NAVY REGION SOUTHWEST

REGIONAL EMERGENCY MANAGEMENT PROGRAM

Annex O

Emergency Health Powers

1. **Discussion**. This Annex establishes DoD policy outlined in DoD Directive 6200.3 (Series) to protect installations, facilities, and personnel in the event of a public health emergency due to biological warfare, or terrorism, or other public health emergency communicable disease epidemic.

2. **Policy**. It is DoD policy that:

a. Military installations, property, and personnel and other individuals working, residing, or visiting military installations shall be protected under applicable legal authorities against communicable diseases associated with biological warfare or terrorism or other public health emergency. Applicable legal authorities include:

(1) Sections 113, 3013, 5013, and 8013 of title 10, United States Code, which generally provides authority to conduct the affairs of the Department of Defense authorized by the Constitution and laws of the United States.

(2) Section 797 of title 50, United States Code, which authorizes any lawful regulation or order for protecting or securing any property or places subject to the jurisdiction, administration, or in the custody of the Department of Defense relating to ingress or egress or otherwise providing for safeguarding the same against destruction, loss, or injury by accident or by enemy or other subversive actions.

(3) Section 1382 of title 18, United States Code, which authorizes the regulation of entry onto military installations.

(4) Section 301 of title 5, United States Code, which authorizes regulations for the custody, use, and preservation of Government property.

(5) Sections 243, 264, 266 of title 42, United States Code, Executive Order 12452, Revised List of Quarantinable Communicable Diseases, 1983, and Title 42, Code of Federal Regulations, Part 70, Interstate Quarantine, which authorize the Director of the Centers for Disease Control and Prevention (CDC) to establish a quarantine to prevent the spread of communicable diseases into the United States,

from State to State, or, in time of war, affecting military and other national defense personnel, and to support State quarantines.

3. **Action**

a. In accordance with DoD Directive 6200.3 (Series) every military commander required by DoD Directive 5200.8 (Series) to issue regulations for protecting and securing property or places under his or her command shall designate a Public Health Emergency Officer (PHEO), who shall be a senior health professions military officer or DoD civilian employee affiliated with the command of the commander or of a higher level or associated command. Authorities and responsibilities of the PHEO are subject to the direction and authority of the commander making the designation. The PHEO should be the Command Surgeon, local equivalent, hospital commander, or other senior leader with experience and training in functions essential to effective public health emergency management. Accordingly, the below designations shall be made:

(1) The Commander, Navy Medical Center San Diego is designated as the Regional Public Health Emergency Officer (PHEO). The area of responsibility shall be the same as the Commander, Navy Region Southwest outlined in the Basic Plan Section of this instruction.

(2) The senior health professions military officer or DoD civilian employee at each Sub-Region Medical Treatment Facility (MTF) is designated as the Sub-Regional Public Health Emergency Officer (PHEO). The area of responsibility shall be the same as the Sub-Region outlined in the Basic Plan Section of this instruction.

b. Every healthcare provider or medical examiner with respect to any illness or health condition, every pharmacist with respect to prescription rates, types, or trends, and every veterinarian with respect to animal diseases shall promptly report to the appropriate PHEO any circumstance suggesting a public health emergency. This is in addition to reports required by otherwise applicable disease surveillance reporting systems, including non-DoD systems.

c. The PHEO shall ascertain the existence of cases suggesting a public health emergency, investigate all such cases for sources of infection, recommend implementation of proper control measures, and define the distribution of the illness or health condition in accordance with DoD Directive 6200.3 (Series).