



# THE IG UPDATE



18 March 2024

## Guidance on Medical Profiles and Command Authorities

### Policy

AR 40-502 governs Individual Medical Readiness (IMR) requirements and standards; medical readiness processes and policies supporting commander deployability determinations; physical profiles and medical examinations; Periodic Health Assessments (PHAs), and the Deployment Health Assessment Program (DHAP).

### DA Form 3349-SG (Physical Profile)

- The DA Form 3349-SG (System Generated) is primarily a communication tool between the profiling officer, the Soldier, and the commander to address duty limitations.
- The DA Form 3349-SG contains all the Soldier's current duty limiting conditions with built-in communication links between the profiling officer and commander. It lists all permanent and temporary conditions in a single document.
- The commander's signature is electronically applied when they view the profile in the Commander's Portal and **has no impact on the validity of the profile.**
- Unit commanders will not override duty limitations or instructions on DA Form 3349-SG.
- Unit commanders address any questions or concerns, including when their observations of the Soldier's performance is inconsistent with the profile, directly with the profiling officer.

- Profiling officers describe and indicate potential Deployment Limiting (DL) conditions for commander review and consideration in their deployment determination.
- Profiling officers will describe when a Soldier will be eligible for a record ACFT for both temporary and permanent conditions.
- There is no mandatory recovery period after a profile prior to a record ACFT. Recovery time is factored into the profile length / ACFT date and not to exceed 90 days except for pregnancy.
- Commanders should extend reasonable consideration to profile restrictions even after expiration if the environment or mission has prevented prompt follow up.

### DD Form 689 (Individual Sick Slip)

- The DD Form 689 may be used at any time as a means of communication between the attending AMEDD personnel and the unit commander of the military member to communicate to the patient's commander any limitations when DA Form 3349 is inappropriate.
- **QUARTERS:** This is when the patient is returned to his or her unit or home for medically directed self-treatment and is not to perform military duty until a medical officer indicates that he or she may perform such duties.
- The signature of the examining official or his or her authorized representative is required on all DD Forms 689 prepared at Army MTFs.
- When completed, the original of the DD Form 689 will be provided to the patient and the duplicate will be maintained by the patient's commander.

### Profiles in General

- IAW AR 40-502, printed copies are **ONLY for the Soldier's personal record.**
- The commander is required to review Soldier's profiles in the Commander's Portal within 14 days after issuance.
- Temporary profiles will specify an expiration date. If no expiration date is specified, the profile will automatically expire at the end of 30 days from issuance.

### Protected Health Information (PII)

- IAW Army Directive 2020-13 and DoD Manual 6025.18, military and civilian medical treatment facilities may use and disclose PHI without a Soldier's authorization for activities deemed necessary by the Soldier's commander, or a unit command official designated by the commander, to ensure the proper execution of the military mission.
- Any commander who exercises authority over a Soldier may receive PHI that is necessary to ensure proper execution of the mission.
  - Command authorities are not authorized unfettered access to a Soldier's PHI, nor are they given direct access to a Soldier's medical records.

### PHI Continued

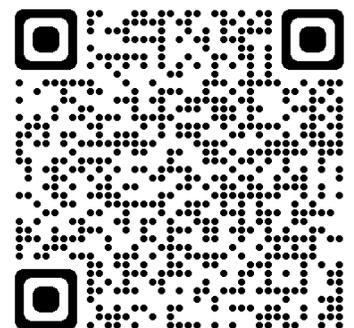
- IAW AD 2020-13, unit commanders will designate individuals by name (such as XOs, CSMs, 1SGs, PLs, and PSGs) in writing who are authorized to receive PHI from the medical treatment facility (MTF) for Soldiers under their authority.
- Commanders should strongly consider authorizing leaders down to the platoon level to request and receive PHI for Soldiers under their authority.
- To accomplish this, commanders will furnish their assumption of command memo along with a written designation of who may receive PHI to the MTF IAW procedures described in AD 2020-13.

### Reference

- **AR 40-502 - Medical Readiness**
- **DA Pam 40-502 - Medical Readiness Procedures**
- **AR 40-66. Medical Record Administration and Healthcare Documentation**
- **Army Directive 2020-13 - Disclosure of PHI to Unit Command Officials**
- **DoD Manual 6025.18 - Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule In DoD Health Care Programs**

### IG Points of Contact 21<sup>st</sup> TSC IG Office

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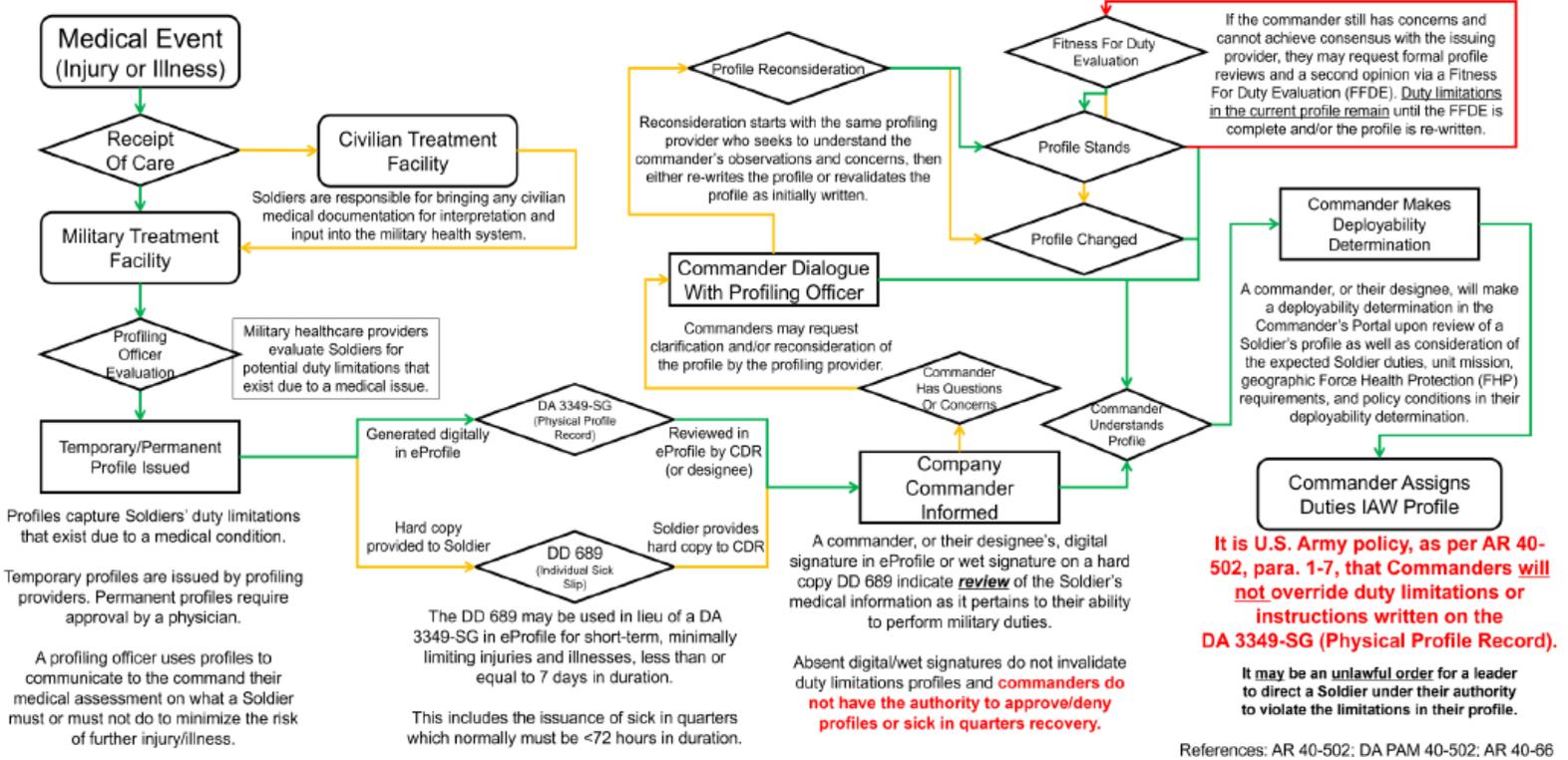


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### Physical Profiling System

Physical profiles serve to protect and maintain the Soldier's health by minimizing risk of further injury and illness. Profiles also assist commanders with understanding unit / individual medical readiness and in making deployability determinations.



#### Deployability Determination

- In making deployability determinations, unit commanders should consider the Soldier's skills, responsibilities, duties, type of mission, and geographic conditions/concerns. Additionally, commanders should ensure close collaboration with unit supporting or military treatment facilities (MTFs) healthcare providers in making their deployability determination.
- Unit commander's deployable personnel determinations for their Soldiers in MRC 3, DL 1, and DL 2 are independent of the assessment and requirements for deployment medical waivers in accordance with Combatant Command (CCMD) specific guidance.
- Commanders will make deployability determinations for all Soldiers authorized by policy for their MRC/DL.

#### Deployability Determination (cont.)

- In making deployability determinations for readiness reporting, unit commanders should consider the classification categories in paragraph 2-4 of AR 40-502 and collaborate with a healthcare provider for any questions.
- Specific medical readiness criteria are addressed in detail in chapters 2 through 5 of AR 40-502.
- Commanders will make a deployable or non-deployable determination within the Commander Portal. Readiness reporting criteria and policy are in AR 220-1. DA Pam 220-1 further describes the processes and procedures of readiness reporting including personnel deployability determinations made with medical and administrative personnel data.

#### Assigned Missions

- Upon receipt of an assigned mission, the servicing health care providers will evaluate the Soldiers to determine if they meet the CCMD deployment requirements or require a waiver. This normally occurs during Soldier Readiness Processing (SRP).
- Permanent and temporary conditions with DL codes 1, 2, and 7 may be evaluated for CCMD waiver requests.
- Conditions that do not meet CCMD deployment criteria, but otherwise do not require a profile (for example, excessive body mass index) will receive a temporary profile until the CCMD waiver is complete.

In summary: The Soldier's profiling officer, the Soldier, and the commander collaborate to identify duty limiting conditions, describe functional limitations, capabilities, physical training requirements, and assign appropriate duties.