

## INFORMATION PAPER

MCMR-MMO-OD  
3 October 2014

SUBJECT: United States Army Medical Materiel Agency (USAMMA) Distribution Operations Center (DOC) DoD Medical Materiel Quality Control Message Program

1. Purpose: To provide information on DoD Medical Materiel Quality Control message program.

### 2. Facts

a. USAMMA became the DoD Executive Agency for DoD Medical Materiel Quality Control (MMQC) messages in June 1997. These messages are generated from recalls, alerts, hazards or notices to communicate with purchasers of consumable(s) or equipment initiated by manufacturers or distributors. These messages are distributed to registered users in real time.

b. In calendar year 2013, 1198 messages were disseminated to the more than 8,000 registered .mil or .gov email addresses. Recalls are classified by the U.S. Food and Drug Administration (FDA) as Class I, II, or III and many are not classified (unclassified). FDA recall classifications are as follows: Class I - Recall there is a reasonable probability that serious adverse health consequences or death could occur from the product; Class II - Recall product may cause temporary or medically reversible adverse health consequences or where the probability of serious adverse health consequences is remote; Class III - Recall product is not likely to cause adverse health consequences. The classification of recalls can be a lengthy process. In the interest of expeditious dissemination to the military medical logistics community, USAMMA routinely distributes unclassified MMQC messages.

c. In 2013, 66% of messages sent were unclassified, nearly 10% of messages were Class I, 15% of messages were Class II, and 2.5% of messages were Class III while the remaining 7.5% were information only messages requiring no action by recipients. Messages are further categorized based on materiel type. Materiel types include medical/surgical (med/surg), equipment, pharmaceutical or vaccine. Annually approximately 50% of messages are med/surg items, 25% of messages are equipment, 25% of messages are pharmaceutical items, and less than 1% is vaccine-related items.

d. The current MMQC system that supports the MMQC program utilizes an antiquated technology. The system feeds data to Defense Medical Logistics Supply System (DMLSS) via interfaces through three servers. There is not a feedback loop from DMLSS back to USAMMA documenting message receipt or action(s) taken. This poses significant patient safety risks.

### 3. The future of the MMQC program

The MMQC program will tentatively transition in FY2017 to become a shared service project under DHA MEDLOG. A tri-service MMQC workgroup with has been formed. The group has identified existing gaps and is developing courses of action for the Defense Medical Logistics Proponency Council's consideration for an enterprise-wide solution for MMQC message communication and tracking.

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