



DEFENSE HEALTH AGENCY
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18 December 2020

MEMORANDUM FOR DIRECTOR, NATIONAL CAPITAL REGION MARKET
DIRECTOR, JACKSONVILLE MARKET
DIRECTOR, COASTAL MISSISSIPPI MARKET
DIRECTOR, CENTRAL NORTH CAROLINA MARKET
LEAD, DIRECT SUPPORT ORGANIZATION, ARMY
LEAD, DIRECT SUPPORT ORGANIZATION, NAVY
LEAD, DIRECT SUPPORT ORGANIZATION, AIR FORCE

SUBJECT: Guidance on Completion of a COVID-19 Pre-Testing Questionnaire at
Military Medical Treatment Facilities (MTFs)

This Defense Health Agency (DHA) guidance directs MTFs to implement standard processes to ensure all Active Duty Service Members (ADSMs) complete a pre-testing questionnaire when being tested for COVID-19. MTFs will encourage other beneficiaries, who are tested for COVID-19, to complete the questionnaire as well. The guidance implements Health Affairs (HA) "*Guidance for Coronavirus Disease 2019 (COVID-19) Laboratory Pre-Testing Questionnaire*", dated 17 December 2020. The HA policy is available at: <https://info.health.mil/hco/clinicsup/hsd/pcpcmh/sitepages/home.aspx>.

DHA approved the use of a secure, web-based questionnaire to allow rapid, large-scale collection of data for use in controlling the spread of disease, performance improvement and Force Health Protection. The pre-testing questionnaire meets all Department of Defense (DoD) requirements. The Quick Response (QR) code, survey web address and a copy of the survey are available at the Attachment. Both the QR code and the survey may also be downloaded at <https://info.health.mil/hco/clinicsup/hsd/pcpcmh/sitepages/home.aspx>.

This guidance applies to COVID-19 testing accomplished by MTFs, only. MTFs will administer the questionnaire in all COVID-19 testing venues including: laboratory settings, screening centers, clinics, Emergency Departments, and out-of-MTF locations. Standard processes for implementation of the pre-testing questionnaire are:

- MTF Commanders/Directors will ensure signage is posted in all MTF COVID-19 testing venues, including the questionnaire QR code and the web address. The MTF Commanders/Directors should make a computer terminal or tablet available in testing venues for beneficiaries who do not have access to personal hand-held devices and will ensure paper copies of the questionnaire are available at all testing venues also, in the event electronic connectivity is lost.

- ADSMs and other beneficiaries may access the pre-testing questionnaire using either the QR code or web-address at the Attachment. All beneficiaries may complete the questionnaire using their personal devices or another MTF-provided method, which avoids disease exposure.
- If the ADSM or other beneficiary cannot complete the pre-testing questionnaire by accessing the QR code using a hand-held device or on the web due to Internet connectivity issues or other challenges, the patient may complete a paper copy of the questionnaire. After the beneficiary completes the paper questionnaire, MTF staff members will transfer the information to the electronic questionnaire tool on the web on behalf of the patient.
- If the ADSM or other beneficiary is unable to complete the pre-testing questionnaire by themselves, a family member, surrogate or MTF staff member will obtain permission from the patient to complete the questionnaire on his/her behalf by using the patient's DoD Identification Number.
- MTFs will emphasize the need to correctly enter the patient's DoD Identification Number, which is required in order to match the COVID-19 lab results to data collected on the pre-testing questionnaire.

The DHA will monitor compliance with this guidance by associating a completed questionnaire for each ADSM being tested for COVID with each ADSM's COVID-19 lab test done in the MTF. DHA will make the results of compliance monitoring available to Markets and Direct Support Organizations using established communication and governance channels. The DoD will use the aggregated questionnaire results from the pre-testing questionnaire in support of Force Health Protection and readiness and through authorized data-sharing agreements.

If you have any questions about the pre-testing questionnaire goals, results and use of the data, my point of contact (POC) is Col Stacy Shackelford at (210) 799-6884 or stacey.a.shackelford.mil@mail.mil. If you have questions about implementation of standard processes in MTFs, my POC is Ms. Regina Julian at 540-471-6601 or regina.m.julian.civ@mail.mil.

Paul R. Cordts, MD

Paul R. Cordts, MD
Senior Executive Service
Deputy Assistant Director - Medical Affairs

Attachment
As stated

Attachment

QR Code and Pre-testing Questionnaire

QR Code: The questionnaire QR code is provided below and also is available for download at: <https://info.health.mil/hco//clinicsup/hsd/pcpcmh/sitepages/home.aspx>.



Pre-Testing Questionnaire Web Address: The questionnaire may be accessed at <https://testing.mystatus.mil/>.

Pre-Testing Questionnaire: The pre-testing questionnaire content is provided below for MTF awareness.

Thank you for completing this survey to improve DoD's understanding of the spread of COVID-19 in our military community.

- Complete the survey **before** collecting COVID-19 laboratory specimen.
- Caregivers or family members may complete the survey on behalf of the patient if they are unable to do so themselves.

DoD COVID-19 lab Pre-testing Survey

1. Why are you getting a COVID test today?

- I was required to get a COVID test.
- I was NOT required to get a COVID test, but I wanted to check my health.
- Other (open-ended)

2. Have you previously tested positive for COVID?

- Yes
- No

3. Select your current symptoms:

- Cough
- Fever
- Headache
- Chills or repeated shaking with chills
- Nausea or vomiting
- Diarrhea
- Congestion or runny nose
- Shortness of breath
- Body aches or muscle pains
- Sore throat
- Altered smell/taste
- Dizziness or lightheadedness
- Fatigue
- None of the above

4. In the past 14 days, which of the following have you done?

- Traveled by airplane, train or bus
- Attended a social gathering or event with at least one other person
- Been to a restaurant or dining facility (DFAC)
- Gone to a gym
- Been in contact with someone who tested positive for COVID
- Gone to a store
- Gone to a bar
- None of the above

5. What is your current living situation?

- I live alone.
- I have my own bedroom, but share common space.
- I share a bedroom with others.
- I live in a military barracks or a similar shared living space.
- Other (open-ended)

6. Do you currently smoke tobacco on a daily basis?

- Yes
- No

7. Do you currently vape on a daily basis

- Yes
- No

8. In the past 14 days, how often have you done the following:

- Worn a mask outside of the house when you are alone:
 - Always
 - Usually
 - Seldom
 - Never
- Worn a mask outside the house when you are around other people:
 - Always
 - Usually
 - Seldom
 - Never
- Maintain at least six feet of distance from other people outside the house:
 - Always
 - Usually
 - Seldom
 - Never
- Worked from home:
 - Always
 - Usually
 - Seldom
 - Never

9. DoD ID Number: (Fill in box)