MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army Directive 2016-07 (Redesign of Personnel Readiness and Medical Deployability)

1. References. A complete list of references is at enclosure 1.

2. Purpose. The scope and pace of the Army’s downsizing has made personnel readiness more critical to a unit’s ability to accomplish its mission. To enable commanders to more efficiently manage their forces, the Army must change how it reports the readiness of its personnel. This directive integrates redefined administrative and medical deployment determinations with a new readiness reporting process. This new integrated process will allow commanders to more effectively manage, communicate, and report the readiness of their Soldiers, thus maximizing the deployability of their unit.

3. Policy. Effective with the July 2016 commander’s unit status report, commanders will no longer report whether their personnel are “available,” but will instead report whether their personnel are “deployable” when calculating their units’ personnel readiness level. Commanders will manage Soldiers as deployable or nondeployable in accordance with the following definitions.

   a. Deployable: A Soldier under the direct operational control of the reporting unit, whether present or able to be present within 72 hours, who is in compliance with all required personnel readiness standards and not restricted from deploying to perform the unit’s core designed and assigned missions.

   b. Nondeployable: A Soldier who is restricted from worldwide deployment for a unit’s core designed or assigned mission because the Soldier:

      (1) does not meet the baseline individual readiness standards for worldwide deployment as defined in enclosures 2, 3, or 4 of this directive;

      (2) does not meet a combatant commander’s mission-specific individual readiness standards when tailored for accomplishment of an assigned mission;

      (3) cannot be under the direct operational control of the reporting unit (not able to be present within 72 hours); or

      (4) has not graduated from a course awarding an area of concentration or military occupational specialty.
SUBJECT: Army Directive 2016-07 (Redesign of Personnel Readiness and Medical Deployability)

(5) is determined by their commander to be nondeployable for any other reason not stated above (commander’s call).

4. To reduce the commander’s workload and ensure consistency of reports across information technology systems, commanders will make Soldier deployability determinations in the authoritative sources for personnel and medical data, which will automatically populate to the commander’s unit status report. Commanders will no longer be able to manage this information directly in NetUSR.

5. The provisions of this directive apply to the Active Army, Army National Guard/Army National Guard of the United States, and U.S. Army Reserve.

6. The Deputy Chief of Staff (DCS), G-3/5/7; DCS, G-1; and The Surgeon General share proponency and oversight responsibility for this policy. The DCS, G-3/5/7 retains oversight for this guidance and has the authority to approve exceptions or waivers to this directive consistent with controlling law and regulations. The DCS, G-3/5/7 may delegate this approval authority, in writing, to a general officer or the civilian equivalent within a proponent agency, direct reporting unit, or field operating agency.

7. By January 2017, Army Regulation (AR) 600-8-101 (Personnel Processing (In-, Out-, Soldier Readiness, and Deployment Cycle)); AR 40-501 (Standards of Medical Fitness); AR 220-1 (Army Unit Status Reporting and Force Registration–Consolidated Policies); and a future regulation on medical readiness will codify the baseline individual readiness standards identified in this directive. This directive is rescinded after publication of the revised regulations.

Encls

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SUBJECT: Army Directive 2016-07 (Redesign of Personnel Readiness and Medical Deployability)

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Commander, Second Army

CF:
Director, Army National Guard
Director of Business Transformation
Commander, Eighth Army
Commander, U.S. Army Cyber Command
REFERENCES


d. Chairman of the Joint Chiefs of Staff Instruction 3401.02B (Force Readiness Reporting), July 17, 2014.

e. Army Regulation (AR) 40-501 (Standards of Medical Fitness), 14 December 2007, Incorporating Rapid Action Revision No. 3 Issued 4 August 2011.

f. AR 135-91 (Service Obligations, Methods of Fulfillment, Participation Requirements, and Enforcement Procedures), 1 February 2005.

g. AR 220-1 (Army Unit Status Reporting and Force Registration–Consolidated Policies), 15 April 2010.

h. AR 600-8 (Military Human Resources Management), 11 April 2014.

i. AR 600-8-2 (Suspension of Favorable Personnel Actions (Flag)), 23 October 2012.

j. AR 600-8-6 (Personnel Accounting and Strength Reporting), 1 April 2015.

k. AR 600-20 (Army Command Policy), 6 November 2014.

l. AR 600-43 (Conscientious Objection), 21 August 2006.

m. AR 600-60 (Physical Performance Evaluation System), 28 February 2008.


o. AR 601-210 (Active and Reserve Components Enlistment Program), 8 February 2011, Incorporating Rapid Action Revision No. 3 Issued 12 March 2013.

p. AR 614-30 (Overseas Service), 27 January 2015.

q. AR 614-100 (Officer Assignment Policies, Details, and Transfers), 1 January 2006.

Army Directive 2016-07

Enclosure 1
r. AR 614-200 (Enlisted Assignments and Utilization Management), 26 February 2009, Incorporating Rapid Action Revision No. 2 Issued 11 October 2011.

s. AR 630-10 (Absence Without Leave, Desertion, and Administration of Personnel Involved in Civilian Court Proceedings), 13 January 2006.


u. AR 638-8 (Army Casualty Program), 23 June 2015.


w. Headquarters, Department of the Army Execution Order 080-12 (Army Disability Evaluations System Standardization), 31 January 2012.

x. Headquarters, Department of the Army Execution Order 037-13 (Ready and Resilient Quick Wins), 29 November 2012.

y. Headquarters, Department of the Army Execution Order 162-15 (Separation History and Physical Examination (SHPE) Implementation), 23 March 2015.
1. Commander's Portal for the Medical Protection System. The new Medical Protection System (MEDPROS) Commander's Portal, which is expected to be operational on or about 1 June 2016, will integrate all essential medical readiness information in one easy-to-use application. The company commander or his/her designee will review the following medical readiness information to determine the deployability status of his/her personnel in the portal:

- Profile,
- Integrated Disability Evaluation System status,
- Deployment Health Assessment Program status,
- Periodic Health Assessment,
- Dental readiness, and
- Medical Readiness Assessment Tool data.

A commander's MEDPROS determination of deployable personnel will automatically feed the commander's unit status report in the Defense Readiness Reporting System-Army. Commanders and their designees will complete training to learn how to implement these determinations across the force. After full implementation of this policy (on or about 31 May 2016), commanders and their designees will complete this training before assuming command or appointment to ensure consistently ready and deployable Army personnel during leadership transitions. Waiver authority is the first general officer or civilian equivalent in the chain of command.

2. Medical Readiness Classes and Deployment-Limiting Codes. The following are the new Medical Readiness Classes (MRCs) and Deployment-Limiting (DL) codes (enclosure 1 to enclosure 2). The simplified MRCs include only two categories of Soldiers who are not medically ready to deploy: MRC 3 and MRC 4. MRCs 3A and 3B will be consolidated into the new MRC 3, which will include seven new DLs to increase transparency and detail. Commanders are required to determine whether Soldiers with MRC 3, DL 1 and 2 (see table 1) and MRC 4 medical conditions are deployable. These determinations will remain in the Commander's Portal for revalidation every month.

   a. MRC 1. This class of Soldiers is fully medically ready and deployable, and includes individuals with temporary profiles up to 7 days in length. This class also includes Soldiers with completed medical or administrative board actions who have no deployment-limiting physical category codes and have:
(1) returned to duty without any board indicated; or

(2) had their area of concentration (AOC)/military occupational specialty (MOS) reclassified; or

(3) received a U.S. Army Physical Disability Agency Fit Memorandum, which documents that the Soldier received a “fit” finding from a Physical Evaluation Board.

b. MRC 2. This class of Soldiers is partially medically ready and deployable, and includes Soldiers with profiles from 8 to 14 days in length. MRC 2 Soldiers include those whose vision or hearing is classified as class 4. (MRC 2 are deployable in MODS.)

c. MRC 3. This class of Soldiers is not medically ready and will default to nondeployable.

Table 1 – Deployment Limiting (DL) Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description*</th>
</tr>
</thead>
<tbody>
<tr>
<td>DL 1</td>
<td>Temporary profile greater than 14 days</td>
</tr>
<tr>
<td>DL 2</td>
<td>Dental Readiness Class 3</td>
</tr>
<tr>
<td>DL 3</td>
<td>Pregnancy</td>
</tr>
<tr>
<td>DL 4</td>
<td>Permanent profile indicating MOS Administrative Retention Review (MAR2) needed</td>
</tr>
<tr>
<td>DL 5</td>
<td>Permanent profile indicating Medical Evaluation Board (MEB) needed</td>
</tr>
<tr>
<td>DL 6</td>
<td>Permanent profile indicating non-duty-related action is needed</td>
</tr>
<tr>
<td>DL 7</td>
<td>Permanent profiles with a deployment / assignment restriction code (F, V, or X)</td>
</tr>
</tbody>
</table>

* More information is available in enclosure 1 to enclosure 2.

(1) Within this class of Soldiers, commanders will determine in the Commander's Portal whether a Soldier with DL code 1 or 2 is deployable after reviewing the Soldier’s physical profile. Medical conditions that cause Soldiers to be coded as DL 2 must be corrected before the Soldiers can deploy.

(2) Additionally, Soldiers with DL 7 codes are not medically ready and cannot deploy without a waiver from the combatant commander.

d. MRC 4. This class of Soldiers is not medically ready and will default to nondeployable unless a commander determines in the Commander’s Portal that a Soldier is deployable. Commanders are required to resolve any medical deficiencies before a Soldier’s deployment. Each month, commanders will evaluate and determine whether Soldiers in this class are deployable and will make every effort to address the underlying causes of a Soldier’s indeterminate MRC 4 status.
3. Redesigned Physical Profile (DA Form 3349) (see enclosure 2 to enclosure 2). This directive implements the Army’s new physical profile form—DA Form 3349—which will be effective on 1 June 2016. DA Form 3349 consolidates all of a Soldier’s physical profiles on one form by describing each of his/her medical conditions (temporary and permanent) and corresponding functional limitations. All legacy profiles remain in effect until they are transferred to DA Form 3349. Commanders will ensure that a Soldier’s legacy profile is transferred to DA Form 3349 before the Soldier completes the next scheduled Periodic Health Assessment. Medical providers will validate all temporary and permanent medical conditions during the transition period. All temporary profiles will expire within 90 days unless Army policy authorizes otherwise.

   a. Individual Sick Slips (DD Form 689) are valid for only 7 days.

   b. This directive streamlines physical category codes and rescinds all other physical category codes as shown in this next table. Profiling officers will describe the limitations within the context of the profile to communicate with the commander.

   Table 2 – Physical Category Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>F</td>
<td>No assignment or deployment to outside continental United States areas where definitive medical care for the Soldier’s medical condition is not available.</td>
</tr>
<tr>
<td>S</td>
<td>MEB. An MEB has determined that the Soldier meets medical retention standards.</td>
</tr>
<tr>
<td>T</td>
<td>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.</td>
</tr>
<tr>
<td>V</td>
<td>Deployment. This code identifies Soldiers who are restricted from deploying to certain geographical areas.</td>
</tr>
<tr>
<td>W</td>
<td>MAR2. This Soldier has a permanent 3 or 4 profile with a MAR2 finding of retain or reclassify and return to duty.</td>
</tr>
<tr>
<td>X</td>
<td>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.</td>
</tr>
<tr>
<td>Y</td>
<td>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.</td>
</tr>
</tbody>
</table>

   c. The profiling officer will generate a profile on the new DA Form 3349 in eProfile and will transcribe all legacy profiles at the next profiling opportunity, but no later than the next Periodic Health Assessment.
(1) Profiling officers will provide commanders with a summary of a Soldier’s duty limitations, which will include the functional activities the Soldier can perform under his/her profile. The profiling officer will acknowledge the command teams as partners in medical readiness and personnel deployability through communication and collaboration to ensure maximum mission capability while preserving the health and wellness of the Soldier.

(2) Profiling officers will write all temporary profiles for the entire expected duration of the duty limitation up to 90 days. Given that temporary profiles do not prevent Soldiers from taking the Army Physical Fitness Test, profiling officers will designate on DA Form 3349 when the Soldier can take the test. The profiling officer may also designate on the form that the Soldier take an alternate aerobic event.

(3) Soldiers will no longer have an automatic recovery period after the termination of their temporary profiles. Additionally, temporary profiles will no longer include the military physical profile serial system (PULHES) characterization. Temporary profiles with MRC and DL characterizations will be for duration only. When renewing a temporary profile, profiling officers will update the functional activities the Soldier can perform. An appropriate physician will review temporary profiles lasting 180 days or longer.

d. Commanders will review all pertinent medical information in a Soldier’s profile, including, but not limited to, all active reasons for the profile (sections 2 and 3), any functional limitations (section 4), the medical instructions (section 5), and physical readiness training capabilities (section 7).

(1) When determining whether a Soldier can deploy with a physical profile, commanders should discuss their questions and concerns with the profiling officer or request information from the Soldier’s medical provider. Any reservations should be based on the commander’s personal knowledge and firsthand observations of the Soldier’s physical activities. If a profiling officer and commander cannot agree on a Soldier’s duty limitations, the commander should request a “fitness for duty” evaluation. Medical treatment facility commanders, State Surgeons, and the U.S. Army Reserve Command Surgeon will develop processes and procedures to conduct fitness for duty evaluations within their areas of responsibility. However, medical instructions described on a physical profile may not be ignored. This collaboration will ensure high-quality medical care, appropriate duty assignments, and accurate determinations of deployability.

(2) Army commanders will review physical profiles within 14 days after a profiling officer issues a profile, while Army National Guard (ARNG)/Army National Guard of the United States (ARNGUS) and U.S. Army Reserve (USAR) commanders will review physical profiles within 30 days after a profiling officer issues a profile. The profiling officer will list his/her name and contact information on the same line as the medical condition (reason for profile) so that the Soldier’s commander can correspond with
him/her directly within the Commander’s Portal. A copy of any communication between
the commander and profiling officer will be sent to the Soldier’s primary care provider,
State Surgeon, or the Army Reserve Medical Management Center by component.

(3) Commanders will use the Commander’s Portal to make all personnel
deployment determinations. The Portal will allow the chain of command above the
company level to monitor a subordinate commander’s determinations and review a
subordinate unit’s overall medical readiness, including individual physical profiles.

(4) Battalion/squadron (O-5 or equivalent) commanders will do a monthly review
of temporary profiles lasting 120 days or more.

(5) Brigade commanders (O-6 or equivalent) will do a monthly review of
temporary profiles lasting 180 days or more.

(6) The first general officer in the chain of command will review temporary
profiles that are 240 days or older (reference y).

e. Reserve Command’s Medical Management Center must validate all DA Form
3349s generated for USAR Soldiers drilling in a Troop Program Unit status before the
Soldier can be referred to the MAR2 process or Disability Evaluation System (DES).
This will include all temporary profiles greater than 14 days in length and all
permanent 2, 3, or 4 profiles.

4. Retention and Separation: Medical, Administrative Boarding Actions, and
Separation Evaluations

a. MEB physicians will modify profiles submitted to the MEB if the condition and
duty limitations are deemed to meet retention standards. The MEB physicians will
update the profile with the appropriate duty limitations, PULHES, and the S physical
category code. Profiles for conditions determined not to meet retention standards will
progress through the DES.

b. When Soldiers are found fit for duty through the DES, the Army Physical
Disability Agency will apply the Y physical category code and submit the case file to the
MEB physician for review and possible update of the profile. The update will include the
option of applying or removing DL physical category codes based on the entirety of the
information the DES considered.

c. When a MAR2 is complete:

   (1) Regular Army: U.S. Army Human Resources Command will apply the W
code for retained and reclassified Soldiers. At the completion of the administrative
review, the Soldier’s primary care provider will determine if he/she has any DL
conditions and will apply a V or F physical category code as indicated.
(2) ARNG/ARNGUS: State Surgeons will establish policies and processes for awarding profiles to Soldiers with the W, V, and/or F codes, if warranted.

(3) USAR: The Army Reserve Medical Management Center will determine if the Soldier has any DL conditions and apply a V or F physical category code as indicated. After completion of the administrative review, the Regional Support Commands will apply the W code.

d. Soldiers retained by the MAR2 process or found fit by the DES may be resubmitted for reconsideration if:

   (1) the Soldier’s profile status has changed because of a change in the Soldier’s medical condition; or

   (2) the first O-6 in the Soldier’s chain of command requests a supplemental referral after 120 days because the previously evaluated condition prevents satisfactory duty performance.

e. The separation physical examination requirements of AR 40-501, paragraphs 8-24 and 8-12(c) are superseded by the guidance in references m and w.

5. System Integration. MEDPROS will integrate with the relevant and necessary information technology systems to facilitate readiness reporting.

6. Individual Medical Readiness. As a condition of continued participation, ARNG/ARGNUS and USAR Soldiers are required to complete medical readiness, health, and dental assessments. Company commanders may prohibit reserve component Soldiers from participating in inactive duty training and annual training if they do not meet the requirements of Department of Defense Instruction 6025.19 (reference b).
## DEFINITIONS OF MEDICAL READINESS CODES

### Medical Readiness Classification

<table>
<thead>
<tr>
<th>MRC</th>
<th>Short Definition</th>
<th>Medical Definition</th>
<th>Commander Deployability Personnel Determination</th>
</tr>
</thead>
</table>
| MRC 1 | Medically ready / deployable | MRC 1
Meets all medical readiness requirements and Dental Readiness Class 1 or 2
– Temp profile ≤ 7 days | Not Required |
| Partially medically ready / deployable | MRC 2
Soldier is deficient in one of the following:
– 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 eyeglasses, MCEP-I, MWT, and hearing aid with batteries if required) | Not Required |
| Not medically ready / nondeployable and commander determines deployability for:
– Temp profile > 14 days (DL 1)
– Dental Readiness Class 3 (DL 2) | MRC 3
Soldier is deficient in one of the following:
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. |
| Not medically ready / nondeployable and commander determines deployability (default nondeployable) | MRC 4
Status is unknown.
Soldier is deficient in one of the following:
– 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

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Army Directive 2016-07

Enclosure 1 to Enclosure 2
NEW PHYSICAL PROFILE (DA FORM 3349)

PHYSICAL PROFILE RECORD
The proponent agency for this form is the Office of the Surgeon General

SECTION 1: SOLDIER INFORMATION
1. NAME (Last, First, Middle Initial)  
   Doe, John, S
2. RANK COL
3. DoD ID NUMBER 123-45-6789-1
4. COMPONENT COMPO 3 (Reserve)
5. CURRGC J
6. UIC WSIBWA0

7. UNIT, ORG., STATION, ZIP CODE OR APO, MAJOR COMMAND  
   94th CSF (A. Co.), N. Little Rock, AR 72118, 807th MDSC
8. AOC/MOS/SKU/OCC/TITLE  
   66H/Med Surg Nurse/Clinical Head Nurse

SECTION 2: PERMANENT PROFILE
9. REASON FOR PROFILE: (In Lay Terminology)  
   High blood pressure
   Hearing Loss
   Low back pain
COMBINED PULHES 2 1 2 3 1 1

10. PULHES
11. PROFILE CODES
12. PROFILING PROVIDER
13. APPROVING AUTHORITY
14. DATE
   Smith, M MD
   Field, S MD
   02022016
   1202015
   05152004

SECTION 3: ACTIVE TEMPORARY PROFILE(S) AS OF:
15. REASON FOR PROFILE: (In Lay Terminology)
   Ankle pain
   Shoulder pain
   Thumb pain
   TOTAL DAYS ON TEMPORARY PROFILE IN THE LAST:
   12 MONTHS: 10
   24 MONTHS: 40
   DATE: 02022016

16. SEVERITY
   Severe
   Moderate
   Mild

17. MECHANISM OF INJURY
   Sports
   Training
   Off-Duty Activities

18. DUTY STATUS
   AD
   AD
   AD

19. EXPIRATION DATE
   02122016
   03012016
   03022016

20. DAYS ON PROFILE
   10
   40
   40

21. PROFILING PROVIDER
   Smith, M MD
   Smith, M MD
   Field, S MD

22. IS SOLDIER AVAILABLE TO TAKE RECORD APFT? NO
   IF "NO", ANTICIPATED APFT AVAILABILITY DATE: 03022016

SECTION 4: FUNCTIONAL ACTIVITIES
24. A SOLDIER MUST BE REFERRED TO THE DISABILITY EVALUATION SYSTEM (DES) IF THERE IS AT LEAST ONE PERMANENT (P) "3" IN THE PULHES AND LIMITATION(S) NOTED IN THE FUNCTIONAL ACTIVITIES. TEMPORARY (T) LIMITATIONS DO NOT CAUSE REFERRAL TO DES.

   INDICATE THOSE ACTIVITIES THAT THE SOLDIER CANNOT PERFORM BY PLACING AN "N" IN THE APPROPRIATE COLUMN(S).

   a. Physically and/or mentally able to carry and fire individual assigned weapon?  P T

   b. Ride in a military vehicle wearing usual protective gear without worsening condition?  N

   c. Wear helmet, body armor, and load bearing equipment (LBE) without worsening condition?  N

   d. Wear protective mask and MOPP 4 for at least 2 continuous hours per day?  N

   e. Move greater than 40 lbs. (e.g. duffle bag) while wearing usual protective gear (helmet, weapon, body armor, LBE) up to 100 yards?  N

   f. Live and function, without restrictions in any geographic or climatic area without worsening condition?  N

25. ADDITIONAL PHYSICAL RESTRICTIONS (CHECK IF APPLICABLE)

   b. STANDING LIMITATION: Permanent: 15 min Temporary: 40 min
   c. MARCHING WITH STANDARD FIELD GEAR: Permanent: Time: ___ min / Distance: ___ mi  Temporary: Time: ___ min / Distance: ___ mi

26. MEDICAL ADMINISTRATIVE BOARD STATUS:  Complete

SECTION 5: MEDICAL INSTRUCTIONS TO UNIT COMMANDER (PERMANENT RESTRICTIONS LISTED IN BOLD TYPE)

27. Soldier needs to maintain a 90-day supply of his medication. This Soldier has a permanent hearing loss that requires him to maintain his hearing aids and a 6-month supply of batteries. A comprehensive evaluation has determined that the Soldier may have hearing difficulties, especially in noise.

   Commanders should be aware of this limitation and ensure the Soldier’s hearing capability does not interfere with assigned tasks. Recommend fitting with tactical earplugs or tactical communication and protection system (TCAPS) for training and deployments.

   Refer to the installation Army Hearing Program manager for mission-specific recommendations.

   Adherence to these recommendations will minimize the likelihood that the Soldier will sustain further hearing loss.

   Soldier may not stand for more than 60 minutes for the next 10 days, load-bearing limitation to 20 pounds for the next 10 days. Soldier may not lift more than 20 pounds for the next 21 days. Soldier must complete his assigned exercises three times a day.

DA FORM 3349, _____ 2016

PREVIOUS EDITIONS ARE OBSOLETE
SECTION 6: ARMY PHYSICAL FITNESS TEST (SEE FM 7-22)

<table>
<thead>
<tr>
<th>Event</th>
<th>P</th>
<th>T</th>
</tr>
</thead>
<tbody>
<tr>
<td>26. APFT EVENT</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>29. ALTERNATE APFT</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>(Only if Soldier is unable to do APFT 2 mile run)</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>2 MILE RUN</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>APFT WALK</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>SIT-UPS</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>APFT SWIM</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>PUSH-UPS</td>
<td>X</td>
<td>x</td>
</tr>
<tr>
<td>APFT BIKE</td>
<td>X</td>
<td>x</td>
</tr>
</tbody>
</table>

SECTION 7: PHYSICAL READINESS TRAINING CAPABILITIES
(SEE FM 7-22, ACTIVITIES RELATED TO PERMANENT CONDITIONS ARE IN BOLD TYPE)

30. RESTRICTED: No running, jumping, lifting or Military Movement Drills. No combatives. Conditioning Drill 1: No Power Jump or V-Up. No Heel Hook or Leg Tuck. Load bearing: No foot march or movements with body-armor/ruck. No standing in gear. Walk at own pace and distance not to exceed 15 minutes. Must be able to maintain 3mph without pain or limp, otherwise must use Endurance Training Machine. Shoulder Stability Drill, Push-Up/Sit-Up Drill, Overhead Arm Pull.


STANDARD: Preparation Drill: Forward Lunge, Endurance Training Machines: Bike, Upper Body Cycle. Recovery Drill:

* Soldier may modify these activities and the movements required to reach the starting position in accordance with Ch 6, FM 7-22.

** When performing Strength Training, must ensure that the position or movement does not strain the spine. Climbing Drill: must execute caution when mounting and dismounting the bar; if spotters are not able to safely assist or if the Soldier has to jump down to the ground, this activity should be restricted and not performed.

***May participate in approved aquatic rehabilitation program.

Soldier will be placed in Level 1 (gym-based) or Level 2 Reconditioning Program according to entry and exit criteria in Ch 6, FM 7-22.

Soldier should perform injury specific exercises as prescribed by the medical provider during unit Physical Readiness Training.

Additional Physical Readiness Training RESTRICTIONS:
No Guerilla Drill
No Obstacle Course
No Conditioning Drill 2 and 3

SECTION 8: UNIT COMMANDER

31. COMMANDING OFFICER:
Digital Signature 12345678

32. DATE: 02022016

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Army Directive 2016-07 Enclosure 2 to Enclosure 2
ADJUSTMENTS TO ADMINISTRATIVE POLICY

1. Policy. Commanders across all components are directed to report personnel readiness in accordance with the following definitions effective with the July 2016 unit status reporting period. The authoritative data system counts personnel as deployable unless a nondeployable condition exists.

   a. Deployable. A Soldier under the direct operational control of the reporting unit, whether present or able to be present within 72 hours, who is in compliance with all required personnel readiness standards and is not restricted from deploying to perform the unit’s core designed and assigned mission.

   b. Nondeployable. A Soldier who is restricted from worldwide deployment for a unit’s core designed or assigned mission for one of the following reasons:

      (1) **Does not meet the baseline individual readiness standards for worldwide deployment as follows:**

         (a) Lautenberg Amendment. The Soldier is known to have a conviction of a misdemeanor or felony crime of domestic violence. (See reference k.)

         (b) Legal Processing. The Soldier is:

            • under criminal investigation by civil or military authorities for the commission of a serious offense. A Soldier is under investigation for the commission of a serious offense if a punitive discharge is, or would be, authorized for the same or closely related offense under the Manual for Courts-Martial.

            • pending discharge or separation. In cases of administrative separation, a Soldier is pending separation when he has been formally notified of his commander's intent to initiate separation and is flagged in accordance with AR 600-8-2.

            • under arrest and/or being held in confinement by military or civilian authorities.

            • pending military court-martial or civilian criminal proceedings for the commission of a serious offense, as defined in paragraph 1b(1)(b). A Soldier is pending court-martial proceedings when the Government has preferred charges against the Soldier under the Uniform Code of Military Justice. A Soldier is pending civilian criminal proceedings when criminal charges have been filed against the Soldier in Federal or State court.
In coordination with their servicing Office of the Judge Advocate General, unit commanders may determine that the legal actions do not prevent a Soldier from deploying with his/her unit.

(c) Sole Survivor/Surviving Family Member. A Soldier who has sole surviving son and/or daughter status or surviving Family member status. (See reference p, paragraph 3-8.)

(d) Conscientious Objector. Soldiers with an approved conscientious objector status. (See reference p, table 3-1.)

(e) Soldiers under the age of 18. (See reference p, paragraph 3-8.)

(f) Family Care Plan. Soldiers requiring Family care plans who have no evidence of a current or validated plan. (See reference k, paragraph 5-5.)

(g) Parenthood:
   • Adoption. A parent adopting a child is nondeployable for 6 months after the child is placed in the home. (See reference p.)
   • Postpartum Operational Deferment. Military mothers of newborns 6 months after childbirth. (See reference p.)

(2) Does not meet the combatant commander’s mission-specific individual readiness standards when tailored for accomplishment of an assigned mission. As determined by the unit commander, the Soldier is unable to comply with theater-specific combatant commander requirements as applicable.

(3) Cannot be under the direct operational control of the reporting unit (present or able to be present within 72 hours).

(a) Transition Leave. Soldiers who completed final outprocessing and are on transition leave.

(b) Absent Without Leave. The Soldier is absent without leave. (See references j and s.)

(c) Operational Control. Individual Soldiers who are not under the operational control of the unit for deployment (for example, have deployed separately, rear detachment, Army Medical Department Professional Filler System, temporary change of station, etc.).
(d) **Missing/Prisoner of War.** Soldiers with a duty status as Captured, Interred, Missing, Missing in Action, or Duty Status Whereabouts Unknown. (See reference p, table 3-2.)

(e) **Unsatisfactory Participant.** The Soldier attained his/her ninth unexcused absence or the date the Soldier is determined to be an unsatisfactory participant for failing to attend or complete the entire period of annual training. (See reference f, paragraph 4-12.)

(f) **Assigned Not Joined.** An Army National Guardsman or Army Reserve Soldier or is considered assigned not joined when the Soldier was previously reported as failure to gain and has arrived at the unit. (See reference j, paragraph 3–5.)

(4) **Soldiers who have not graduated from an AOC/MOS-awarding course.** This category also includes Soldiers enrolled in the Simultaneous Membership Program who have not completed their educational requirements in accordance with AR 601-210.

(5) **Commander’s Call.** The commander’s determination on deployability, or commander’s call, occurs when a Soldier’s situation does not meet any of these criteria and the commander determines the Soldier is nondeployable. Information technology systems will be developed to enable commanders to show this determination in the respective authoritative data sources (all components) that populate the Defense Readiness Reporting System-Army.
ADJUSTMENTS TO THE READINESS REPORTING POLICY IN AR 220-1

1. Readiness Reporting
   a. Commanders will no longer report the “available” status of personnel as it relates to unit readiness reporting, but will instead report the “deployable” status of all personnel through the Army’s readiness reporting system as it relates to unit personnel readiness status (P level).

   b. The commander’s override to a Soldier’s administrative and medical deployability status will be performed in the authoritative data sources that provide the medical and administrative readiness status (for example, MEDPROS, Regional Level Application Software, the Electronic Military Personnel Office, and/or the Standard Installation/Division Personnel System. This capability will no longer reside in NetUSR.

2. Overall Unit Readiness. This directive does not change the assessment of the unit overall readiness to perform its core mission in accordance with its designed capabilities or assigned mission. A unit’s C-Level and A-Level assessments will continue to be derived from the four measured areas of P, S, R, T levels, or the two measured areas of assigned mission manning and assigned mission equipment, respectively.

3. Personnel Measured Areas (P-Level). Units will measure personnel readiness using three metrics: Total Deployable Strength, Assigned Military Occupational Specialty skills match, and the Deployable Senior Grade Composite level. Additionally, the terms available/nonavailable will be replaced by deployable/nondeployable with updates to administrative and medical criteria to determine Soldier deployability.