

DD Form 2900 Primer: Post-Deployment Health Reassessment (PDHRA)

The **Post-Deployment Health Reassessment** using the Post-Deployment Health Reassessment Form (**DD 2900**) is designed for every service member who returns from an operational deployment that required the completion of a Post-Deployment Health Assessment, or PDHA, using the DD Form 2796. The purpose of the reassessment is to identify health concerns that have emerged over time following the most recent deployment and assist in more fully addressing the military member's health care needs and concerns. All health concerns identified on the DD 2900 must be reviewed and discussed with a credentialed health care provider.

- All re-deployed military personnel from every Service, including Reserve Component personnel, must be provided the opportunity to complete the PDHRA.
- Credentialed health care providers who are responsible for reviewing and discussing health concerns with the military member include:
 - Physicians - Physician assistants - Nurse practitioners - Independent duty corpsmen/technicians
- DD 2900 is to be completed using an electronic or Web-enabled form between 90 and 180 days (preferably 120–150 days) after return to home station from a deployment
- For injured individuals who required hospitalization or extended treatment in a military medical treatment facility before return to home station, the PDHRA is conducted 90 to 180 days after their return home

Military Member Roles and Responsibilities

- **Military Member** completes the *Demographics* and *Health History* sections
 - **Demographics:** Includes identification and contact information, service branch, pay grade, and deployment location
 - **Health History:** Comprises 16 screening and triage questions designed to identify health concerns and conditions that may have emerged following the most recent deployment as well as the types of information and assistance that the member would like to have



DD Form 2900 Primer (Side Two)

Health Care Personnel Roles and Responsibilities

- **Health Care Provider** reviews health concerns and conditions with the military member and completes the *Provider Review and Interview* and *Assessment and Referral* sections
 - **Provider Review and Interview:** Provider reviews answers to *Health History* with the member and confirms or modifies/clarifies answers, assesses potential for member to harm self or others, and documents any additional concerns or conditions
 - **Assessment and Referral:** After the interview, provider documents post-deployment health concerns/ conditions and recommends referrals and follow-up
 - Active duty members should be referred to their Primary Care Provider. Direct referral to mental health, community support, and/or appropriate specialty services may also be appropriate
 - For reserve and guard members or separated veterans, a referral to the VA or TRICARE would be appropriate
- **Ancillary Staff/Administrator** documents the type of health information provided to the member, the type of referrals made, and if the member declines to complete the form or accept a referral; provides additional health concern-related education

Documentation

- Original form placed in member's permanent medical record
- Data sent electronically to Army Medical Surveillance Activity (AMSA) for inclusion in the Defense Medical Surveillance System

Follow-up and Ongoing Care

- An active case management process is important for ensuring that care is received
- Providers caring for patients with deployment-related concerns should follow the DoD/VA Post-Deployment Health Clinical Practice Guideline (PDH-CPG)
- Additional information on the PDHRA Program and the PDH-CPG are available on the DHCC Web site: www.PDHealth.mil or by contacting the DHCC Clinicians Helpline

