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Cynthia.Vaughan@hbg.amedd.army.mil

Contact: Cynthia Vaughan
DSN 371-3317
COM 06221 17 3317

Medical Protection System Ensures Soldier Medical Readiness Documentation

Heidelberg, Germany -- With a web connection and a few simple key strokes-commanders and leaders across Europe can access the medical and dental readiness status of a unit or a Soldier. Leaders at all levels can check for the status of immunizations, physical examinations and 14 other medical readiness factors that ensure Soldiers are medically ready to deploy.

The Army's Medical Protection System, commonly known as MEDPROS, is the primary source to record, track, and report the medical readiness for Soldiers and units. It has been identified by the Army Surgeon General as the medical readiness data source for the Total Army, one that will continue to evolve to meet and respond to force health protection requirements as the Army evolves.

MEDPROS offers commanders and leaders a real time, world wide operational system to manage the medical deployability of units. Keeping in line with the Chief of Staff of the Army's concept of deploying expeditionary forces, it even provides the capability for commanders to assess a unit's medical readiness status and needs based on DoD medical requirements for specific world regions.

According to Col. Allen Kraft, Director, Force Health Protection, Europe Regional Medical Command (ERMC) and US Army Europe (USAREUR), MEDPROS is used across Europe at all echelons as a command medical readiness tool in tracking medical preparedness. "The benefits of MEDPROS to the commander and to the Soldier are many," Kraft said.

Since MEDPROS is used during Soldier readiness processing and during pre and post deployment processing, it provides the added benefit of complete and accurate electronic documentation of immunizations and other Soldier medical readiness requirements before and during deployments, as well as when they return – capturing a comprehensive picture of a Soldier's medical readiness. Additionally, MEDPROS has been used during deployments in areas of Iraq, Afghanistan, Kosovo and Bosnia.

"All Army components – commands, units, Soldiers, civilians and contractors benefit from having a program that allows for the gathering, validating and reporting of medical readiness data. Not only can commanders get a medical readiness snapshot of a unit or of a Soldier from their desk top, MEDPROS allows us for the first time to document electronically and on one data base that we are deploying healthy and medically fit Soldiers," said Ms Delois Klemm, ERMC and USAREUR MEDPROS Medical Readiness Coordinator. "It also insures that same documentation during redeployments from wars or other contingencies so that we can address any health issues that occurred when a Soldier was deployed or health concerns that may potentially arise later as a result of that deployment."

Klemm added that MEDPROS can be used to capture electronically pre and post deployment health assessment forms which are mandated by DoD for every Soldier who deploys 30 or more days.

Since its original inception in 1998 when it was developed to track the Anthrax vaccine compliance rates, the system has been expanded and modified significantly. MEDPROS was initially put to the test in Europe between September 2002 and March 2003 when the Army in Europe documented in MEDPROS the historical immunization data of over 500,000 individual immunizations for approximately 56,000 soldiers.

“For the first time,” Kraft said, “we have an electronic data base that actually tracks the specific immunizations and dates, as well as other medical readiness items. We’ve gone from sorting through paper files of individual medical records to a few key strokes of a central electronic filing system to determine medical readiness, or what needs to be done. We’re moving away from the days when hard copy medical records or immunization records were locked up, lost or misplaced resulting in Soldiers having to receive immunizations again. When the records are posted in MEDPROS they are accessible world wide.”

The campaign to capture the historical shot records was integrated with the influenza campaign, and USAREUR led the Army by documenting the highest flu vaccination compliance of any major Army command ever recorded in MEDPROS for two consecutive years. Last year USAREUR had a command-wide documentation of 93 percent compliance with the influenza immunization program and this year a 95 percent documentation rate. “Army history was made this year with 1st ID and 1st AD recording 100 percent and 99 percent respectively documented in MEDPROS. Many other USAREUR units achieved 97 percent or better,” Kraft said.

Brig. Gen. Elder Granger, Commander, Europe Regional Medical Command and USAREUR & 7th Army Command Surgeon, is impressed with the success of MEDPROS in Europe. “The leadership in USAREUR at every level recognizes that this centralized data system is key to unit readiness. They realize the importance of having medically ready Soldiers to support the expeditionary force and they realize the significance of protecting these Soldiers and documenting these efforts,” he said. “Our medical staffs could not capture this data and serve our Soldiers with this system without that support.”

Granger added that while Soldiers’ individual medical readiness data is now documented in MEDPROS throughout the Army, USAREUR took the lead in 2002 and set the standard for other Army major commands.

On an Army level, MEDPROS won the 2003 Army Knowledge Management Award for Enterprise Systems for collaboration with Army Knowledge Online (AKO) by providing current medical readiness data to individual Soldiers when they sign on to AKO.

In the event there is concern about unauthorized access to these records Kraft emphasized that the data posted and reported on the system is secured and protected by using a combination of logon identifications and passwords as well as firewall and encryption techniques.

According to Kraft, the Army is working to expand MEDPROS and to continue to meet any challenges that occur by continuing to train data entry personnel, emphasize the system and its significance during command briefings and conduct distance learning as well as formal classroom training to maximize use of the program.