

EFMP OCONUS Screening Appointments

WOMACK ARMY MEDICAL CENTER, 5TH FLOOR, SOUTH

PHONE: 910-907-3367 FAX: 910-907-8752

EMAIL: usarmy.bragg.medcom-wamc.list.wamc-efmp@mail.mil

WEB: <http://www.wamc.amedd.army.mil/HealthcareServices/SitePages/EFMP.aspx>

MARRIED SOLDIERS ARE TO PROVIDE A COPY OF THESE INSTRUCTIONS TO THEIR SPOUSE.

PRIOR TO BOOKING YOUR APPOINTMENT, PLEASE ENSURE THAT YOU HAVE READ THIS ENTIRE NOTICE.

The purpose of the OCONUS screen process is to ensure that all Family members who will potentially be traveling OCONUS with their sponsor will have access to all required medical and educational needs in the overseas location.

Prior to booking your screening appointment with EFMP you will need:

1. A completed **DA Form 5888** (Family Member Deployment Screening Sheet) signed by Military Personnel Division. Only MPD and EFMP staff are authorized to sign the DA Form 5888. "White-out" is NOT acceptable.
2. A complete **physical examination** performed within the past 12 months. This has to be a comprehensive health assessment, and may be any well child, well woman, or annual physical.

For your appointment, you will need to bring:

1. Copies of all ***medical records*** from non-military medical treatment facilities within the past 5 years.
2. Copy of ***immunization records***.
3. All children who have ***not yet entered kindergarten*** and all traveling Family members ***age 18 and older*** must be present.
4. If applicable: **DD Form 2792** (EFMP Medical Summary) completed by a medical provider. The list of EFMP enrollable conditions is available at the EFMP office and can also be found on our web site – please review this list to determine if you may need a DD Form 2792. This form is required for Family members who meet any of the following criteria:
 - **REQUIRE** treatment by a specialist (to include pediatricians and internists)
 - Have a serious, life threatening condition
 - Have been treated for a mental health condition within the past 5 years (includes counseling and/or medication prescribed by any type of medical provider)
5. If applicable: copies of **IEP/IFSP/504 Plan** (to annotate any special education and school curriculum modifications). A **DD Form 2792-1** (EFMP Special Education Summary) must be completed by your child's school or Early Intervention Program if they are on an IEP or IFSP. Educational enrollment is not required for 504 plans, but the EFMP office needs a copy to review.

It is essential that you **arrive 15 minutes early** to complete screening questionnaires. At the appointment, we will review your screening questionnaires and your medical history to determine if you meet criteria for enrollment in EFMP. When the screening process is complete, our staff will give you a copy of your clearance paperwork, to include an EFMP authenticated (signed/stamped) copy of the DA Form 5888. We will also scan and send a copy of the clearance packet to Personnel Reassignments Branch for further processing.

**FOR MORE INFORMATION, PLEASE VISIT US ON THE WEB
BY ENTERING "WOMACK EFMP" IN YOUR PREFERRED SEARCH ENGINE.**

We look forward to meeting with you!