



The Review

NBIMC News, Updates, & Announcements

June 2025

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NBIMC is located on the NSA Bethesda campus in Bldg. 17B.

Hours: 6 a.m. to 5 p.m.
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dha.bethesda.wrnmcc.mbx.nbi.mc@health.mil



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Naval Information Warfare Center (NIWC) Team Update: Welcoming New Faces and Looking Ahead!

The Naval Information Warfare Center (NIWC) plays a crucial, ongoing role in the development and operations of NBIMC’s HIV Management System (HMS). Recent changes to the NIWC team include one farewell and two warm welcomes. Additionally, an important visit from select NIWC staff is on the horizon (details provided below).

It's with a heavy heart that we announce the departure of **Mr. Chip Newman** from the NIWC team. We wish Chip all the best in his future endeavors and his presence will be missed!

However, as one chapter closes, a new one begins! We are thrilled to welcome two new members to the NIWC family: **Mr. David Fay** and **Mr. Andrew Schmidt**. NIWC also have a summer intern joining them, Mr. Isaac Jacobs, a senior at the University of New Orleans. NBIMC is excited for the expertise and fresh perspectives these new members will bring to our projects, and we look forward to their contributions to the team's success. Please join us in extending a warm welcome to David and Andrew!

Looking ahead, we're preparing for a significant engagement as **CACI** contractor team is scheduled to visit the NBIMC team in Bethesda on **June 10 and 11**. This visit presents a valuable opportunity for collaboration and discussion with CACI, a company known for its extensive work with the U.S. government in delivering expertise and technology to support national security missions, including IT modernization, agile software development, and counter-unmanned systems. We anticipate productive meetings and fruitful discussions during their time with us.

NBIMC is confident that these changes and upcoming meetings will further strengthen our team and enhance our capabilities to support the DoN’s mission.

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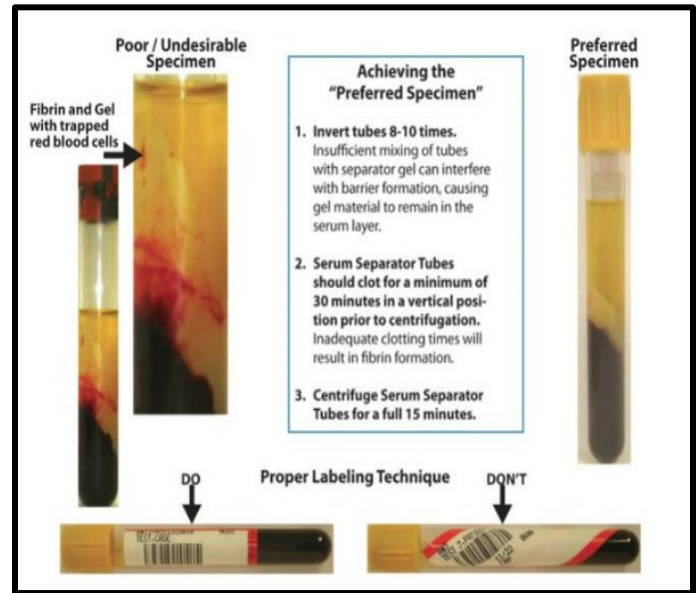
D4 Rejection: “Not Spun Correctly” - REDRAW.

D4 Rejection code for your samples could mean a few things listed below:

1. The sample was not spun down in a centrifuge at all.
2. The sample was not spun fast enough.
3. The sample was not spun for the correct amount of time.

***Numbers 2 and 3 lead to the red blood cells breaking through the gel barrier into the serum.

Please review [CDD HIV Specimen Submission Guideline](#).



[Properly centrifuged sample-preferred specimen](#)

Additionally, we would recommend each site check their centrifuge preventive maintenance date, along with ensuring proper maintenance is conducted per the manufacture guideline. Reviewing these dates and guidelines will increase the probability of properly calibrated centrifuging as well.

Center for Disease Detection
11603 Crosswinds Way • STE #100 • San Antonio, Texas 78233
(877) 233-1337 • www.cddmedical.labcorp.com

Centrifugation Instruction

1

GENTLY INVERT 5-10 TIMES TO MIX CLOT ACTIVATOR

2

CLOT FOR 30 MINUTES TO 2 HOURS PRIOR TO CENTRIFUGATION

3

CENTRIFUGE UNTIL FULL SEPARATION

1. After samples have been collected, tubes must be mixed by inverting end to end 5-10 times. **Do not shake tubes.**
2. SST tube samples must be allowed to clot standing **completely upright** for a minimum of 30 minutes and a maximum of 2 hours prior to centrifugation.
3. Centrifuge at 1,800 Relative Centrifugal Force (RCF) for 10 minutes (sheet chart below for Revolutions Per Minute (RPM) conversion)

BLOOD SHOULD NOT BE SHIPPED SOONER THAN 1 HOUR AFTER BEING DRAWN

To determine the correct setting for the RPM speed you must measure the rotor radius of your centrifuge. Tilt one tube to its highest angle and measure from the center of the centrifuge's rotor to the end of the tilted tube (e.g. the furthest end of the tube from the center of the rotor), then compare this measurement, in centimeters, to the below chart. For example: if the rotor radius is 15cm the RPM speed should be set at 3276.

Rotor Radius (cm)	4	5	6	7	8	9	10	11	12	13	14
Speed (RPM)	6344	5674	5180	4796	4486	4229	4014	3826	3662	3519	3391

Rotor Radius (cm)	15	16	17	18	19	20	21	22	23	24	25
Speed (RPM)	3276	3171	3077	2990	2910	2837	2768	2705	2645	2589	2537

Please ensure that the centrifuge is calibrated per the manufacturer guidelines.

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****[CDD Centrifuge Instruction](#) (link embedded)**

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HIV test status in MRRS not updated?

To request a MRRS record update(s), please email dha.bethesda.Walter-Reed-Med-Ctr.mbx.nbimc@health.mil the Last Name, First Name, and DoD ID number of any affected service members. NBIMC staff will review their results to ensure that tests resulted complies with Force Testing Requirements and update the records in MRRS accordingly.

To update a service member's HIV status in MRRS, NBIMC staff need a test result that is compliant with the Force testing requirements. Acceptable results shown in the table below.

Orderable Item Description	Synonym Primary
• HIV-1/O/2 (AF FT EPI)	HIV-1/O/2
• HIV-1/O/2 CDD (Army/Navy FT)	HIV-1/O/2 CDD
• HIV-½ AG/AB 4G CDD	HIV-½ AG/AB 4G CDD

Please note that we cannot use civilian provider or (VA) result to update the HIV readiness in MRRS. HIV results from private/civilian/VA providers are not compliant with the [SECNAVINST 5300.30](#) and [DODI 6485.01](#). In these instructions, testing for HIV must be reported to the Defense Medical Surveillance System (DMSS) and the remaining serum must be sent to the DoD Serum Repository. The member will need to go to an MTF or a NOSC to get the appropriate test completed as indicated above.

Alternate options to fulfill Force Testing (HIV) requirement when MTF is not available.

Utilizing Leidos QTC Health Services is another option for completing HIV force testing. Please contact the customer service department using the link below prior to visiting their location.

<https://www.qtc.com/government/military-readiness/>

For further testing location details for SMs in Reserve Components, Active-duty SMs enrolled in TRICARE Prime Remote, and/or United States Coast Guard (USCG)/Reserve SMs, review the bullet points below.

- All DOD Reservist, Active Duty enrolled in Tricare Prime Remote (less Air Force and Space Force), and Department of Homeland Security USCG/Reserve Service Members can use Reserve Health Readiness Program (RHRP) for HIV blood draws.
 - Once drawn, samples are shipped to CDD for both Army and Maritime to undergo processing and CDD notifies applicable Service Components of the test results.
- ***RHRP does not support Reserve or Active-Duty Air Force and Space Force SMs for HIV draws.

SMs should follow normal RHRP procedures to request medical readiness and deployment related services by following their Service Components guidelines and contacting the RHRP supporting contractor.

Additional test order information below:

- HIV blood draws are ordered by calling the RHRP Call Center or placing requests in the RHRP Service Component portal, or RHRP SM portal.
- HIV blood draws can be provided in “Group Events”. “Group Events” involve the collection of large numbers (minimum of 30) of SMs typically ordered by Commanders/Unit.
- HIV blood draws can also be provided individually in a RHRP network providers office or clinic in the civilian community.

Supply Inventory/Update Reminders

*CDD Requests ALL Sites send a current supply inventory (**supply Inventory Excel spreadsheet**) to military@cddmedical.com.

- Your site may not have all supplies listed on site.
- This is not to initiate supply order requests.
- If you require additional supplies, when necessary, please contact CDD directly at military@cddmedical.com to initiate supply restocking by completing Supply Restocking Form provided by CDD.

Supply Inventory Form

CDD Supply Inventory for your site:	UIC:
Supply Name	Quantity on Hand
Air40 boxes	
Clear Ziploc bags	
FedEx envelopes (purple)	
FedEx clinical paks	
Barcode labels	
Serum tubes (pour off/aliquot)	
SST's (serum separator tubes)	
Tampers seals (red)	
CONUS boxes (large – hold up to 5 Air40's)	
Packaging tape	
	Updated Date

CDD would like to inform sites of Greiner tubes sizing alterations. All 5mL Greiner tubes currently used by CDD have been replaced with 8mL Greiner tubes. Please note that the 8mL Greiner tubes are also the same size as the 7mL Greiner tubes, previously used by CDD. In the meantime, CDD requests that all sites utilize any remaining 5mL Greiner tubes currently available to them.

Rejection Metric Reports

NBIMC has developed Rejection Metric Reports for all laboratory sites to track deficiency data. Reports from January 2024 to December 2024 are now available. Your site will receive an email with reports, please review your site deficiencies data and contact us if you have any question.

- Total # of tests submitted per site/UIC
- Total # of rejections (D2-D9 deficiencies) per site/UIC
- Average percent rejects per site/UIC
- D4 reject totals broken down by D4 reject reasonings
- D1 COR errors & D1 COR % rejects per site/UIC

Site Specific Rejection Metric Reports are **available upon request**. Submit a report request via email to NBIMC Program Analysts:

Julia Wolfrey and Ai Marrero
julia.d.wolfrey.ctr@health.mil;
ai.marrero.civ@health.mil.

POC Site Update Reminders

The Center for Disease Detection (CDD) requests all POC's to inform CDD if/when they will be leaving a site. Additionally, POC's are required to inform CDD of any new POC's and/or any changes to the site's contact list. By continually communicating with CDD, all sites will remain up to date as staff changes occur, allowing for more up to date POC listings.

Please email Military@cddmedical.com; dha.bethesda.Walter-Reed-Med-Ctr.mbx.nbimc@health.mil with any POC site changes.

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Upcoming Holiday

Operations:

Juneteenth, 19 June 2025

CDD OPEN NBIMC CLOSED

Independence Day, 4th July

2025 CDD & NBIMC CLOSED

CDD will be closed on Friday, 4th July 2025 in observance of Independence Day.

All packages that are shipped to CDD on Friday will be held in a FedEx hub on Monday due to the holiday.

CDD will reopen for testing on Monday, 7th July 2025. Please feel free to contact me if you have any questions.

Track Your HIV Testing Shipments

Maintaining accurate tracking records for all HIV testing shipments is crucial. In case of FedEx service disruptions, it's your responsibility to monitor delivery to ensure timely arrival at the CDD.

You can easily track your shipment with tracking number on <https://www.fedex.com/en-us/home.html>.

The "D2 Barcode deficiencies email" indicates specimens haven't arrived and haven't been tested. Sites have 10 days to notify CDD of the shipment status to avoid specimen discard. ***CDD is unable to track specimens by batch numbers. When inquiring, please provide barcode numbers and your site UIC numbers in the email inquiry***.

For questions or issues, contact CDD and NBIMC at: Military@cddmedical.com; dha.bethesda.walter-reed-med-ctr.mbx.nbimc@health.mil

Your vigilance ensures efficient HIV testing process avoiding redraws.

Service Member's Demographics

For MHS Genesis Users: To avoid delay in HIV testing results receipt, please ensure to select correct BENECAT and PATCAT for patients upon their check-ins.


*** [Genesis Patient Check-in Job Aid](#) (linked)***

Website for PATCAT Resources:

❖ FULL LIST of Patient Categories – [Patient Categories | Health.mil](#)

Data Mismatch: D5 Rejection

DEERS displaying suffix is in the entry the first name and when patient information on tube label and order doesn't match, the specimen is rejected as Data Mismatch. To avoid specimen rejection, please verify patient information and write the suffix somewhere on the tube along with the rest of required patient information.



Contact NBIMC and/or CDD for any questions or concerns. Timely communication saves specimens!