Desmond T. Doss Health Clinic



Exceptional Family Member Program (EFMP)



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Command Sponsorship

STEP 1	Complete Part A 1-7 on the DA Form 5888. This must be completed before screening. Click on the link provided for the DA Form 5888. https://armypubs.army.mil/pub/eforms/DR_a/pdf/A5888.pdf
	FAMILY MEMBER DEPLOYMENT SCREENING SHEET For use of this form, see AR 608-75; the proponent agency is OACSIM DATA REQUIRED BY THE PRIVACY ACT OF 1974 AUTHORITY: Title 10, USC Section 3013. PRINCIPAL PURPOSE: Personnel support. ROUTINE USE: To validate family member deployment screening, and to provide gaining command with data to assist in making an assignment decision. DISCLOSURE: The provision of requested information is mandatory. Failure to respond may preclude successful processing of an application for family member travel/command sponsortship and may lead to appropriate administrative or disciplinary action against the solder. PART A - SOLDIER (Last, first, MI) 2. SOCIAL SECURITY NUMBER 3a. RANK 3b. MOS/BRANCH 4a. HOME ADDRESS 5a. DUTY ADDRESS 6. DATE OF EDAS CYCLE OR RFO (OFF) DATE 4b. HOME PHONE NO. (Include Area Code) 5b. DUTY PHONE NO. a. DSN 5. COMMERCIAL (Include area code) 7. FAMILY C. DOB (YYYVAMDD) d. HOME ADDRESS
STEP 2	S-1,or Rear Detachment Representative must Authenticate Part A 8 before screening, a. MILITARY PERSONNEL DIVISION/PERSONNEL SERVICE COMPANY REPRESENTATIVE'S NAME C. RANK (Grade) C. RANK (Grade) C. DATE (YYYYMMDD)
STEP 3	 Physical Examination: Required within the past 12 months ⇒ Physical Examinations are scheduled with your Primary Care Manager. ⇒ Full head to toe physical exam within the last 12 months is required. ⇒ If your exam was not completed at a military facility you will need a copy (Medical Records can assist you with this).
STEP 4	 Schedule a Screening Appointment with the TAMC EFMP Clinic at 433-4441. ⇒ Appointments are available at Schofield Barracks. ⇒ You will need the DA Form 5888 and DD Form 2792 (as required). ⇒ If your exam was not completed at a military facility you will need a copy with you. ⇒ Spouse must be at appointment for this portion of EFMP. ***Only an EFMP provider can sign the DA Form 5888***

New Enrollments

If screened positive for medical enrollment:

Your Primary Care Provider (PCM) must complete the medical portion of a DD Form 2792. Normally you will arrange to pick this form up upon completion by your PCM. This form is required at your EFMP Screening Appointment. For EFMP long-distance screenings, family members must contact their closest Army EFMP Facility to complete the screening process.

Issues with EFMP Enrollment, Updates and Disenrollment

For Medical Reasons: A new DD Form 2792 is necessary.

- \Rightarrow The DD Form 2792 must be completed by your PCM.
- ⇒ You can contact EFMP @ 433-4441 and request a copy of your EFMP enrollment or the MTF department can request a copy from EFMP in advance.
- \Rightarrow Schedule and appointment with the TAMC EFMP Clinic at 433-4441.
- ⇒ For EFMP long-distance screenings, family members must contact their closest Army EFMP Facility to complete the screening process.

For education/special education/early intervention updates: A DD Form 2792-1 is necessary.

- \Rightarrow This is filled out by the school **NOT** your PCM.
- \Rightarrow If your child has an Individualized Education Plan (IEP), a copy must be attached to the DD Form 2792-1.

Packet Submission

Completed packets are reviewed at the TAMC EFMP office. Mail:

Department of Pediatrics

Tripler Army Medical Center

ATTN: MCHK-PEF

1 Jarrett White Road

Tripler AMC, Hawaii 96859-5000

Fax: 808-433-4316

Email: www.usarmy.tripler.medom-tamc.list.pe-efmp@mail.mil

Arrange drop-off: 808-433-4441