DoD Instruction 6025.26

DoD Program for Combating Antibiotic-Resistant Bacteria (CARB)

Originating Component: Office of the Under Secretary of Defense for Personnel and Readiness

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Approved by: A. M. Kurta, Performing the Duties of the Under Secretary of Defense for Personnel and Readiness

Purpose: This issuance establishes policy and assigns responsibilities for the DoD program for CARB in accordance with the authority in DoD Directive (DoDD) 5124.02 and pursuant to Executive Order 13676, the “National Strategy for Combating Antibiotic-Resistant Bacteria,” and the “National Action Plan for Combating Antibiotic-Resistant Bacteria.”
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SECTION 1: GENERAL ISSUANCE INFORMATION

1.1. APPLICABILITY. This issuance applies to OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (referred to collectively in this issuance as the “DoD Components”).

1.2. POLICY. The DoD will actively support the National Strategy and Action Plan for CARB by establishing programs and procedures within the Military Health System (MHS) that contribute to the goals of the National Strategy. The goals for action by the U.S. Government are:

   a. Slow the emergence of resistant bacteria and prevent the spread of resistant infections through antibiotic stewardship programs that:

      (1) Enhance optimal use, patient safety, and accountability.

      (2) Prescribe quality improvement, treatment guidelines, and antibiograms.

   b. Strengthen national one-health surveillance efforts to combat antibiotic resistance.

   c. Advance development and use of rapid and innovative diagnostic tests for identification and characterization of resistant bacteria.

   d. Accelerate basic and applied research and development for new antibiotics, other therapeutics, and vaccines.

   e. Improve international collaboration and capacities for:

      (1) Antibiotic resistance prevention, surveillance, and control.

      (2) Antibiotic research and development.

1.3. INFORMATION COLLECTIONS.

   a. The antibiotic resistance reporting and “Multidrug-resistant Organism Repository and Surveillance Network,” referred to in Paragraph 2.3.a.(1) of this issuance, does not require licensing with a report control symbol in accordance with Paragraph 1.b.(16) of Enclosure 3 of Volume 1 of DoD Manual 8910.01.

   b. The antibiotic resistance reporting and “Multidrug-resistant Organism Repository and Surveillance Network,” referred to in Paragraph 2.3.a.(1) of this issuance, does not require licensing with an Office of Management and Budget Control Number in accordance with Paragraph 8.b.(2) of Enclosure 3 of Volume 2 of DoD Manual 8910.01.
SECTION 2: RESPONSIBILITIES

2.1. ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)).
Under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness, the ASD(HA):

a. Serves as the principal advisor to the Under Secretary of Defense for Personnel and Readiness and the Secretary of Defense for all DoD health policies, programs, and force health protection activities, to include CARB, pursuant to DoDD 5136.01.

b. Oversees MHS CARB activities through review of periodic updates provided by the Defense Health Agency (DHA).

c. Assures the MHS has resources in place to support the National Action Plan to combat antibiotic resistant bacteria.

d. Participates with U.S. federal and international partners in quarterly meetings for planning and developing policies and programs to support CARB.

2.2. DEPUTY ASSISTANT SECRETARY OF DEFENSE FOR HEALTH READINESS POLICY AND OVERSIGHT. Under the authority, direction, and control of the ASD(HA), the Deputy Assistant Secretary of Defense for Health Readiness Policy and Oversight:

a. Reviews and provides policy and execution management oversight of the DoD CARB program.

b. Develops DoD policy guidance to the DoD Components on CARB requirements in coordination with the Secretaries of the Military Departments, the Chairman of the Joint Chiefs of Staff, and the Director, DHA.

c. Ensures CARB policies, plans, and programs are developed based on the most current evidence-based medicine.

d. Identifies any military-unique needs for research, development, testing, and evaluation related to CARB.

2.3. DIRECTOR, DHA. Under the authority, direction, and control of the ASD(HA), and pursuant to DoDD 5136.13, the Director, DHA:

a. Serves as the execution program manager, developing standard implementation guidance for the DoD CARB program that will include, at a minimum:

   (1) Antibiotic resistance monitoring and reporting procedures for all military medical treatment facilities as coordinated by the Multidrug-resistant Organism Repository and Surveillance Network.
(2) Antibiotic stewardship programs that include the following key components:

(a) Leadership commitment by facility;

(b) Accountability;

(c) Pharmacy expertise, including antibiotic prescribing and use evaluation;

(d) Antibiogram creation;

(e) Identification and implementation of at least one action for change that would demonstrate commitment to the program (e.g., systemic evaluation of ongoing treatment need after a set period of initial treatment, as in an “antibiotic time out” after 48 hours);

(f) Clinician education regarding resistance and prescribing practices; and

(g) Facility-specific treatment recommendations in accordance with local antibiogram.

(3) Antibiotic-use data analyses across the DoD and comparison to national benchmarks.

(4) Compliance of sharing infection prevention and control data with the Centers for Disease Control and Prevention National Healthcare Safety Network Antimicrobial Use and Resistance module.

(5) Maintenance of all CARB-related records and reports in accordance with DoD Instruction 5015.02.

b. Coordinates Service laboratory participation pursuant to DoDI 6440.02.

c. Develops and implements DoD-wide CARB communication strategies and activities to include a robust beneficiary education program.

d. Develops and publishes procedures necessary to implement this instruction.

2.4. SECRETARIES OF THE MILITARY DEPARTMENTS. The Secretaries of the Military Departments must:

a. Comply with DoD policies and DHA implementation guidance on CARB.

b. Synchronize, integrate, and coordinate Service-specific policies and guidelines with this instruction and DHA procedures.
Glossary

G.1. ACRONYMS.

ASD(HA)  Assistant Secretary of Defense for Health Affairs
CARB  combating antibiotic-resistant bacteria
DHA  Defense Health Agency
DoDD  DoD directive
MHS  Military Health System

G.2. DEFINITIONS. The terms and their definition are for the purpose of this issuance.

antibiogram. Aggregate profile of bacterial pathogen antimicrobial drug susceptibilities; profiles can be local, regional, national, etc.

one-health surveillance. Integration of public health and veterinary disease, food, and environmental surveillance through appropriate data sharing, enhancement, expansion and coordination of existing surveillance systems, and creation of a regional laboratory network providing a standardized platform for resistance testing.
REFERENCES

Assistant Secretary of Defense for Health Affairs Memorandum, “Reporting Infection Prevention and Control Data to the Centers for Disease Control and Prevention using the National Healthcare Safety Network,” May 22, 2012


DoD Directive 5136.01, “Assistant Secretary of Defense for Health Affairs (ASD(HA)),” September 30, 2013, as amended


DoD Instruction 5015.02, “DoD Records Management Program,” February 24, 2015, as amended

DoD Instruction 6440.02, “Clinical Laboratory Improvement Program (CLIP),” May 29, 2014


Executive Order 13676, “Combating Antibiotic-Resistant Bacteria,” September 18, 2014


“National Strategy for Combating Antibiotic-Resistant Bacteria,” September 2014