

RESERVE HEALTH READINESS PROGRAM

RHRP SERVICES REQUEST FORM – MARINE FORCES RESERVE

Approval Authority must sign and submit this form to the Reserve Health Readiness Program Office (RHRP)
30 days prior to the event date for maximum efficiency.

MEDICAL DEPARTMENT REPRESENTATIVE (MDR) INFORMATION (ALL FIELDS ARE REQUIRED)

Reserve center name:		Reporting Unit Code (RUC):	
Unit receiving RHRP services falls under (circle which one): MARDIV MLG MAW Other (please specify):			
Your street address (where documents would be mailed back to):			Unit name(s):
City:		State:	ZIP Code:
MDR name:		Email:	
Primary phone no. and ext.:	Cell phone no.:		Alternate phone no.:
Alternate POCs name:		Email:	
Phone no.:		Cell phone no.:	

EVENT LOCATION INFORMATION (ALL FIELDS ARE REQUIRED)

Primary desired start/end date:	Desired start/end time:		
Secondary desired start/end date:	Desired start/end time:		
Event street address:	City:	State:	ZIP Code:

RHRP REQUESTED SERVICES

(PLEASE ENTER QUANTITY NEXT TO EACH SERVICE)

PHA AND DENTAL SERVICES		IMMUNIZATIONS					
Qty	Service	RHRP Provided Qty	NOSC Provided Qty	Type	RHRP Provided Qty	NOSC Provided Qty	Type
	PHAs			Globulin, Immune			Polio
	Dental exam and 4 bitewing x-rays*			Hepatitis A			Rabies
	Panograph x-rays			Hepatitis B			Tetanus – Diphtheria
	BLOOD DRAWS (MDR is responsible for labeling, processing, and shipment of ALL blood draws)			Influenza – Intranasal **			Twinrix (Hep A & B) **
				Influenza – Injectable			Yellow Fever
	HIV			MMR			Japanese Encephalitis
	G6PD			Meningitis (Meningococcal)			Varicella **
	DNA			PPD (TB Skin Test)			Anthrax **
	Sickle Cell Screen			Pneumonia (Pneumococcal)			
	Blood Type						

PDHRA SERVICES – All PDHRA events must be requested through MFR PDHRA Program Manager, Mr. Darnell Neal, at phone number (504) 697-7436 or cell (504) 388-9684.

**Note: RHRP does not stock Twinrex, Varicella, Intranasal Influenza, or Anthrax.

*BUMED and MARFORRES require the Navy dental classification system is used for dental exams administered by RHRP.

APPROVAL AUTHORITY

(Primary or Alternate Approval Authority must approve ALL requests prior to event being scheduled)
 Primary Approval Authority: HMC Vernesa Robinson Phone: 504-697-8731 Email: vernesa.robinson@usmc.mil
 Secondary Approval Authority: HM1 Marlon Dickerson Phone: 504-697-8726 Email: marlon.dickerson@usmc.mil

Name

Signature

Date

Form Updated: 15 Aug 2011