



PERSONNEL AND  
READINESS

## UNDER SECRETARY OF DEFENSE

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WASHINGTON, DC 20301-4000

MAR 16 2015

MEMORANDUM FOR UNDER SECRETARY OF DEFENSE FOR POLICY  
GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE  
ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND  
RESERVE AFFAIRS)  
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND  
RESERVE AFFAIRS)  
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER  
AND RESERVE AFFAIRS)  
DIRECTOR OF THE JOINT STAFF  
DIRECTORS OF THE DEFENSE AGENCIES  
DIRECTORS OF THE DOD FIELD ACTIVITIES  
DEPUTY ASSISTANT SECRETARY OF DEFENSE (CLINICAL  
AND PROGRAM POLICY)

SUBJECT: Guidance Concerning International Military Visitors and International Military Students Traveling From or Through Ebola-affected Countries

This memorandum prescribes Department of Defense (DoD) unit responsibilities to ensure the well-being of all International Military Visitors (IMVs) participating in military exchange and liaison programs in the United States and International Military Students (IMSs) attending military training at DoD facilities in the United States, and to ensure appropriate health monitoring of individuals at any risk of exposure to Ebola virus. The determination of at-risk individuals will be made at one of the five designated ports of entry by Department of Homeland Security staff. The term "units" refers to the sponsoring and training units that will be hosting the IMVs and IMSs. This guidance augments that published by the Centers for Disease Control and Prevention (CDC) and local and State government requirements, all of which could change due to public health considerations.

Ebola-affected countries include all countries with an Ebola-related CDC travel health notice of "Warning Level 3" or "Alert Level 2," published at <http://wwwnc.cdc.gov/travel/notices>.

Program managers, including Security Cooperation Officers, will identify participating IMVs and IMSs who will travel from or through Ebola-affected countries to the United States and inform them, prior to entry, of DoD's daily monitoring requirement as well as the requirement to comply with the relevant State and local public health guidance. Upon arrival at the DoD installation, receiving units will brief these individuals on the potential risks associated with Ebola and the resources available to support monitoring and treatment efforts.

Units will be familiar with CDC, State, and local public health guidance, and develop specific guidance and processes for risk mitigation. In addition to alerting the individuals to comply with relevant State and local public health guidance, units will require twice-daily temperature monitoring for IMVs, IMSs, and family members who are authorized by the unit to accompany the IMVs and IMSs, if the individuals travelled in or through Ebola-infected countries within 21 days prior to arriving in the United States. If the IMV or IMS does not have a receiving unit, the IMV's or IMS's escort officer will ensure that the IMV or IMS is monitored

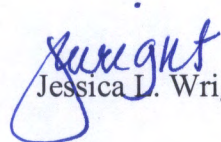
for fevers and symptoms in accordance with CDC and DoD guidelines. Health care personnel (military or civilian) will monitor the individuals for 21 days after arrival in the United States. Units are highly encouraged to provide similar monitoring for family members who accompany IMVs or IMSs even though they were not DoD-authorized or sponsored accompanying personnel. If these family members choose not to be monitored at a Military Treatment Facility (MTF), they still must be actively monitored in accordance with CDC guidelines and must comply with State and local public health guidance.

IMV/IMS dependents and family members who travel with IMVs or IMSs without authorization or sponsorship are approved to obtain daily temperature checks at MTFs for Ebola monitoring to maximize force health protection and to minimize the chances of Ebola transmission in the United States.

In the event an IMV/IMS or family member begins to show symptoms of Ebola Virus Disease during the 21-day monitoring, the units (or escort officer, as appropriate) and supporting military health facilities will coordinate with State and local health departments to transfer patients to the appropriate care provider in accordance with CDC guidance. Signs and symptoms include a fever greater than or equal to 100.4 degrees F. (38.0 degree C.), headache, weakness, muscle pain, vomiting, diarrhea, abdominal pain, or hemorrhage. Units will establish guidance on leave authorizations for IMVs/IMSs. They will not approve leave, except for emergencies, for those who have not been in the United States for at least 21 days.

Units will brief IMVs/IMSs who request leave for travel to and through Ebola-affected countries about potential risks associated with Ebola and the resources available to identify, treat, and prevent the spread of Ebola. The above-mentioned temperature monitoring procedures will apply upon re-entry into the United States.

This policy remains in effect until superseded by an updated policy or rescinded. My point of contact for this action is Colonel Michael J. Paston, who may be reached at michael.j.paston.mil@mail.mil, or at (703) 681-8265.

  
Jessica L. Wright

cc:

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