



**MEDCOM Mission Review
with
Overview of the
DA Deployment Cycle Support CONPLAN
(DCSP)
&
MEDCOM Demobilization Plan**



MEDCOM Missions and Planned Resources

MEDCOM Missions

Corresponding Resource

PROFIS



IMA

CT/Multi PROFIS



CT/Multi PROFIS Backfill

Special Backfill



Pacific and European Backfill

Inpatient Expansion



Inpatient Expansion Unit

SRP & R/PD/R



MSU

Blood Donor



BDC Expansion Unit

Veterinary Food



Veterinary Food Inspection



Initial MTF Staffing Situation

The existing MTF staff consists of a combination of:

- Military Personnel
- Department of Army Civilians
- Contracted Personnel

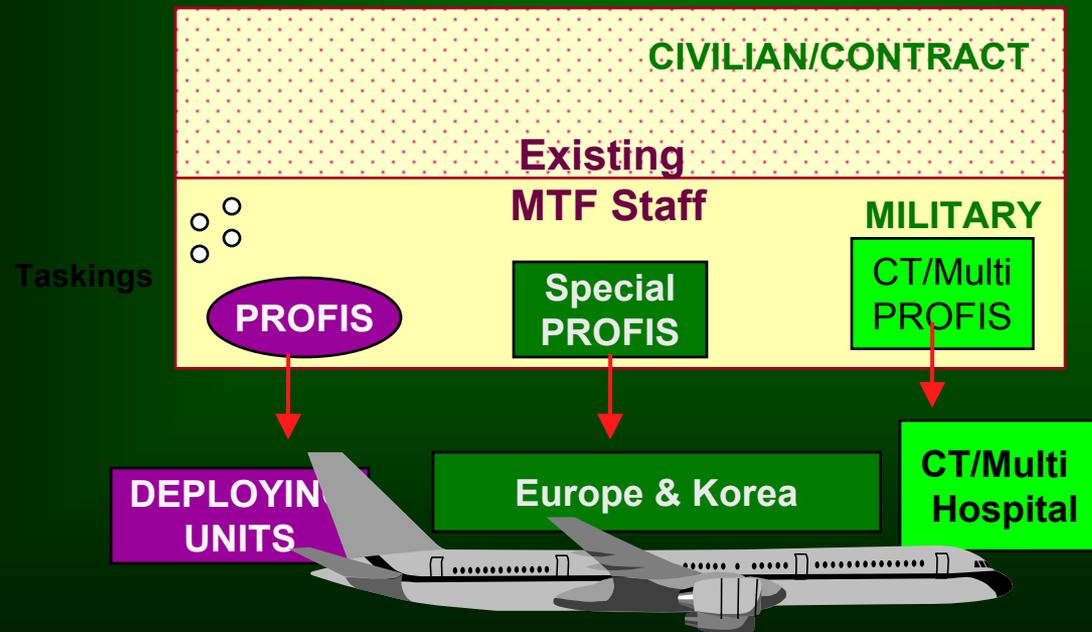


Note: There are a “few holes” in the staff due to taskings supporting a variety of other missions throughout the world.



The first impact on your MTF in a mob/contingency situation will probably be the loss of military staff via one or more of the PROFIS packages. Remember, PROFIS requirements can occur without mobilization since the types indicated below support AC deployers

PROFIS support to RC units (AC-RC PROFIS) will occur only when the appropriate RC unit is slated to be activated

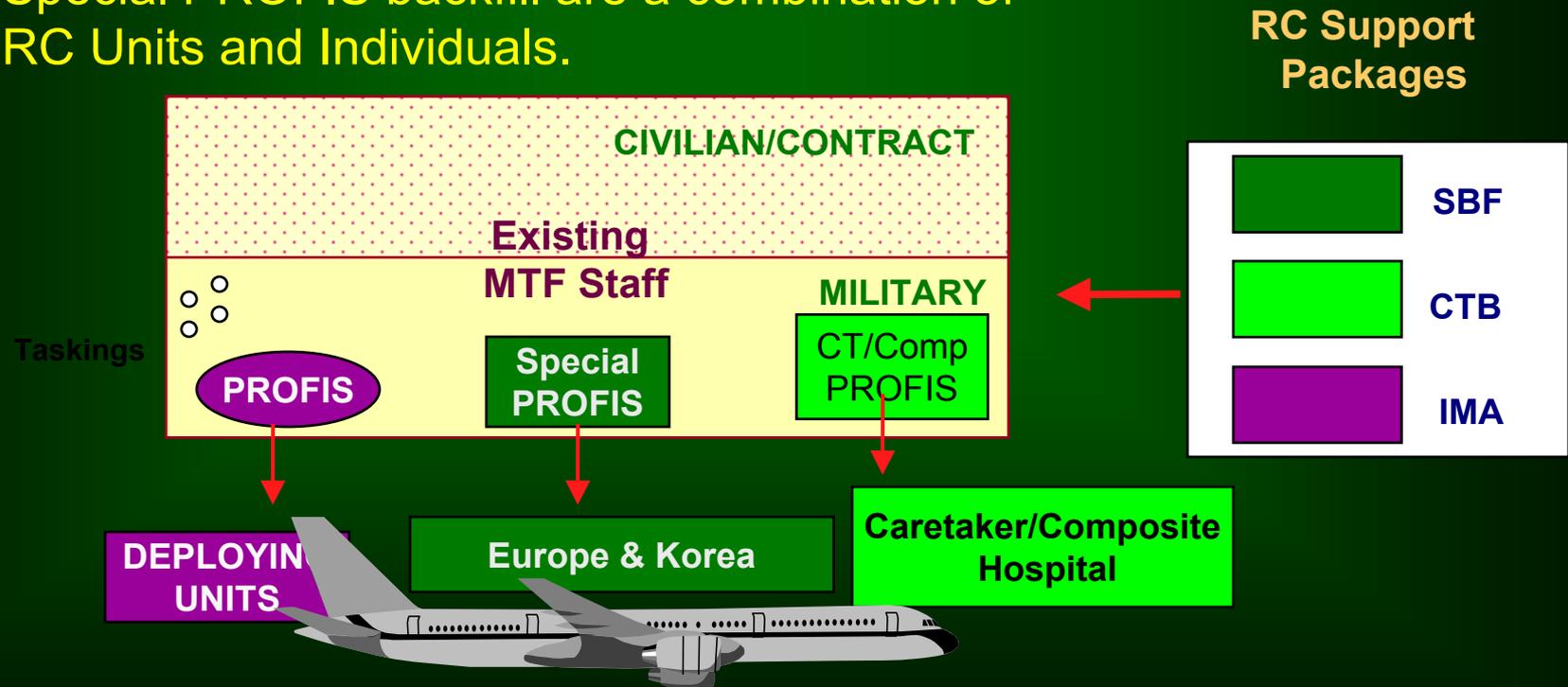




Backfill for individual PROFIS losses is planned via Individual Mobilization Augmentees (IMAs)

When large scale unit backfill is needed, as with Caretaker/ Multi-Component Hospitals, RC TDA TPU have been identified to provide the needed fillers to the MTF.

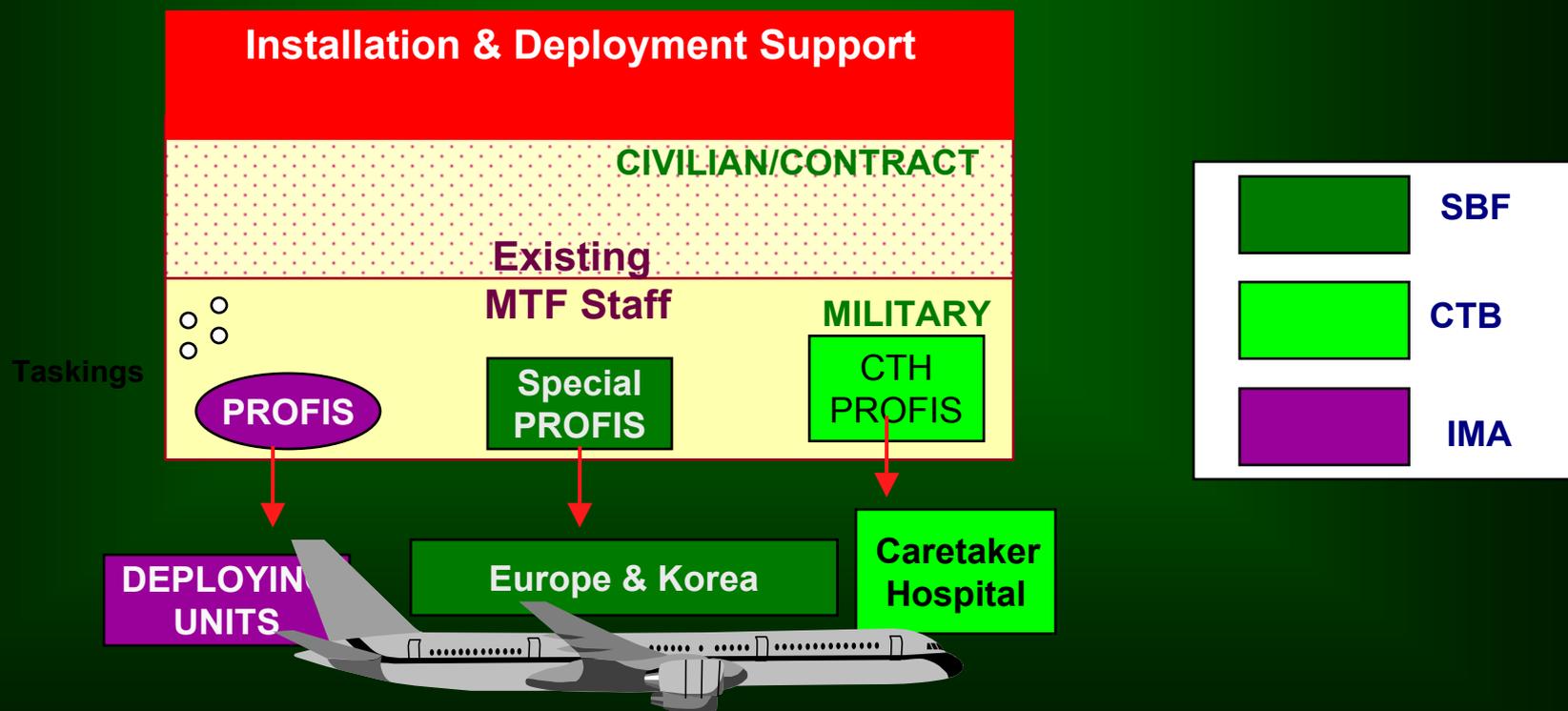
Special PROFIS backfill are a combination of RC Units and Individuals.





The MTF Installation/Deployment support missions:

- Blood Donor Center support
- Veterinary Food Inspection support (VETCOM)
- Soldier Readiness Processing
- Redeployment/Post-Deployment/Reconstitution



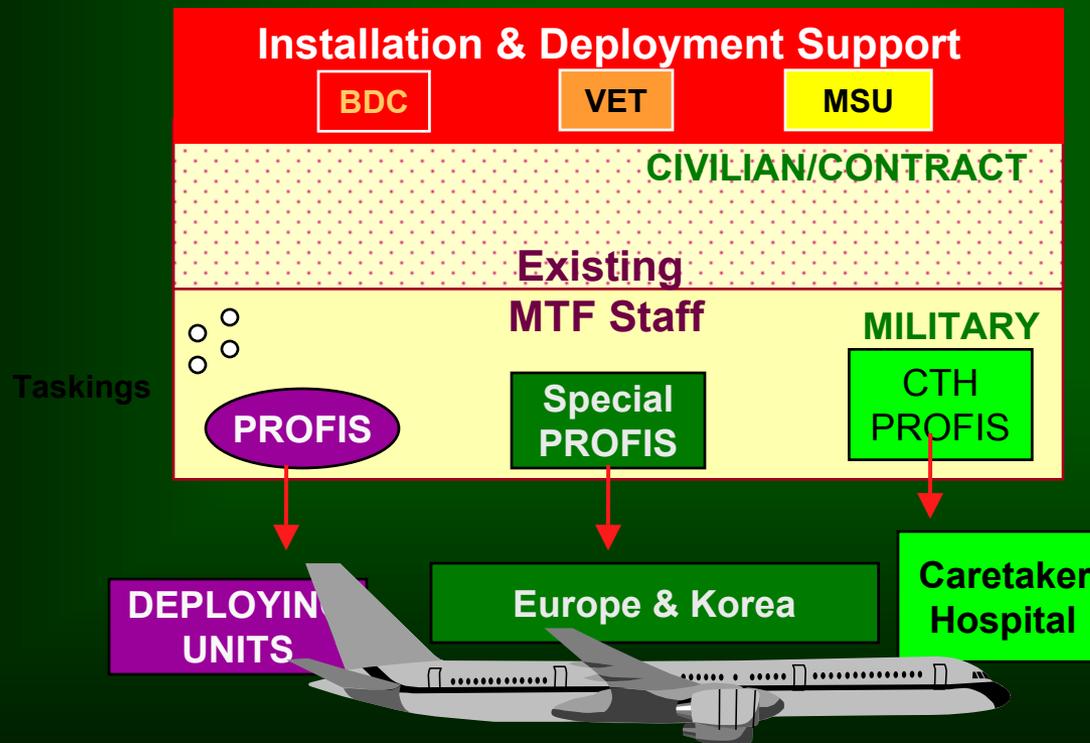


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all have specifically designed RC units to augment the MTF staff

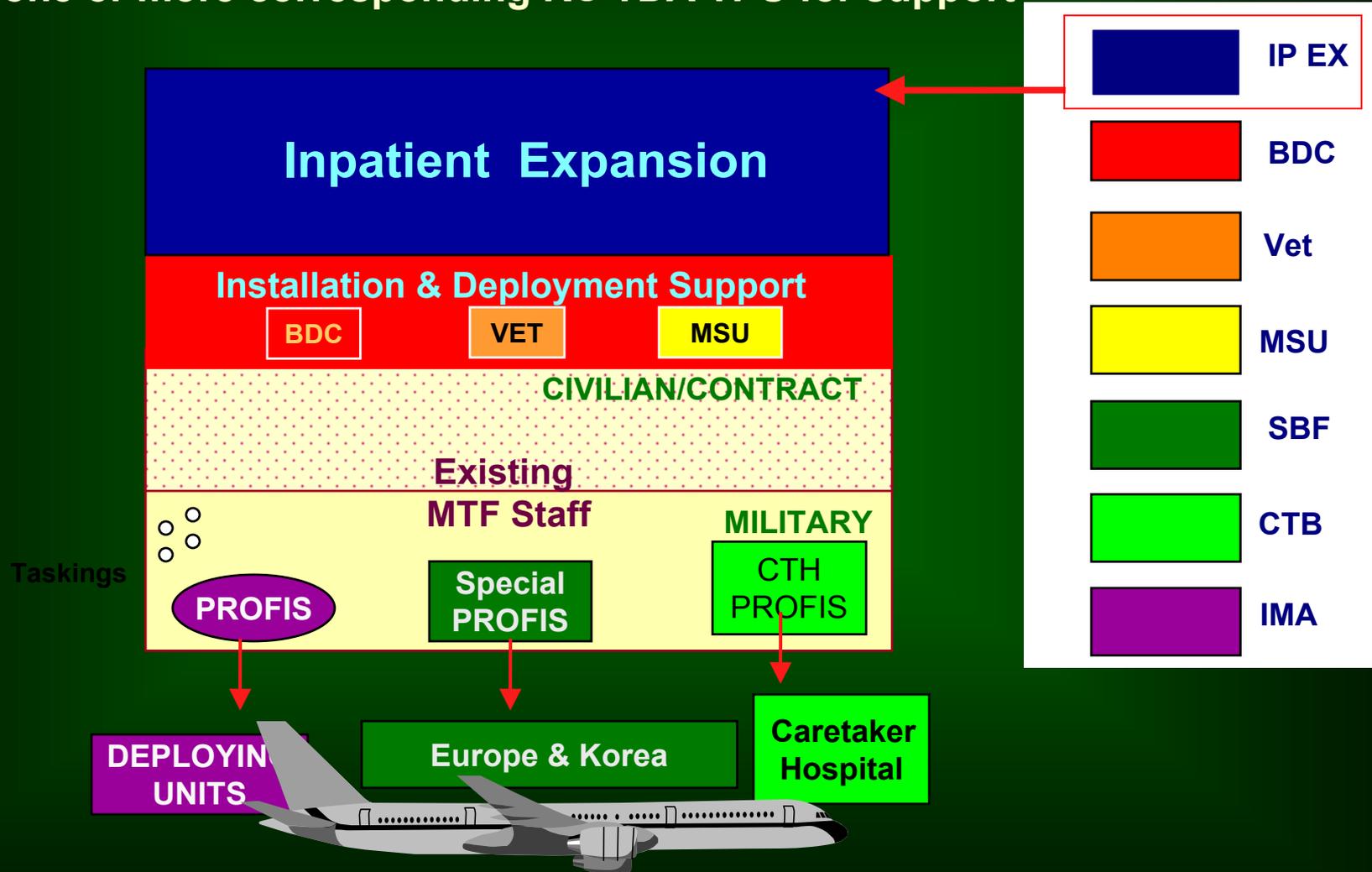
RC Support Packages





Some MTF have an inpatient expansion mission and one or more corresponding RC TDA TPU for support

RC Support Packages





Deployment Cycle Support CONPLAN

The DCS CONPLAN and Tools may be found at the following Army G1 website:

<http://www.armyg1.army.mil/default.asp?pageid=101f>



Features of the DA

Deployment Cycle Support CONPLAN (DCSP)

- Divides the overall return to pre-conflict status (for both AC and RC soldiers) into three phases; Redeployment, Post-Deployment, and Reconstitution respectively.
- Acknowledges that post conflict processing will differ in many respects between AC and RC soldiers, especially during phases 2 and 3.
- Provides specific taskings, by phase, for Army staff elements and MACOMs. Associated with each task is a provider, proponent and location. Tasks are of three types:
Educate (E), Assess (A), or Process (P)



Redeployment Phase

Definition: Begins with a Warning Order from the Combatant Commander, proceeds through arrival at the Redeployment Assembly Area (RAA) and includes completion of prep for strategic lift from in-theater/AOR and continues through arrival at POE and is completed upon arrival at the new employment site (Home Station for AC or Demobilization station for RC).

Characteristics

- Units and individuals begin to conduct recovery in-theater/AOR.
- Activity levels for units will be ramped down. Rest, relaxation and recreation will be integrated into recovery efforts.
- Select DCS tasks will begin (Appendix 1 to the DCS CONPLAN).
- Although units begin Redeployment activities in theater/AOR, other actions will take place concurrently at Home Station.
- A key element in the reintegration with family will center on preparation to include spouse and family education.



Post Deployment Phase

The Definition: **Begins** at arrival at Home Station (AC)/ Demobilization Station (RC) and **ends** when relieved from Recovery Mission (AC) or arrival at Home Station (RC).

Characteristics

Active Component SM:

- Units will balance Recovery with DCS tasks to ensure that unit, equipment, and soldier reconstitution is accomplished.
- Initial week will be “Half-days” for all, with progressive “Ramp-up”.
- Med focus = SM “reconstitution”. Goal = Return to “deployable status”

Reserve Component SM:

- Demobilization begins with pre-processing in Redeployment phase
- Specific Medical/Dental guidance in MEDCOM Demobilization Plan
- Actions to return SM to return to deployable status will be taken.



Reconstitution Phase

The Definition: **Begins** at Home Station with recovery of equipment, completion of administrative requirements, and continuation of SM reconstitution, reintegration with family and civilian jobs (RC).

Characteristics

- Family support activities continue throughout this phase.
- Preparation for future deployment missions.
- Continue health care advocacy (beyond post deployment and demobilization) support in negotiating the medical system via telephone for active and RC soldiers identified with medical or exposure concerns.
- Medical and Dental efforts focus on individual SM readiness for AC and RC.
- Work the medical reconstitution tasks found in Appendix 3 of the DA DCSP.



MEDCOM Demobilization Plan

1. In concert with DA DCSP, with primary focus on Phase 2, Post-Deployment/Demobilization
2. Challenging parameters include:
 - a. Multiple locations (active and semi active)
 - b. Resource intensive
 - c. Irregular workload
 - d. Electronic medical data collection
 - e. Nationwide uniformity of procedures
 - f. Tracking of RC SM needing Post Demob care
3. Specific guidance is found in Annex A and B and their supporting Appendices of the MEDCOM plan.



Medical Demobilization Documents

- New 2003** DD Form 2813 DoD Active Duty/Reserve Forces Dental Examination
- DD Form 2807-1 Report of Medical History
- New 2003** DD Form 2808 Report of Medical Examination
- DA Form 3444-x Treatment Record (Medical and Dental)
- DD Form 2795 Pre-Deployment Health Assessment
- DD Form 2766 Adult Preventive and Chronic Care Flowsheet
- New 2003** DD Form 2796 Post-Deployment Health Assessment
- DD Form 2797 Report of Medical Assessment
- DA Form 2173 Line of Duty
- DD Form 261 Report of investigation Line of Duty and Misconduct Status
- DA Form 3349 Physical Profile

www.usapa.army.mil



Medical Demobilization Steps

Medical Demobilization Actions at the Demobilization Site

- **Medical Benefits and Entitlements Briefing**
- **Medical Record “Readiness Screen” (Reconstitution)**
- **“Face to Face” interview with HCP & SM (DD 2796)**
- **Complete the Record Review:**
 - DD 2697, 2795, 2796, 261 ; DA 2173, 3349
- **Tuberculin Skin Test (Demobilization & 3-6 months)**
- **Blood Sample for HIV**
- **SM meets retention standards = cleared for REFRAD**
- **SM does not meet retention standards = Post Demobilization options.**



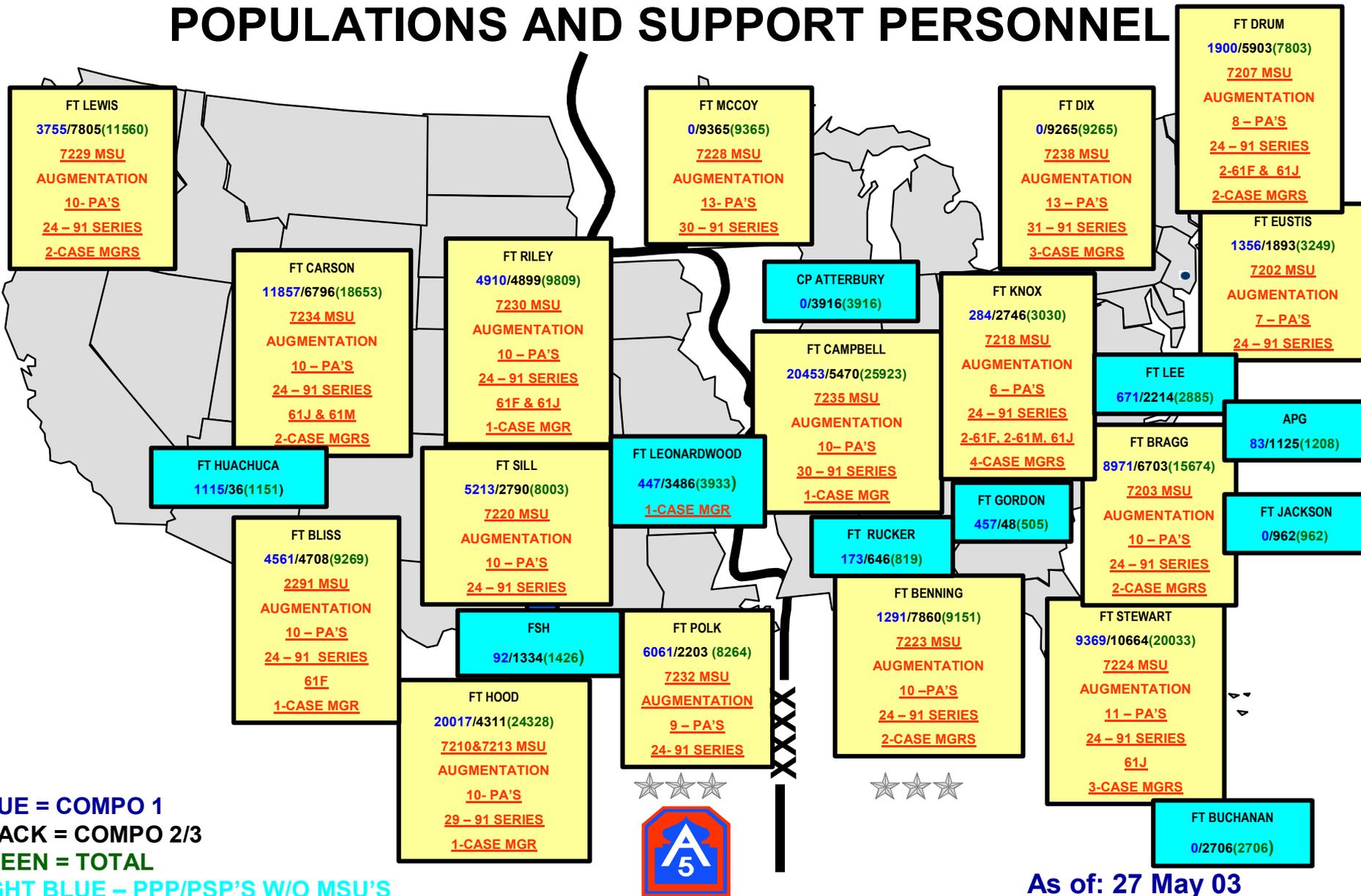
Key Point

➤ SRP actions for deploying forces (replacement from any COMPO) and Demobilization/Reconstitution actions (any COMPO) will be taking place concurrently at many PPP/PSP,

And the capability to screen and correct shortfalls in the medical readiness status of demobilizing/ reconstituting SM from the theater exists at the PPP/PSP.

TSG - Part of the medical/dental demobilization/ reconstitution process at PPP/PSP will include a SM medical/dental record screen to identify and correct any shortfall in medical readiness.

MEDCOM PROJECTED REDEPLOYMENT POPULATIONS AND SUPPORT PERSONNEL



As of: 27 May 03