UNITED STATES ARMY

THE CHIEF OF STAFF

22 MAY 2001

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Warfighter Refractive Eye Surgery Program (WRESP) Guidance

1. The United States Army Medical Command Warfighter Refractive Eye Surgery program (WRESP) establishes Laser Eye Centers in military medical treatment facilities (MTF) at installations designated by the Deputy Chief of Staff for Operations. This program offers soldiers access to corrective laser eye surgery and provides commanders with an important medical resource for the enhancement of soldier readiness. Research studies have validated the safety and efficacy of this procedure in physically active populations. Soldiers performing duties in adverse conditions, often without timely optical fabrication support, will find the lack of dependence on corrective lenses an invaluable asset in the confident execution of their mission.

2. The first Laser Eye Center under WRESP was established at Fort Bragg and over 1500 refractive eye operations have been successfully performed. Additional Laser Eye Centers are schedule for Fort Hood, Fort Campbell, Tripler Army Medical Center, and Landstuhl Regional Medical Center. Experience to date indicates that prioritizing soldiers according to defined operational readiness criteria could better utilize limited eye surgery resources.

3. Major unit commanders must ensure that their subordinate commanders select soldiers wisely for this procedure using the attached criteria. Experience with the program indicates that major unit commands should maintain a by-name list sufficient to satisfy the treatment allocation for that unit over a three month period, and that revalidation of personnel on the list should be performed regularly. The Director of Health Services at WRESP sites will allocate appointments for supported units.

4. The point of contact is COL Glenn Mitchell, Office of the Assistant Chief of Staff for Health Policy and Services, Headquarters, U.S. Army Medical Command, DSN 471-6616 or (210) 221-6616.

ERIC K. SHINSEKI
General, U.S. Army
Chief of Staff

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DEPARTMENT OF THE ARMY
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REPLY TO ATTENTION OF

DASG-ZA

30 APR 2001

MEMORANDUM THRU ~~Director of the Army Staff~~ 7 May 01

FOR Chief of Staff, Army

SUBJECT: Warfighter Refractive Eye Surgery Program (WRESP–ACTION MEMORANDUM

1. Purpose. To secure CSA approval for dispatching the attached memorandum to Army Commanders specifying criteria for optimizing the Warfighter Refractive Eye Surgery Program (WRESP).

2. Discussion.

a. WRESP has been implemented as a limited medical resource available to commanders for enhancement of soldier readiness. Laser refractive eye surgery has been a proven benefit for professional athletes as well as fire, police, and other professionals whose uncorrected visual acuity is a significant factor in their confidence and effectiveness.

b. The first Laser Eye Center under WRESP has been established at Fort Bragg and over 1500 refractive eye operations have been successfully performed. Additional Laser Eye Centers are schedule for Fort Hood, Fort Campbell, Tripler Army Medical Center, and Landstuhl Regional Medical Center. Experience to date indicates that prioritizing soldiers according to defined operational readiness criteria could better spend limited refractive eye surgery resources. Demand for the procedure far exceeds refractive eye surgery resources, and, in the absence of definitive guidance, soldiers have inappropriately been referred for this state-of-the-art medical procedure.

c. The attached memorandum specifies responsibilities for installation commanders and medical treatment facility commanders and establishes 8 criteria necessary to enhance the effectiveness and efficiency of the WRESP at Army installations.

3. RECOMMENDATION: That the CSA sign the attached memorandum.

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JAMES B. PEAKE, M.D.
Lieutenant General
The Surgeon General

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Criteria for Selecting Soldiers for Laser Eye Correction under the Warfighter Refractive Eye Surgery Program (WRESP)

1. At least 18 months remaining on active duty at the time of surgery, or in conjunction with a reenlistment action which is executed.

2. Assigned to a unit whose mission involves operations at the time of battle or behind hostile lines. Special operations and combat arms units such as Infantry, Field Artillery, and Armor Battalions should be given first priority.

3. Combat Service Support unit personnel in present assignments in a Division or separate Brigade should be the second priority.

4. Other active duty service members as space is available.

5. Non-active duty personnel are not authorized treatment under this program.

6. Personnel selected should have at least 12 months remaining in the same or similar unit and should have no adverse personnel actions pending.

7. Individuals selected will be removed from the waiting list should their circumstances change such that they would be in contravention of the above guidelines. Unit commanders are responsible to monitor their selected soldiers.

8. Treated individuals must return for follow-up visits as specified postoperatively in the applicable protocol as a condition of treatment.