UNDER SECRETARY OF WAR
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PERSONNEL AND
READINESS

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MEMORANDUM FOR SENIOR PENTAGON LEADERSHIP
COMMANDERS OF THE COMBATANT COMMANDS
DEFENSE AGENCY AND DOW FIELD ACTIVITY DIRECTORS

SUBJECT: Exception to Policy for the Identification of Potentially Concussive Events in the Deployed Setting

I grant a 2-year exception to policy from Paragraph 1.b. of Enclosure 3 of Department of Defense Instruction (DoDI) 6490.11, "DoD Policy Guidance for Management of Mild Traumatic Brain Injury/Concussion in the Deployed Setting," September 18, 2012, as amended. This allows for identification of potentially concussive events in the deployed setting in response to more powerful, high-explosive warheads encountered by Service members supporting current operations in the U.S. Central Command area of responsibility. The blast overpressure created by these warheads during artillery, drone, and missile attacks has resulted in an increased number of warfighters sustaining mild traumatic brain injury (mTBI)/concussion.

To account for the increased blast radii of modern munitions used by our adversaries, this exception to policy expands the 50-meter blast proximity threshold for mandatory mTBI/concussion evaluation contained in Section 1 of Enclosure 3 of DoDI 6490.11 as follows:

1. POTENTIALLY CONCUSSIVE EVENTS. Events requiring mandatory rest periods and medical evaluations and reporting of exposure of all involved personnel include, but are not limited to:

a. Involvement in a vehicle blast event, collision, or rollover.

b. Presence within 225 meters of a blast (inside or outside) until the specific munition is confirmed. Once the specific munition type is confirmed, the blast proximity threshold for identifying a potentially concussive event and mandatory mTBI/concussion evaluation will be adjusted as follows:

(1) 100 meters of an artillery shell.

(2) 125 meters of a one-way attack unmanned aerial system.

(3) 225 meters of a ballistic or cruise missile.

c. A direct blow to the head or witnessed loss of consciousness.

d. Exposure to more than one blast event (the Service member's commander shall direct a medical evaluation).

In instances where personnel experience blast overpressure beyond 225 meters, commanders and supervisors will use their best judgment, expanding the 225 meter radius as appropriate to ensure personnel are adequately evaluated. Medical personnel will use the most current clinical guidance for the evaluation and management of mTBI/concussion, which can be found on the Military Health System website at: https://health.mil/Military-Health-Topics/Centers-of-Excellence/Traumatic-Brain-Injury-Center-of-Excellence/Provider-Resources.

Direct questions concerning this memorandum to the point of contact, Ms. Kathy Lee Office of the Assistant Secretary of War for Health Affairs, at (571) 562-2904 or katherine.m.lee34.civ@health.mil.

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