



# United States Naval Hospital Yokosuka, Japan

## Overseas Screening Suitability Screening Fact Sheet

USNH Yokosuka has limited specialty care available and services which are required by some patients may not be available. All of the Branch Health Clinics are staffed by Family Medicine providers only and all medical conditions should be able to be managed at this level of care. Branch Health Clinics have minimal to no mental health capabilities, particularly for pediatric patients. USNH has family medicine, internal medicine, general pediatrics, ENT, Orthopedics, general surgery, OB/GYN, Ophthalmology, Urology, Neurology, and Dermatology. There are NO adult or pediatric subspecialty providers. Dental services, particularly specialty care, are very limited with priority for active duty members. Dependents are seen on an emergent and/or space available basis only and, as such, necessary dental procedures should be completed prior to submission of screening paperwork.

Determinations for suitability will be based on the available resources which can be provided by USNH Yokosuka or the relevant local Branch Health Clinics and NOT based on potentially available host-nation resources as the local healthcare community is under no obligation to accept our patients. Some conditions which could be considered suitable for assignment in Yokosuka may not be suitable for Branch Health Clinic locations.

### **Medical conditions that may result in disapproval that may need more information:**

1. Medical Adjuncts: Due to possible unavailability of services, overseas clearance may be disapproved if a family member has requirements to include but not limited to:
  - Braces/splints (difficulty in obtaining parts, supplies and/or repair services)
  - Prosthetics for major limbs (difficulty in obtaining parts, supplies and/or repair services)
2. Services: Overseas clearance may be disapproved if a family member requires care by the following sub-specialists or has other requirements for ongoing care of chronic medical conditions to include but not limited to:
  - Cardiology, gastroenterology, endocrinology, pulmonology, allergy and immunology, nephrology, rheumatology, endocrinology, hematology-oncology, podiatry, bowel or bladder rehabilitation services or pediatric sub-specialists
  - Medications not available and without an easy substitute (i.e. Immunosuppressive or other biological agents)
  - Laboratory monitoring required in a timely fashion that is not available (e.g., drug levels)
  - Any specialty requiring MEDEVAC
  - Infertility: Seen on a space-available basis. No advanced reproductive services are available and if desired will require out of pocket payment for host-nation care.
3. Specific medical conditions may not be supported due to lack of medical and/or community resources:
  - USN dependents with EFMP category 3 or equivalent conditions with other services will be considered on a case-by-case basis to Yokosuka only if we have the relevant resources required in the particular case
  - Bilateral deafness (i.e. requiring full time sign language translator)
  - Morbid Obesity (BMI >40 kg/m<sup>2</sup> or 35 kg/m<sup>2</sup> in the presence of co-morbidities) as there are no bariatric resources available, max weight for CT/MRI is 330lbs, max weight for host nation ambulance gurney, colonoscopy, and EGD is 220lbs, and host-nation resources are extremely reluctant to accept obese patients.
4. Psychiatric Conditions: Branch Health Clinics have minimal to no mental health capabilities, particularly for pediatric patients. If psychiatric care is needed or frequent therapy is required for stability, these needs may overwhelm available resources. Mental health conditions should have documented clinical stability without specialty care to be considered suitable. These conditions require EFMP and include, but are not limited to, the following conditions:
  - Major Depression, unspecified depression or dysthymia
  - Anxiety Disorders
  - Personality Disorder



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- Adult ADHD
  - Active or ongoing history of substance use/abuse due to no treatment resources
5. By the discretion of the Overseas Screening Committee.

### **Pediatric conditions that may result in disapproval that may need more information:**

1. Any Navy dependent child assigned EFMP category 3 (no overseas assignment), or equivalent categories in other services, will be considered on a case-by-case basis to Yokosuka only if we have relevant resources required in the particular case.
2. Minor congenital heart defects that require annual, or less than annual pediatric cardiology follow-up.
3. Autistic spectrum diagnosis will only be considered on a case-by-case basis. However, strongly discourage autism spectrum disorders due to lack of community resources and mental health services.
4. Mental health/behavioral conditions, to include but not limited to the following, should have documented clinical stability without specialty care:
  - Any mental health contact including: therapy, ADD or ADHD, major depression, unspecified depression, dysthymia, anxiety disorders, any medication management.
  - Any special educational contacts that can't be supported by local EDIS.
  - Any foster care placement in the last 5 years.
5. Stable medical conditions that have been followed by a pediatric subspecialist but do not require follow-up during the duration of sponsor's tour (e.g. hypothyroidism stable on medications) can be considered on a case-by-case basis.

### **Dental Conditions that may result in denial for overseas screening assignment:**

1. Oral Diagnosis:
  - Any undiagnosed radiographic lesion
  - Acute tissue lesion or condition requiring further evaluation or urgent treatment such as major aphthous stomatitis, erythema multiforme, glossodynia, primary herpetic gingivostomatitis, erythroplakia, mixed red and white or white lesions without obvious etiology.
  - Chronic oral infection or other pathological lesion:
    - Pulpal or periapical pathology requiring treatment.
    - Lesions requiring biopsy or awaiting a biopsy report.
    - Requiring an endodontic consult or treatment.
  - Oral condition that requires urgent treatment. Any symptomatic lesion (acute pain, swelling, or bleeding). Includes emergency situations requiring therapy to relieve pain, treat trauma, treat acute oral infections, or provide timely follow-up care (drain or suture removal) until resolved.
  - Orofacial Pain (Temporomandibular disorders, headache, neuropathy, facial –cervical myofascial conditions) and requires active treatment.
2. Operative Dentistry: (\*) denotes highest priority restorative conditions
  - \*All symptomatic caries lesions and symptomatic defective restorations.
  - \*Symptomatic cracked tooth syndrome.
  - \*Cavitated or non-cavitated caries lesions extending one-third of the way or greater into dentin radiographically.
  - All cavitated carious lesions.
  - Faulty restorations and recurrent caries likely to cause symptoms or tissue damage within 12 months (i.e., open margins, cracked restorations, overhangs compromising periodontal health through asymptomatic bone resorption).



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- Anterior teeth with completed endodontic treatment but not permanently restored and require full coverage. If significant tooth structure is missing (i.e. - significant marginal ridge involvement), a post core and crown are recommended.
  - Tooth fractures or defective restoration not maintainable by the patient or with unacceptable esthetics.
3. Endodontics:
- Traumatic dental injuries that require treatment, including splints and endodontic therapy.
  - Teeth with irreversible pulpitis (symptomatic and asymptomatic).
  - Teeth with a painful response to biting, percussion, or palpation with or without apical radiolucencies (symptomatic apical periodontitis).
  - Asymptomatic teeth with apical radiolucencies of pulpal origin (asymptomatic apical periodontitis).
  - Pulp caps and pulpal regeneration techniques that require endodontic therapy.
  - Pulp necrosis.
  - Asymptomatic or symptomatic teeth with a chronic apical abscess (presence of a sinus tract).
  - Acute apical abscess (infection of pulpal origin characterized by rapid onset, spontaneous pain, tenderness of the tooth, pus formation, and swelling of associated tissues).
  - Previously initiated endodontic therapy.
  - Symptomatic endodontically treated teeth.
  - Endodontically treated teeth with evidence that an apical radiolucency has increased in size within the previous year.
  - Teeth with completed endodontic treatment but not permanently restored.
  - Condensing osteitis (diffuse radiopaque lesion representing a localized bony reaction usually seen at the tooth apex; corresponding abnormal response to pulp tests).
4. Oral Surgery:
- Teeth associated with pathosis. Examples include: follicular cystic changes associated with impacted teeth, distal caries in the lower second molar resulting from position of third molar, external or internal resorption, and currently symptomatic or recurrent episodes of pericoronitis.
  - Erupted, partially erupted, unerupted, or malposed teeth with historical, clinical, or radiographic signs or symptoms of pathosis including partially impacted teeth that will never erupt into occlusion and have oral communication and are recommended for removal. Note: Clinical judgment may supersede these criteria in individual cases.
  - Surgical incision or excision of pathologic lesions for histologic examination.
  - All non-restorable teeth, retained root tips, or parts of teeth that could cause an infection.
  - Conditions requiring follow-up care, such as suture removal, drain removal, post-op awaiting biopsy report.
  - Temporomandibular disorders or myofascial pain dysfunction that requires active treatment.
  - The post-surgical healing, intermaxillary fixation and follow-up of orthognathic surgery, surgical and adjunctive treatment of disease, injuries and defects of the oral and maxillofacial regions.
  - Surgical treatment of temporomandibular joint dysfunction following unsuccessful non-surgical management.
5. Periodontics:
- Acute pericoronitis, acute gingivitis, or acute periodontal disease.
  - Periodontal abscess.
  - Acute periodontal manifestations of systemic disease or hormonal disturbances.
6. Prosthodontics:
- Edentulous areas or teeth requiring immediate prosthodontic treatment for adequate mastication, communication or esthetics.



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- Ill-fitting or unserviceable prostheses. Castings or computer aided design and computer aided manufacturing (CAD CAM) restorations associated with recurrent caries.
  - Any fixed partial denture with loose abutments; any loose implant retained restoration (fixed). or any loose implant abutments (removable).
7. Orthodontics:
- Facial anomalies (cleft lip, cleft palate, hemifacial microsomia, etc.)
  - If patient has ongoing orthodontic treatment please contact the gaining the hospital to ensure treatment can be continued.
8. Pedodontics:
- All children 4 years and older should have anterior occlusal films and posterior films to rule out interproximal caries.
  - Any radiographic and visible caries.

### **Medical Conditions that will result in automatic denial for overseas screening assignment:**

1. USN family members with EFMP Category 4 or 5 or equivalent conditions with other services.
2. USN family members with EFMP Category 6 or equivalent conditions with other services.
3. Medical Conditions (to include but not limited to those below) that cannot be supported due to lack of resources, expertise, or specialty care.
  - Family members with tracheostomies and/or home ventilators have medical needs that cannot be met here
  - Home oxygen (difficulty obtaining equipment, no oxygen concentrators, equipment not delivered)
  - G-Tube/Feeding tube (difficulty obtaining equipment)
  - Wheelchair/walkers (difficulty obtaining parts, supplies and/or repair service, no housing modifications, no vehicle modifications)
  - Family members with ventriculoperitoneal shunts for treatment/management of hydrocephalus have medical/surgical needs that cannot be met here
  - Amputation of major limb within the past two (2) years
  - Dialysis
  - Family members with asthma who have had two (2) or more ICU admissions in past two years
  - Medical conditions which require follow-up by specialty services not available at Naval Hospital Yokosuka
  - Cardiology, Gastroenterology, Endocrinology, Rheumatology, Allergist, or any other sub-specialties not available at Naval Hospital Yokosuka
  - Facility limitations, i.e. morbid obesity, bowel/bladder rehabilitation
  - Aplastic anemia or being considered for bone marrow transplant
  - Taking or requiring TNF alpha inhibitors (Humira or similar medications)
  - Medical conditions which have a high probability of resulting in ICU admissions
  - Diabetes Mellitus Type I
  - Gastric bypass for morbid obesity or any related subsequent complications due to the surgery or the related morbid obesity within the past three years
4. Psychiatric conditions to include but not limited to the following are unsuitable due to being high-risk patients in a location with limited mental health resources and a lack of inpatient psychiatric care:
  - Psychiatric conditions which have required one or more inpatient hospitalizations in past 10 years
  - Psychiatric conditions in which there is a history of admission to or recommendation for “day hospital” or “partial hospital” in past 10 years



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- Psychiatric conditions where there is a history of admission to or recommendation for “residential treatment” in past 10 years
  - Aggressive, destructive and/or illegal behaviors
  - Active or substantiated family advocacy case within the past 2 years
  - Psychiatric conditions where the patient is on antipsychotic medications
  - Substance abuse/dependence or treatment over past 5 years
  - Schizophrenia
  - Bipolar disorder
  - Dementia
  - Suicide attempt/gesture within past 5 years
  - Dissociative disorders
  - Sexual Addiction
  - Eating disorders
  - All borderline personality disorders
5. Orthopedic Conditions due to lack of specialty care and/or obtainable resources:
- Any limb amputation requiring prosthesis
  - Scoliosis undergoing surgical or brace treatment
  - Cerebral Palsy requiring orthopedic surgery or bracing
  - Children being treated for limb length inequality
  - Patients with anticipated need for joint replacement surgery
6. By the discretion of the Overseas Screening Committee.
7. Lack of medical documentation confirming medical status at time of presentation to the Screening Committee.
8. Failure to disclose and/or providing false information, including failure to disclose any or all civilian medical care.

#### **Pediatric Conditions that result in automatic disapproval due to lack of appropriate resources and specialty care:**

1. Any Navy/USMC dependent child assigned EFMP 4 (major MTF CONUS) or higher, or equivalent assignment in other services.
2. Due to lack of specialty care and PICU resources, any child with asthma that:
  - Is diagnosed, or treated, as moderate or severe persistent
  - Has required 2 or more hospitalizations in the last 3 years
3. Need for wheelchairs, walkers, AFOs, and/or other orthotic devices.
4. Hearing impairment
5. G-tube/Feeding tubes
6. Ventriculoperitoneal shunts
7. Type I diabetes mellitus
8. Congenital heart defects that have required, or are likely to require significant surgical intervention.
9. Cystic fibrosis or currently being evaluated for possible cystic fibrosis.
10. Allergic conditions requiring immunotherapy (allergy shots)
11. History of leukemia or other pediatric cancer
12. Any condition not listed above that requires regular follow-up by a pediatric subspecialist (such as pulmonology, cardiology, endocrinology, hematology, oncology, GI).



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13. Mental health/behavioral conditions due to severely limited pediatric mental health services:
- psychotic, bipolar, or eating disorder
  - required any kind of inpatient treatment in the last 3 years
  - history of recent or chronic suicide ideation or behavior, self-harm, self-injurious behavior, or suicide attempts
  - Any conditions that have required multiple emergency room visits
  - Any history of aggressive, destructive, and/or illegal behaviors
  - Any history of juvenile convictions or parole
  - Any history of substance abuse
  - Any foster care placement in the last 3 years