms	<input type="text"/>
b. Physical Health	<input type="text"/>	h. Environmental/Work Exposure	<input type="text"/>
c. Dental Health	<input type="text"/>	i. Risk of Self-Harm	<input type="text"/>
d. Mental Health Symptoms	<input type="text"/>	j. Risk of Violence	<input type="text"/>
e. Alcohol Use	<input type="text"/>	k. Other (List):	<input type="text"/>
f. PTSD Symptoms	<input type="text"/>		<input type="text"/>

10. Recommended referral(s) (Mark all that apply even if the Service member does not desire):

a. Primary Care, Family Practice, Internal Medicine	<input type="text"/>	f. Case Manager/Care Manager	<input type="text"/>
b. Behavioral Health in Primary Care	<input type="text"/>	g. Substance Abuse Program	<input type="text"/>
c. Mental Health Specialty Care	<input type="text"/>	h. Other, list:	<input type="text"/>
d. Dental	<input type="text"/>		<input type="text"/>
e. Other Specialty Care:			
Audiology	<input type="text"/>	TBI/Rehab Med	<input type="text"/>
Dermatology	<input type="text"/>	Podiatry	<input type="text"/>
OB/GYN	<input type="text"/>	Other	<input type="text"/>

**Item 8:** The provider will select the appropriate referral that he or she feels is necessary based on Soldier responses. If no referrals are needed, check the box in 9.a.

11. Comments

12. Address requests as reported on Service member questions 7 through 10 (in Service Member Section VI, Behavioral Health)

Service Member Question	Comments (If Indicated)
Request medical appointment	
Request Information on stress/emotional/alcohol	
Family/Relationship concern assistance	
Chaplain/Counselor visit request	

13. Supplemental services recommended/information provided.

<input type="checkbox"/> Appointment Assistance:		<input type="checkbox"/> Family Support
<input type="checkbox"/> Contract Support:		<input type="checkbox"/> Military One Source
<input type="checkbox"/> Community Service:		<input type="checkbox"/> TRICARE Provider
<input type="checkbox"/> Chaplain		<input type="checkbox"/> VA Medical Center or Community Clinic
<input type="checkbox"/> Health Education and Information		<input type="checkbox"/> Veteran's Center
<input type="checkbox"/> Health Care Benefits and Resources Information		<input type="checkbox"/> In Transition
<input type="checkbox"/> Other (List):		

**Item 11:** The provider can place comments here, as needed.

**Item 12:** Address any requests on the part of the Soldier in item 12.

**Item 13:** Allows the provider to annotate any supplemental services that were recommended at the time of the MHA.

I hereby certify that the Mental Health Assessment process has been completed.

Mental Health Assessment (MHA) Provider Digital Signature (Sign if completing ONLY PART C, Section II, Mental Health Assessment portion of the PHA):

Behavioral Health Provider Digital Signature: Date Behavioral Health Completed:

STOP HERE IF YOU ARE A MENTAL HEALTH ASSESSMENT PROVIDER COMPLETING ONLY THE MHA SECTION OF THE PHA.

**At the end of the MHA section,** the provider will check the box indicating that the mental health assessment process has been completed. The provider will then click the **Authenticate/Sign button** which will populate a CAC-based signature and populate the date.

**\*Note:** If a Behavioral Health Provider conducts this part of the assessment, he/she will stop at this point to allow the Healthcare Provider to complete the rest of the assessment

The screenshot shows the 'Annual Periodic Health Assessment' interface. At the top, there is a header with user information: 'Type SSN / EDIPN or Scan ID Card', 'Enter SSN', 'SSN: 9653', 'Name: DYSON STEPHAN ADAM', 'Rank: SPC', 'DOB: 1990/05/21', 'UIC: BRLLL', and 'Gender: M'. Below this is a yellow navigation bar with tabs for 'Instructions', 'Member Portion', 'Record Reviewer', 'Behavioral Health (MHA)', and 'Health Care Provider'. A 'SAVE' button is on the right. Below the tabs are links for 'Living Profile' and 'Enter Conditions'. The main content area is titled 'Questions and Answers' and contains section 'III. PERIODIC HEALTH ASSESSMENT (PHA) PROVIDER INFORMATION'. This section includes 14 numbered fields: 1. Last Name (FONTAINE), 2. First Name (Laurie), 3. Middle Name, 4. Service Branch (dropdown), 5. Status (dropdown), 6. Select the appropriate title (dropdown), 7. Email, 8. Facility, 9. Unit, 10. Address, 10. City, 11. State (dropdown), 12. Zip Code, 13. Phone (Commercial), and 14. Date HCP Review Initiated (dd/mm/yyyy) (20/Mar/2017).

## 5.4 Part C: Health Care Provider Portion

The final portion of the PHA is for the healthcare provider that will complete and ultimately sign the DOD PHA.

**NOTE:** The PHA will **NOT** create any referrals, notify personnel, or supply information to any dataset or system. The PHA is a screening tool and should **inform** providers and screened Soldiers of actions that may need to be addressed.

### 5.4.1 Section III: Periodic Health Assessment (PHA) Provider Information

Items one through four will auto-populate from the provider's credentials. The provider will then complete numbers five through fourteen with the appropriate information.

IV. PERIODIC HEALTH ASSESSMENT PROVIDER RECOMMENDATIONS & REFERRAL
<p>Item flagged. Consider for referral on Asthma</p> <p>Service member exceeds recommended physical activity range of 150-300 min/week and may be at risk for injury.</p> <p>Service member may be at risk for overuse of dietary supplements</p> <p>Service member is at risk for sleep-related impairment</p> <p>If aspirin is not listed, determine if aspirin use is appropriate.</p> <p>Discrepancies noted between Service members reported outside care and the record</p> <p>Service member is overdue for special operational duty physical</p> <p>Service member is overdue for medical surveillance/occupational health evaluation</p> <p>Service member is missing at least one required immunization.</p> <p>Review VA disability claim details for potential deployment limiting conditions. Note that VA disability rating may or may not equate to Individual Medical Readiness.</p> <p>Self-reported disability percent does not equal documented disability percent.</p>
<p>1. Provider concerns with this assessment (mark as appropriate)</p>
<p><input type="checkbox"/> No issues or concerns identified. (Skip to Section V. Summary &amp; Comments)</p> <p><input type="checkbox"/> Issue or concerns identified after review of Service member responses, medical documentation, and Mental Health Assessment. (Continue)</p> <p><input type="checkbox"/> Issue or concerns identified after review of Service member responses, medical documentation, Mental Health Assessment, and person-to person (or face-to-face) Service member interview. (Continue)</p>

### 5.4.2 Section IV: Periodic Health Assessment Provider Recommendations & Referral

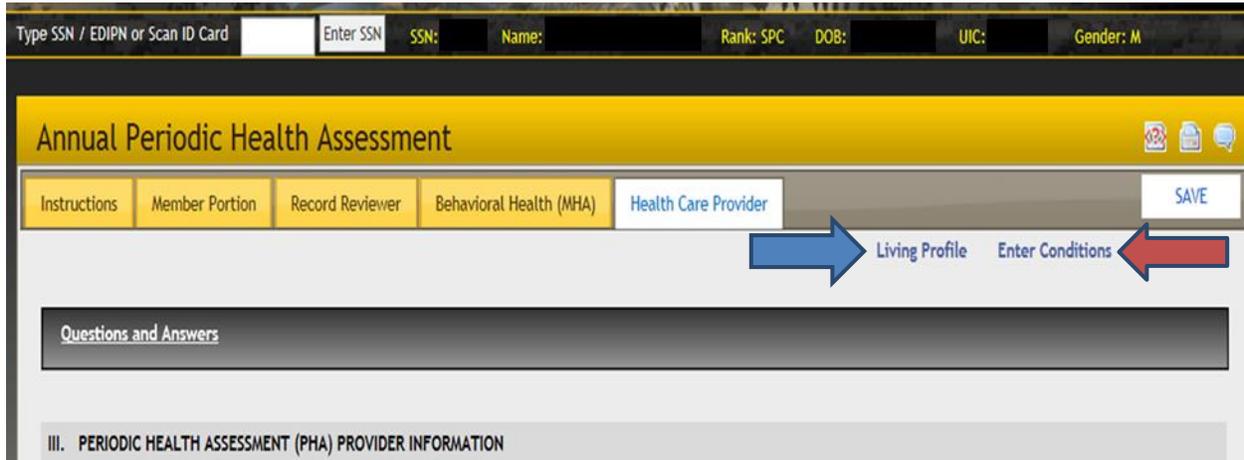
Prior to item 1, the blue text (will appear only if applicable) indicates any concerns or issues Identified from the Soldier's responses in the self-assessment section (Part A) and/or from any abnormalities identified during the Record Reviewer input (Part B).

**The provider completing this section should review the Record Reviewer pages for pertinent positive responses and additional comments.** Written comments from the record reviewer and behavioral health provider are found by reviewing their respective sections.

The PHA utilizes the latest United States Preventive Task Force (USPTF) guidelines for individual preventive healthcare recommendations as well as the American Heart Association/American College of Cardiology (AHA/ACC) for cardiovascular risk assessment. You can find further information on these guidelines by visiting the following webpages:

- USPTF: <https://epss.ahrq.gov/PDA/widget.jsp>
- AHA/ACC: <http://www.cvriskcalculator.com>

**Item 1:** Select the appropriate box indicating any concerns as appropriate.



When the provider is reviewing listed or flagged items in the summary list, a current temporary or permanent profile should prompt the provider to go to the top right of the screen and click the **Living Profile** → tab to see all existing profiles. All permanent profiles are to be reviewed for validity during every PHA encounter. If the provider feels a new profile is warranted, the provider will click the **Enter Conditions** ← tab to generate a new profile within the eProfile module. Note: See e-Profile section regarding updating profiles.

**Items 2 and 3:** Address any identified concerns and/or referrals from the options list within the drop-down menus.

### 5.4.3 Section V: Summary and Comments

**Item 1:** Select PHA categories as necessary where additional comments need to be provided.

**Item 2:** Annotate any comments that are not appropriate for any categories in Item 1 in the supplied text box.

2. Provider Comments:

**VI. INDIVIDUAL MEDICAL READINESS DISPOSITION DETERMINATION**

DLC	<input type="text" value=""/>	<input type="checkbox"/> FULLY MEDICALLY READY. (Service member is current in PHA (completed), Dental Readiness Assessment classified as DRC 1 or 2, immunization status, medical readiness and laboratory studies, individual medical equipment; and without any deployment-limiting medical conditions.)
DEN	<input type="text" value=""/>	<input type="checkbox"/> PARTIALLY MEDICALLY READY. (Service member is lacking one or more immunizations, medical readiness laboratory studies, and/or individual medical equipment.)
IMM	<input type="text" value=""/>	<input type="checkbox"/> NOT MEDICALLY READY. (Service member has a chronic or prolonged deployment-limiting medical or mental condition. These conditions may also include hospitalization, recovery, or rehabilitation time from serious illness or injury, and/or individuals in DRC 3.)
LAB	<input type="text" value=""/>	<input type="checkbox"/> MEDICAL READINESS INDETERMINATE. (Inability to determine the Service member's current health status because of missing health information such as a lost medical record, an overdue PHA, and/or being in DRC 4.)
ME	<input type="text" value=""/>	<input type="checkbox"/> Service member has separated or retired; medical readiness determination NOT required.

KEY: DLC - Duty Limiting Condition, DEN - Dental, IMM - Immunizations, LAB - Laboratory, ME - Medical Equipment  
Reference: DoDI 6025.19, Individual Medical Readiness (IMR), June 9, 2014

**VII. CERTIFICATION AND CODING**

I hereby certify that the Periodic Health Assessment has been completed  This visit is ICD 10 coded by DOD\_0225

**VIII. PERIODIC HEALTH ASSESSMENT (PHA) PROVIDER DIGITAL SIGNATURE AND COMPLETION DATE**

Health Care Provider Digital Signature: Date HCP Completed:

STOP HERE IF YOU ARE A MENTAL HEALTH ASSESSMENT PROVIDER COMPLETING ONLY THE MHA SECTION OF THE PHA.

[Print Record](#) [User's Form List](#)

### 5.4.4 Section VI: Individual Medical Readiness Disposition Determination

Select ready or not ready from the drop-down list for each of the elements listed in the left-hand column.

The provider will then select a medically ready status from the items on the right based on the definitions provided. **These are impressions of the clinician at the time of DoD PHA only with the information that is available. These blocks DO NOT FEED any personnel readiness or deployment systems.**

### 5.4.5 Section VII: Certification and Coding

Check the box certifying that the periodic health assessment has been completed and the box indicating the visit is ICD 10 coded.

### 5.4.6 Section VIII: Periodic Health Assessment Provider Digital Signature and Completion Date

Click “Authenticate & Sign” to create a credential-based signature and to populate the completion date.

The PHA needs to also be recorded in the service component electronic health record (EHR).

For active duty, this will entail a cut and paste feature of the provider summary and any referrals into AHLTA/Genesis. For the reserve component, (Army Guard and Reserve) a copy of the DoD PHA will be placed into HRR based on component guidance.

**Suggested improvements.** Users are invited to send comments and suggested improvements directly to the Chief, G-37 Medical Readiness via email to USARMY NCR HQDA OTSG List OTSG MEDCOM G37 Med Readiness ([usarmy.ncr.hqda-otsg.list.otsg-medcom-g37-med-readiness@mail.mil](mailto:usarmy.ncr.hqda-otsg.list.otsg-medcom-g37-med-readiness@mail.mil)).

## Glossary

### Abbreviations

**APD**

Army Publishing Directorate

**CAC**

Common Access Card

**COCOM**

Combatant Commander

**CPAM**

Command Portal Access Manager

**DHA**

Defense Health Agency

**DL**

Deployment Limitation

**DoD**

Department of Defense

**DoDID**

Defense Identification Number

**DRUs**

Direct Report Units

**EDIPI**

Electronic Data Interchange Personal Identifier

**EXORD**

Execution Order

**FORSCOM**

Forces Command

**FRAGORD**

Fragmentary Order

**HQDA**

Headquarters Department of the Army

**IDES**

Integrated Disability Evaluation System

**IMR**

Individual Medical Readiness

**JKO**

Joint Knowledge Online

**MAM**

Master Access Manager

**MAR2**

Military Occupational Specialty Administrative Retention Board Review

**MEDPROS**

Medical Protection System

**MNR**

Medically Not Ready

**MODS**

Medical Operational Data System

**MOS**

Military Occupational Specialty

**MR**

Medical Readiness

**MRC**

Medical Readiness Classification

**OTSG**

Office of The Surgeon General

**PHA**

Periodic Health Assessment

**SSN**

Social Security Number

**UIC**

Unit Identification Code

**UM**

User Management

## Appendix A - Healthcare Portal System Roles

Health Care Portal Roles	Role Description	Legacy Role Equivalent
<b>Provider Support Staff</b>	Can view and draft profile conditions, create and view health assessments, and run healthcare related reports.	Provider Support Staff
<b>Provider - Non-Physician</b>	(Optometrists, Chiropractors, Nurse Practitioners, Nurse Midwife, Occupational Therapists, Physician Assistants, Physical Therapists, Licensed Clinical Psychologists, and Licensed Clinical Social Worker) can view, initiate, expire, and submit temporary and permanent profiles, view Individual Medical Readiness (IMR), review action items, review and complete Heath Assessments, exchange messages with Commanders, and apply first signature and V code to permanent profile conditions.	Profiling Officer - Non-Physician
<b>Provider – Physician</b>	(Physicians, Dentists, Podiatrists, and Audiologists) can view, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), review action items, review and complete Heath Assessments, exchange messages with Commanders, and apply first or second signatures and the V profile code to permanent profile conditions.	Profiling Officer - Physician
<b>Profiling Approval Authority</b>	Can view, initiate, expire, and approve profile conditions, view Individual Medical Readiness (IMR), review action items, review and complete Heath Assessments, exchange messages with Commanders, apply first or second signatures to profile conditions, S, V, W, X, and Y profile code and approve P3/P4 profile conditions. The approving authority must be a physician.	Profiling Officer - Approving Authority
<b>MEB Provider</b>	Can view, initiate, expire, and approve profiles view Individual Medical Readiness (IMR), review action items, review and complete Heath Assessments, exchange messages with Commanders, apply first or second signatures to profile conditions, apply the S, V, W, and Y profile codes and approve P3/P4 profiles deemed to meet retention standards or requiring entry into the Disability Evaluation System (DES).	Profiling Officer - MEB Doctor
<b>MEB Provider Non-Physician</b>	View, initiate, expire, and approve profiles, view Individual Medical Readiness (IMR), action items, review and complete Heath Assessments, create and manage reminders, exchange messages with Commanders, apply the first signature to profile conditions, and apply the S, V, W, and Y codes to profile conditions. NOTE: This role does not allow the user to approve Soldiers for entry into DES.	N/A
<b>Athletic Trainer</b>	Can write profile conditions up to 7 days in duration, submit profile conditions lasting over 7 days for approval, and view messages between Commanders and Providers.	N/A

## Appendix B – Miscellaneous Tables

### Medical Readiness Classification (MRC) and Deployment-Limiting Codes (DLC)

From AR 600-60 (25 June 2002)

Medical Readiness Classification			
MRC	Short Definition	Medical Definition	Commander Deployability Personnel Determination
MRC 1	Medically ready / deployable	<b>MRC 1</b> Meets all medical readiness requirements and Dental Readiness Class 1 or 2 – Temp profile ≤ 7 days	Not Required
MRC 2	Partially medically ready / deployable	<b>MRC 2</b> <i>Soldier is deficient in one of the following:</i> – Temp profile > 8 days but ≤ 14 days – Hearing Readiness Class 4 (current within 13 months) – Vision Readiness Class 4 (current within 15 months) – DNA (drawn/on file with DoD Repository) – HIV (drawn/validated with DoD Repository) – Immunizations current or valid exception (Routine Adult Immunization Profile) – HepA, HepB, Tdap, MMR, Polio, Varicella (Influenza-seasonal) – Individual medical equipment (1MI, 2 pair eye glasses, MCEP-I, MWT, and hearing aid with batteries if required)	Not Required
MRC 3	Not medically ready / nondeployable and commander determines deployability for: – Temp profile > 14 days (DL 1) – Dental Readiness Class 3 (DL 2)	<b>MRC 3</b> <i>Soldier is deficient in one of the following:</i> DL 1 – Temp profile > 14 days DL 2 – Dental Readiness Class 3 DL 3 – Pregnancy DL 4 – Permanent profile indicating a MAR2 action is needed DL 5 – Permanent profile indicating a MEB action is needed DL 6 – Permanent profile indicating a non-duty-related action is needed DL 7 – Permanent profiles with a deployment /assignment restriction code (F, V, or X)	Deployment-Limiting (DL) Condition 1/2: Soldier is not medically ready / nondeployable and commander determines deployability.  DL 3/4/5/6/7: Soldier is not medically ready / nondeployable. Unit commander cannot make a deployability determination for routine readiness reporting. When assigned a mission, deployability will be in accordance with combatant command policies.
MRC 4	Not medically ready / nondeployable and commander determines deployability (default nondeployable)	<b>MRC 4</b> <i>Status is unknown.</i> <i>Soldier is deficient in one of the following:</i> – Periodic Health Assessment (current within 15 months) – Dental Readiness Class 4 (current within 15 months)	Soldier is not medically ready / nondeployable and commander determines deployability.

#### Definitions:

HepA = Hepatitis A  
HepB = Hepatitis B  
HIV = Human immunodeficiency virus

MAR2 = MOS Administrative Retention Review  
MCEP-I = Military Combat Eye Protection Inserts  
MI = Mask inserts

MMR = Measles, mumps, and rubella  
MWT = Medical warning tags  
Tdap = Tetanus, diphtheria, and acellular pertussis

## Profile Codes

From AR 600-60 (25 June 2002)

Table 2 – Physical Category Codes

Code	Description
F	No assignment or deployment to outside continental United States areas where definitive medical care for the Soldier's medical condition is not available.
S	MEB. An MEB has determined that the Soldier meets medical retention standards.
T	Waiver. The Soldier received a waiver for a disqualifying medical condition or standard for initial enlistment or appointment. The disqualifying medical condition or standard will be documented in the Soldier's accession medical examination.
V	Deployment. This code identifies Soldiers who are restricted from deploying to certain geographical areas.
W	MAR2. This Soldier has a permanent 3 or 4 profile with a MAR2 finding of retain or reclassify and return to duty.
X	Continuation on Active Duty/Continuation on Active Reserve status. This Soldier is allowed to continue in the Military Service with a disease, injury, or medical defect that is below medical retention standards, pursuant to a waiver of retention standards, or waiver of unfit finding and continuation on active duty or on active reserve status under AR 635-40.
Y	Fit for Duty. The Soldier has been determined to be fit for duty (not entitled to separation or retirement because of physical disability) after complete processing under AR 635-40.

## PULHES Description

From AR 40-501 (14 June 2017)

(1) *P—Physical capacity or stamina.* This factor, general physical capacity, normally includes conditions of the heart; respiratory system; gastrointestinal system, genitourinary system; nervous system; allergic, endocrine, metabolic and nutritional diseases; diseases of the blood and blood forming tissues; dental conditions; diseases of the breast, and other organic defects and diseases that do not fall under other specific factors of the system.

(2) *U—Upper extremities.* This factor concerns the hands, arms, shoulder girdle, and upper spine (cervical, thoracic, and upper lumbar) in regard to strength, range of motion, and general efficiency.

(3) *L—Lower extremities.* This factor concerns the feet, legs, pelvic girdle, lower back musculature and lower spine (lower lumbar and sacral) in regard to strength, range of motion, and general efficiency.

(4) *H—Hearing and ears.* This factor concerns auditory acuity and disease and defects of the ear.

(5) *E—Eyes.* This factor concerns visual acuity and diseases and defects of the eye.

(6) *S—Psychiatric.* This factor concerns personality, emotional stability, and psychiatric diseases.

Four numerical designations are assigned for evaluating the individual's functional capacity in each of the six factors. Guidance for assigning numerical designators is contained in table 7-1. The numerical designator is not an automatic indicator of "deployability" or assignment restrictions, or referral to an MEB. The conditions listed in chapter 3 and the Soldier's functional limitations, rather than the numerical designator of the profile, will be the determining factors for MEB processing.

(1) An individual having a numerical designation of "1" under all factors is considered to possess a high level of medical fitness.

(2) A physical profile designator of "2" under any or all factors indicates that an individual possesses some medical condition or physical defect that may require some activity limitations.

(3) A profile containing one or more numerical designators of "3" signifies that the individual has one or more medical conditions or physical defects that may require significant limitations. The individual should receive assignments commensurate with his or her physical capability for military duty.

(4) A profile serial containing one or more numerical designators of "4" indicates that the individual has one or more medical conditions or physical defects of such severity that performance of military duty must be drastically limited.

## Appendix C – DoD PHA Inter-Service Process Flows

<b>INTER-SERVICE DoD PHA COMPLETION</b>				
	<b>Navy SM – Army Facility/Provider</b>	<b>Army Soldier – Navy Facility/Provider</b>	<b>Air Force SM – Army Facility/Provider</b>	<b>Army Soldier – Air Force Facility/Provider</b>
<b>Facility Tracking after RR Portion Complete (Awaiting Provider Portion)</b>	<p>* Navy SM completes self-assess. portion and schedules DoD PHA appt per Army/facility SOP</p> <p>*Once the RR portion is complete the Navy SM will be scheduled with a provider for F2F DoD PHA completion</p>	<p>* Army Soldier completes self-assess. portion and schedules DoD PHA appt per Navy/ facility SOP</p> <p>*Once RR is complete Army Soldier will be contacted by the PHA provider to complete the PHA review</p>	<p>* AF SM completes self-asses. portion and schedules DoD PHA appt per Army/facility SOP</p> <p>*Once the RR portion is complete the AF SM will be scheduled with a provider for F2F DoD PHA completion</p>	<p>* Army Soldier completes self-assess. portion and notifies Base Operational Medicine Clinic (BOMC)</p> <p>* Army Soldier will call to schedule MHA evaluation per AF MTF SOP</p>
<b>DoD PHA Completion</b>	<p>*Army provider completes/signs DoD PHA (In F2F visit)</p> <p>*DoD PHA is annotated in AHLTA note</p>	<p>*Navy provider calls Soldier and complete the DoD PHA (F2F only if warranted)</p> <p>*DoD PHA is annotated in AHLTA note</p>	<p>* Army provider completes/signs DoD PHA (In F2F visit)</p> <p>*DoD PHA is annotated in AHLTA note</p>	<p>*AF MHA provider calls Soldier and completes MHA Component</p> <p>* PCM completes DoD PHA in ASIMS and annotates AHLTA note</p>
<b>Physical Duty Limitation Document</b>	<p>*Army provider determines need for Navy SM physical /duty limitation</p> <p>*Provider writes physical limitations on DD Form 689 &amp; annotates within DoD PHA AHLTA note</p> <p>*Navy SM gets DD Form 689 to Navy POC to enter into Navy system (limitations also available in DoD PHA AHLTA note)</p>	<p>*Navy provider determines need for Army physical/duty limitation</p> <p>*Provider writes physical limitations on Navy light duty chit &amp; annotates in DoD PHA AHLTA note</p> <p>*Army Soldier gets Navy form to Army POC for entry into eProfile (limitations also available in DoD PHA AHLTA)</p>	<p>*Army provider determines need for AF SM physical /duty limitation</p> <p>*Provider writes physical limitations on DD Form 689 &amp; annotates within DoD PHA AHLTA note</p> <p>*AF SM gets DD Form 689 to AF POC to enter into AF profile system (limitations also available in DoD PHA AHLTA note)</p>	<p>*AF provider determines need for Army physical/duty limitation</p> <p>*AF Provider writes physical limitations on AF Form 469 &amp; annotates within DoD PHA AHLTA note</p> <p>*Army Soldier gets AF form to Army POC for entry into eProfile. (limitations also available in DoD PHA AHLTA note)</p>
<b>Existing Profile Review</b>	N/A	<p>*Army Soldier brings or sends copy (as directed) of current eProfile (if one exists) to DoD PHA appt /POC</p> <p>*Navy provider reviews Army profile</p> <p>*Provider will annotate warranted changes (if any) on Navy light duty chit and within DoD PHA AHLTA note</p>	N/A	<p>*Army Soldier provides copy of current eProfile (if one exists) to AF DoD PHA appt POC</p> <p>*AF provider reviews profile</p> <p>*Provider will annotate warranted changes (if any) on AF Form 469 (for Soldier) and within DoD PHA AHLTA note</p>