

**Change 138**  
**Manual of the Medical Department**  
**U.S. Navy**  
**NAVMED P-117**

**2 May 2011**

To: Holders of the Manual of the Medical Department

1. **This Change** revises Chapter 15, article 15-112, Annual Health Assessment Recommendations for Active Duty Women.
  
2. **Summary of Change.** To change verbiage in MANMED Chapter 15, article 15-112, paragraph 7(b) to provide clarification to paragraph 15.C.2.F, United States Central Command (USCENTCOM) Modification Ten Individual Protection and Individual/Unit Deployment Policy. Verbiage will read: *Overseas Contingency Operations Support Assignment (OSA)*. Servicewomen deploying to OSAs will follow the Combatant Commander requirements outlined in the current BUMEDINST 1300.3 series.
  
3. **Action.** Remove MANMED Chapter 15, article 15-112, page 15-107 and replace with revised page 15-107.

  
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(2) **Women age 50 -74.** Routine, biennial screening mammography per USPSTF recommendations.

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*Note: Evidence is insufficient to assess the additional benefits and harms of either digital mammography or magnetic resonance imaging.*

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(f) **Other Screenings.** As indicated by USPSTF recommendations.

(4) Immunization status must be reviewed to ensure all required immunizations have been administered and are current. Overdue immunizations must be administered and the Servicewoman should be advised when forthcoming immunizations are due.

(5) Occupational risk and surveillance must be evaluated and reviewed for appropriate monitoring. Ensure pertinent screening is documented within the medical record and updated on the DD 2766.

(6) **Counseling Requirements.** Counseling is required to be performed annually and documented on the DD 2766. Counseling can be done in conjunction with the periodic health assessment. Counseling should be based on an individual's lifestyle, history, and take into account the Servicewoman's concerns, risks, and preferences. Elements include, but are not necessarily limited to the following:

(a) Unintended pregnancy prevention, family and career planning, and sexually transmitted disease (STD) prevention.

(1) Birth control options available, the efficacies, and the ability of different contraceptive methods to protect against STDs and HIV infection.

(2) Emergency contraception (including discussions that it is not a form of birth control), the efficacy and safety, and how it can be obtained.

(b) Health promotion and clinical preventive services counseling should be targeted to an individual's profile.

(1) Counseling may include information on proper exercise, sleep hygiene; prevention of cancer, heart disease, stroke, injury, heat/cold illness, depression, suicide, violence, etc.

(2) Nutrition counseling should include discussions regarding folic acid, calcium supplements, vitamin D supplements, cholesterol level, caloric intake, etc.

(3) Risk behaviors (i.e., tobacco, alcohol and drug use; multiple sexual partners, non-seat belt use, etc.).

(4) Prevention and risk reduction methods for physical, emotional, and sexual assault.

(7) **Exceptions to Examination Recommendations.** When a health care provider determines a Servicewoman does not require a portion of the annual health assessment examination, the provider shall discuss the basis for this determination and advise her of the timeframe for, and the content of, the next examination.

(a) **Exceptions and recommendations** should be documented in the electronic health record or the hard copy medical record on the SF 600.

(b) **Overseas Contingency Operations Support Assignment (OSA).** Servicewomen deploying to OSAs will follow the Combatant Commander requirements outlined in the current BUMEDINST 1300.3 series.

(8) **Notification of Results**

(a) **Pap Smear Results.** Normal Pap smear results will be provided to the patient within 30 days and abnormal results will be provided to the patient as soon as possible.

(b) **Mammogram Results**

(1) Screening mammogram results will be provided to the patient within 30 days of the mammogram being performed.

(2) Diagnostic mammogram (e.g., for evaluation of a lump) results will be provided to the patient as soon as possible.