



REPLY TO  
ATTENTION OF:

DEPARTMENT OF THE ARMY  
UNITED STATES ARMY CENTRAL  
1 Gabreski Drive  
Shaw Air Force Base, SC 29152

Expiration date: \_\_\_\_\_  
Date: \_\_\_\_\_

## USARCENT MEDICAL WAIVER GUIDANCE

**Purpose:** To provide guidance to Army Leaders and Medical Personnel when requesting a deployment waiver for Soldiers, Department of the Army civilians and Contractors supporting the Army (herein collectively referred to as Army Personnel) who do not meet deployment medical standards.

**References:**

1. Army Regulation 40-501, Standards of Medical Fitness, Rapid Action Revision (RAR) dated 23 August 2010; Available on Army Publishing Directorate (APD) web site [www.usapa.army.mil](http://www.usapa.army.mil)

2. Army Personnel Policy Guidance (PPG), Chapter 7, Medical & Dental, current version 4 August 2011 available at the Army G1 web site <http://www.armyg1.army.mil/militarypersonnel/ppg/PPG.pdf#Chapter7>.

3. CENTCOM Individual Protection and Individual/Unit Deployment Policy, MOD 12  
[http://www.pdhealth.mil/downloads/CENTCOM\\_Deployment\\_Policy\\_.pdf](http://www.pdhealth.mil/downloads/CENTCOM_Deployment_Policy_.pdf)  
and PPG-TAB A: Amplification of the Minimal Standards of Fitness for Deployment to the CENTCOM AOR,  
<http://www.tac.usace.army.mil/deploymentcenter/documents/medical-disqualifiers.pdf>

Policy memos and the current MOD are on the USARCENT web site, [www.arcent.army.mil](http://www.arcent.army.mil), under "Policies and Memos"/Surgeon/Medical waiver guidance. An AKO logon is required to view the materials.

4. Memorandum, DASG-HSZ, 11 Sep 07, subject: Guidance on Management of Soldiers with Sleep Apnea, Obstructive Sleep Apnea, or Sleep Disordered Breathing.

5. OTSG/MEDCOM Policy Memo 07-045, 26 Nov 07, subject: Deployment after Refractive Eye Surgery.

6. OTSG/MEDCOM Policy Memo 13-008, 20 FEB 2013, subject: Stinging Insect Allergy Induction, Retention and Readiness Policy

7. OTSG/MEDCOM Policy Memo 11-077, 26 SEP 2011, subject: Women's Deployment Health Screening Requirements

8. CENTCOM Policy Memo, 08 Sep 09, subject: Policy Guidance for Deployability with Body Mass Index (BMI)  $\geq$  40 kg/m<sup>2</sup>

9. OTSG/MEDCOM Policy Memo 10-078, 22 NOV 2010, Policy: Bariatric Surgical

**Applicability:** Army Personnel deploying to the CENTCOM Area of Operations, (AOR).

**Background:**

1. Conditions in remote and hostile locations can place intense physical and emotional stress on personnel deploying to these areas. Climate extremes; long, intense periods of duty; limited medical resources; action by hostile forces; and limited transportation all increase risk to those who deploy. Experience has shown that when personnel with impaired medical fitness deploy to these areas, they are at increased risk for injury and illness, which increases demands on limited medical resources. In addition, this increased risk of injury and disease leads to personnel crises when these people are unable to perform their military duties. For these reasons, the military leadership has established medical standards for personnel deploying to remote and hostile locations.

2. Each of the references listed above provides medical deployment guidance for Army Personnel. Paragraph 5-14 of AR 40-501, Standards of Medical Fitness, which is the least stringent, provides general guidance applicable to all deploying uniformed Army personnel. Chapter 7, Medical & Dental, of the Army PPG, which is more stringent than AR 40-501, provides further, more specific guidance that is applicable to all Army Personnel deploying to any part of the world. The CENTCOM Commander published the CENTCOM guidance, which is the most stringent, is based upon the specific conditions found in the CENTCOM AOR and applies solely to those military and civilian personnel deploying to the CENTCOM AOR. It is important to note that the CENTCOM deployment standards also apply to all US contractors deploying to the CENTCOM AOR. Finally, even if they meet the deployment standards listed in AR 40-501 and the Army PPG or have been found fit for duty by the Physical Evaluation Board, personnel are not deployable to the CENTCOM AOR unless they meet the most stringent deployment standards which are listed in the current modification to CENTCOM Unit and Individual Deployment Guidance.

3. The current Mod to CENTCOM Unit and Individual Deployment Guidance has a provision that allows the CENTCOM Surgeon to waive the medical deployment standards for deploying personnel under certain conditions. The key factors in determining the appropriateness of a waiver are first, whether or not the individual's medical condition(s) place that individual at significantly greater risk in the deployed environment compared to those individuals who do not have that condition and second, whether or not the medical and other systems in the deployed environment can provide the support the deploying individual requires.

If the deploying individual is not at greater risk and the systems present in theater can support the individual's requirements without overloading those systems, that individual may be considered for a waiver. It is important to note that medical personnel assess waiver requests on a case by case basis taking into consideration the individual's medical conditions along with the associated limitations and requirements the conditions cause; the individual's duty requirements; and the specific location in the CENTCOM AOR to which the individual will deploy. Because of case by case variability in these factors, one individual may receive a waiver for a specific medical condition while another individual with the same or similar condition may not receive a waiver.

4. The CENTCOM Surgeon has delegated the medical waiver authority to the Component Surgeons. However, the CENTCOM Surgeon remains the medical waiver authority for deploying personnel who are not assigned to a Component. These personnel include those assigned to Department of Defense agencies and activities including AAFES, Red Cross and the like.

5. Based upon the CENTCOM Surgeon's delegation of waiver authority, the USARCENT Surgeon is the medical waiver authority for Army Personnel, except for SOCCENT Soldiers.

6. The SOCCENT Surgeon has the authority to adjudicate Special Operations Soldiers medical waivers for the CENTCOM AOR.

### **Procedure for ARCENT Waivers**

1. Medical personnel may submit waiver requests on the CENTCOM Medical Waiver Request Form (see Attachment 1) to the USARCENT Surgeon for Army Personnel deploying to the CENTCOM AOR when those personnel do not meet deployment standards.

2. Leaders and medical personnel must critically assess each individual who does not meet medical deployment standards in order to determine whether or not that individual should be recommended for a waiver. While leaders consider many factors when contemplating a waiver, the most important factor is whether or not the individual's condition will place him/her at significantly increased risk when deployed. Individuals who will clearly be at increased risk when deployed will not receive a waiver. Even so, leaders may request a waiver on any individual; each waiver request will receive thorough consideration and a prompt response. Medical waivers submitted to the USARCENT Surgeon for determination will be returned with decision within 5 working days of receipt of the waiver request. If inadequate medical information/documentation is submitted and more information is required to make a determination, this time line may be extended.

3. Only medical providers thoroughly familiar with the medically non-deployable individual may submit a medical waiver request for that individual.

Commanders and other leaders are encouraged but not required to submit documents in support of a medical waiver request.

4. In order for the USARCENT Surgeon to make an informed determination on each waiver request, medical professionals must include the following data with each waiver request using the attached form. The individual's:

- a. Full name.
- b. Last four of the SSN.
- c. Status. AD/AR/ARNG for military; DAC or Contractor for civilians
- d. Instillation of assignment or Major Command/DAC or Contract name of contractors.
- d. Rank; does not apply to Contactors
- e. MOS/AOC or duty description for Civilian/Contractor
- f. Pertinent medical history. This must include a detailed history of the condition causing the person to be non-deployable and any co-morbid conditions that could impact on the primary condition; current medications; pertinent test results; the individual's current health status and finally, a recommendation from the provider as to whether or not the individual should deploy. Information from private physicians should be included when the information impacts on the case.

Specific medical information requirement examples include but are not limited to:

Original Polysomnogram (PSG) for personnel that require Continuous Positive Airway Pressure (CPAP) machine for the treatment of Obstructive Sleep Apnea (OSA).

HbA1c (Glycated Hemoglobin) < 7% over a three month period for personnel diagnosed with Type II Diabetes and taking oral medications

Framingham scores as necessary

Optional enclosures include recommendations from the command and from the individual.

5. Providers may scan and email this information to the ARCENT Surgeon using a .mil email account at "USARMY Shaw AFB USARCENT Mailbox SURG Waiver" [usarmy.shaw.usarcent.mbx.surg-waiver@mail.mil](mailto:usarmy.shaw.usarcent.mbx.surg-waiver@mail.mil) . Providers and commanders are encouraged to use the CENTCOM medical waiver request form for submitting medical waivers to the USARCENT Surgeon.

6. Providers who desire guidance regarding the appropriateness of a waiver or the preparation of a waiver request should not hesitate to call the USARCENT Surgeon at 803-885-7946/7963 (DSN 889) for consultation and recommendation.

7. The USARCENT Surgeon cannot waive medical conditions that are unfitting for retention IAW Chapter 3 of AR 40-501, Standards of Medical Fitness, unless that Soldier has been found fit for duty by a MOS Administrative Record Review (MAR2), Medical Evaluation Board (MEB) or Physical Evaluation Board (PEB) and has a current profile reflecting a completed board.

8. The Point of Contact for this guidance is the USARCENT Surgeon at 803-885-7946 or DSN: 803-889-7946. .

EDWARD H BAILEY  
COL, MC  
USARCENT Command Surgeon

Instructions for the waiver request form:

Name: Last name, First name, Middle Initial

DOB: Date of birth

SSN: At least the last four of the Social Security Number or if not US Citizen the Passport number

Previous Deployments: Only if applicable, how many and where

Destination: What Country in the CENTCOM AOR is this individual going to be working

Diagnosis: What condition causes the requirement for a Medical Waiver? OSA, HTN, Diabetes, ect

Age: In years

Sex: M=male F=female

MOS/Job description:

Military: MOS

Civilian/Contractors: what will the individual be doing while in theater

Home Station: Military specific, Duty station, State in which they are Guard or Reserve  
Civilians/Contractors: what government agency or contractor will you work for while in theater

Years of service: Military Specific: Number for years individual has been in service

AD/ARNG/USAR/CIV/CONT: Specific branch of the Army, Active Duty, Army National Guard, US Army Reserves, Government Civilian or Contractor

Length of deployment: How long will you be in the CENTCOM AOR: 3mo, 6mo, 1yr, 24mo

Previous Waivers: If you have received a medical waiver for deployment into the