MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army Directive 2013-01 (Guidance on the Acquisition and Use of Service Dogs by Soldiers)

1. References:
   a. Army Regulation 40-501 (Standards of Medical Fitness), including Rapid Action Revision Issued 4 Aug 11.
   b. Army Regulation 40-905 (Veterinary Health Services), 29 Aug 06.
   c. Technical Bulletin Med No. 4 (DoD Human-Animal Bond Principles and Guidelines), 16 Jun 03.

2. Purpose. This directive sets forth policies and procedures for the acquisition and use of service dogs by wounded, ill and injured Soldiers with disabilities for whom a service dog is clinically indicated. The guidance in this directive is applicable to all Soldiers regardless of component or duty status. It also sets forth certain requirements for Soldiers who have already received and are using a service dog. This directive does not apply to emotional support animals, therapy animals and activity animals. This directive does not prevent Soldiers from owning pets, subject to installation pet policies.

3. Definitions
   a. Service Dogs. A service dog is a dog individually trained to do work or perform specific tasks for the benefit of an individual with a disability. Service dogs include guide dogs that assist individuals who are blind or have low vision with navigation and other tasks. Generally, Soldiers requiring a service dog are expected to require the dog for an extended period of time, often for life. A service dog usually undergoes a period of training with the individual Soldier who will receive it. Currently, the U.S. Department of Veterans Affairs (VA) does not recognize service dogs for behavioral health conditions, and therefore psychological service dogs are not considered service dogs for the purposes of this directive. If the VA policy in this regard changes, The Surgeon General will review and propose amendments to this directive for my approval. Species other than dogs, whether wild or domestic, trained or untrained, are not covered by this policy. Except as provided in paragraph 9, the Army will recognize only those service dogs obtained by eligible Soldiers from a source accredited by an organization recognized by the VA.

   b. Service Dogs in Training. These dogs are undergoing a period of training designed to lead to their ultimate designation and employment as service dogs. At the
discretion of the installation's senior commander, access to Army facilities by trainers with service dogs in training may be granted, provided that the training is occurring under the auspices of a source accredited by a VA-recognized organization. In some cases, the training of service dogs occurs as part of a medically supervised program wherein the trainer benefits from the act of training dogs for service to other individuals. The use of such medically supervised training programs and the granting of access rights to medical treatment facilities to such dogs in training are at the discretion of the commander of the applicable medical treatment facility. A Soldier is not authorized to train his/her own service dog.

c. Emotional Support Animals. These animals provide therapeutic benefit to individuals through the provision of companionship and affection. These animals have the same rights as pets and fall outside the scope of this policy.

d. Therapy Animals. These animals are used in goal-directed interventions where the animal is an integral part of a treatment process designed to improve physical, social, emotional and/or cognitive functions. The animal is kept under the control and possession of medical staff or volunteers, not the patient. Therapy animals fall outside the scope of this policy.

e. Activity Animals. These animals are used in interactions designed to enhance quality of life. An example is use of a puppy to brighten the lives of children who are patients on a pediatric oncology ward. The animal is kept under the control and possession of medical staff or volunteers, not the patient. Activity animals fall outside the scope of this policy.

4. Access to Army Facilities and Spaces. Service dogs will be given access to those Army facilities and spaces generally open to the public, including (but not limited to) installations, hospitals, treatment facilities, recreational facilities, barracks and other structures, as long as such access does not compromise public health (including infection control standards), safety, readiness, mission accomplishment, and good order and discipline.

5. Acquisition of Service Dogs

a. The Army does not provide service dogs. With a view to assisting Soldiers as they transition to Veteran status, the Army will recognize only those service dogs obtained by eligible Soldiers from a source accredited by a VA-recognized organization. Reliance on those sources accredited by VA-recognized organizations also gives the Army an effective and efficient means to conclude that a service dog is qualified and capable of performing those tasks clinically required to assist the Soldier.
b. Eligible veterans may be authorized certain VA benefits related to recognized service dogs, such as payment for veterinary care and equipment required for optimal use of the dog. Soldiers should be aware that dogs obtained from sources not accredited by VA-recognized organizations may not qualify as service dogs and may be ineligible for VA benefits.

6. Deployment Status. Soldiers for whom a service dog is recommended are not deployable.

7. Determination of Eligibility for and Acquisition of a Service Dog. The following procedures must be used in determining eligibility for and acquisition of a service dog.

   a. A Soldier may be identified as a potential candidate for a service dog by his/her primary care manager (PCM). Other medical providers familiar with the Soldier must make their recommendation for a service dog to the Soldier’s PCM. Soldiers who believe they are potential candidates to receive a service dog may also request one from their PCM.

   b. Upon receipt of a recommendation or request that a Soldier receive a service dog, the PCM will counsel the Soldier on the provisions of this directive and the potential effects of receiving a service dog. If, after counseling, the Soldier validates the recommendation or request for a service dog, the PCM will convene a multidisciplinary team consisting of the Soldier’s PCM; a behavioral health provider; a command representative (an officer or senior noncommissioned officer) designated by the Soldier’s unit commander; and, if the Soldier is assigned to an installation, an installation representative designated by the garrison commander (officer or senior noncommissioned officer). The PCM may invite the participation of other members necessary to enable the multidisciplinary team to make an informed decision, such as a veterinarian or unit medical provider who is familiar with the Soldier. The team will consider the following matters with a view to making appropriate recommendations to the first colonel or GS-15 in the Soldier’s chain of command:

      (1) whether a service dog is clinically required in light of the Soldier’s documented medical conditions;

      (2) whether the Soldier is suited for a service dog;

      (3) whether any limitations should be placed on the Soldier’s use of the service dog, such as specifying areas where a service dog may not accompany the Soldier or tasks assigned to the Soldier for which accompaniment by the service dog would not be permitted;
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(4) whether appropriate accommodations are available for the Soldier and the service dog if the Soldier lives in barracks or family housing. In some circumstances, this may include consideration as to whether the Soldier should be allowed to move off post; and

(5) any other matters deemed appropriate for consideration.

c. The PCM will notify the Soldier of the multidisciplinary team’s recommendation. If the team does not recommend a service dog for the Soldier or cannot reach a consensus, the PCM will refer the team’s recommendation, together with its rationale or viewpoints, to the Deputy Commander for Clinical Services (DCCS) of the servicing military treatment facility for review. The DCCS will consider the factors set forth in paragraph 7b in making a recommendation and will provide written rationale for his/her recommendation.

d. If the multidisciplinary team or the DCCS recommends that the Soldier receive a service dog, the PCM will ensure that the Soldier has an existing Permanent-3 or Permanent-4 profile or is immediately assigned such a profile. The PCM will also make sure the Soldier is in the Disability Evaluation System or is immediately referred into the system. For Soldiers not already in a Warrior Transition Unit, the unit commander shall determine whether to recommend the Soldier’s assignment to a Warrior Transition Unit.

e. Neither the multidisciplinary team nor the DCCS may issue a final decision on a recommendation or request for a service dog. The PCM will prepare a packet containing the multidisciplinary team’s recommendation and the recommendation from the DCCS, if applicable. A sample packet is at the enclosure. The PCM will forward the packet through command channels to the first colonel or GS-15 in the Soldier’s chain of command for decision. Each commander in the chain of command must document his/her recommendation as to whether the Soldier should or should not receive a service dog, as well as any recommended limitations on use of the service dog that are in addition to those the multidisciplinary team or DCCS proposed. The first colonel/GS-15 will consider those factors set forth in paragraph 7b in making his/her decision, according considerable weight to the clinical recommendations of the multidisciplinary team or the DCCS.

(1) If the first colonel/GS-15 approves the recommendation or request for a service dog, the decision is final. The first colonel/GS-15 will specify any limitations on use of the service dog.

(2) If the first colonel/GS-15 disapproves the recommendation or request for a service dog, he/she must provide a written rationale for the decision.
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f. A decision by the first colonel/GS-15 to disapprove the recommendation or request for a service dog will be reviewed by the first general officer (GO) or member of the Senior Executive Service (SES) in the Soldier's chain of command, who also will consider those factors set forth in paragraph 7b and give considerable weight to the clinical recommendations of the multidisciplinary team or the DCCS. The first GO/SES will issue a final decision, provide a written rationale and, if the service dog is approved, specify any limitations on the Soldier's use of the service dog.

g. The PCM will notify the Soldier of the final decision.

(1) If a service dog is approved, the PCM will refer the Soldier to the VA's online resources at http://www.va.gov/health/ServiceandGuideDogs.asp so that the Soldier may seek to obtain a service dog from a VA-recognized source. Soldiers are responsible for obtaining their service dogs, including any associated expenses. Army approval is no guarantee that a VA-recognized source will provide a service dog. Once a VA-recognized source agrees to provide a service dog, the Soldier must notify his/her PCM and unit commander and give the PCM sufficient documentation that the service dog was obtained from a VA-recognized source.

(2) If a service dog is not approved, and if one or more of the factors set forth in paragraph 7b materially changes such that the PCM or other medical professional familiar with the Soldier again recommends a service dog, the PCM will convene a multidisciplinary team to consider the matter. The recommendation or request for a service dog will be processed in accordance with the procedures set forth in paragraph 7.

h. Before the Soldier obtains the service dog, the Soldier's unit commander will counsel the Soldier about installation and facilities access, any workplace issues and the need to keep the commander informed of any changes in the Soldier's condition that might affect the Soldier's ability to keep the service dog. If the Soldier is approved to move off post, the unit commander will coordinate with the garrison commander to initiate the Soldier's receipt of Basic Allowance for Housing.

8. If the Soldier is not approved for a service dog or if a Soldier is unable to obtain a service dog from a VA-recognized source, the Soldier may nonetheless obtain a dog, subject to installation policies on pets.

9. Dogs Acquired Before Effective Date

a. A Soldier who acquired a dog before the effective date of this policy, and for whom an authorized licensed medical provider previously determined the dog was clinically indicated (including psychological service dogs), may keep the animal provided he/she complies with the provisions of paragraph 10 (except paragraph 10g), maintains
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the dog’s proper health and behavior, and adheres to appropriate limitations on the use of the animal imposed by the chain of command.

b. Commanders, in consultation with the Soldier’s current medical provider, are authorized and expected to take necessary actions to ensure the health, safety and proper use of such dogs within the command.

c. Commanders, in consultation with the Soldier’s current medical provider, may refer such cases to the multidisciplinary team to evaluate whether a Soldier’s continued or ongoing possession of a dog remains clinically indicated. If not, the Soldier may be allowed to retain the animal as a pet. Note: solely for the purposes of reviewing cases involving a previously acquired, clinically indicated (and documented) psychological service dog, commanders and the multidisciplinary team will not apply the VA accreditation requirements of this policy in making its recommendation.

d. Nothing in this policy should be construed to permit the prescription or acquisition of psychological service dogs after the effective date of this policy.

10. Care and Control of Service Dogs. Soldiers with service dogs that are subject to this policy shall comply with the following requirements:

a. Soldiers are solely responsible for caring for their dog, which includes feeding, watering, exercising, toileting, waste removal, stewardship and veterinary care. Soldiers must provide their unit commander with a Family Care Plan that includes a care plan for the service dog and update it at least annually.

b. Soldiers with service dogs must follow all applicable laws, rules and regulations related to service dogs and must maintain the dog’s proper behavior. Soldiers and/or service dog providers may be responsible for any damages and injuries their dogs cause.

c. Soldiers will make sure their service dog wears a special vest or harness identifying it as a service dog at all times while on an installation or in Army facilities.

d. Service dogs may receive military veterinary care on a space-available basis in accordance with reference 1b. TRICARE policies in effect at this time exclude service dogs from coverage.

e. Soldiers must register their service dogs with the garrison provost marshal’s office/directorate of emergency services (or installation equivalent), which will maintain a registry of service dogs residing or working on the garrison.
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f. Soldiers must maintain documentation of the dog’s current immunizations.

g. Soldiers must maintain proof that their service dog was obtained from a VA-recognized source. (This provision does not apply to a previously acquired, clinically indicated psychological service dog discussed in paragraph 8.)

11. Responsibilities. The Surgeon General is the proponent for this directive and shall:

   a. establish and implement any necessary guidelines for clinical recommendations related to the need for a service dog.

   b. monitor and track service dog employment to ensure compliance with references 1b and 1c and other applicable regulations, policies and guidance.

   c. establish measures of effectiveness, annually review issues surrounding Soldiers with service dogs and submit a report of the review to the Secretary of the Army. Reporting requirements include:

      (1) the creation of a registry of Soldiers with service dogs, together with the diagnosis applicable to each Soldier;

      (2) the source of each service dog and an assessment of each Soldier’s utilization rate for his/her service dog;

      (3) an assessment of timeliness in the assignment of Permanent-3 or Permanent-4 profiles to Soldiers recommended to receive a service dog and of beginning the Disability Evaluation System process for such Soldiers; and

      (4) a summary of Soldiers’ dispositions after receipt of a service dog (for example, discharged from or retained on active duty).

12. This directive is effective immediately. Should the Department of Defense promulgate a service dog policy, The Surgeon General will expeditiously review and propose for my approval any changes to this directive required to conform to that policy. If the Department issues such policy, The Surgeon General shall, within 270 days, prepare and submit a comprehensive Army policy on service dogs for publication in an Army regulation.

Enclosure

John M. McHugh
SUBJECT: Army Directive 2013-01 (Guidance on the Acquisition and Use of Service Dogs by Soldiers)

DISTRIBUTION:
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Commander, U.S. Army Cyber Command
Commander, Eighth U.S. Army
Commander, U.S. Army Reserve Command
Director, Army National Guard
Director, Business Transformation
Executive Director, Army National Military Cemeteries
SAMPLE MEMORANDUM RECOMMENDING APPROVAL OF A SERVICE DOG FROM SOLDIER’S PRIMARY CARE MANAGER TO FIRST GENERAL OFFICER OR MEMBER OF THE SENIOR EXECUTIVE SERVICE IN SOLDIER’S CHAIN OF COMMAND

PRIMARY CARE MANAGER’S OFFICIAL LETTERHEAD

OFFICE SYMBOL Date

MEMORANDUM THRU Chain of Command

FOR (Insert Name of First General Officer or Member of the Senior Executive Service in the Soldier’s Chain of Command)

SUBJECT: Recommendation for Approval of a Service Dog for (Insert Soldier’s Name, Rank and Unit of Assignment)

1. A multidisciplinary team considered whether a service dog is clinically required for (insert Soldier’s rank and name) and whether the Soldier is suited for a service dog. I participated on the team as the Soldier’s primary care manager. Other team members were (insert names of team members and roles; for example, behavioral health provider, unit command representative).

2. The team recommends approval of a service dog for (insert Soldier’s rank and last name). The service dog will assist (insert him or her) with (insert activities that formed the basis for the clinical recommendation).

3. The team recommends the following limitations on the use of the service dog: (insert any applicable limitations).

4. Endorsement of the team’s recommendations by the Soldier’s chain of command, including any limitations on use of the service dog that the command recommends, will be appended to this recommendation.

5. The Soldier has been placed on a (insert Permanent-3 or Permanent-4) profile and will be considered for medical separation or retirement through the Disability Evaluation System.

Army Directive 2013-01 Enclosure
OFFICE SYMBOL

SUBJECT: Recommendation for Approval of a Service Dog for (Insert Soldier's Name, Rank and Unit of Assignment)

6. If approved, the Soldier must acquire a service dog from a source recognized by the U.S. Department of Veterans Affairs.

PRIMARY CARE MANAGER'S SIGNATURE BLOCK
SAMPLE CHAIN OF COMMAND RECOMMENDATION

USE APPROPRIATE LETTERHEAD

OFFICE SYMBOL

Date

MEMORANDUM THRU

MEMORANDUM FOR (Insert Name of First General Officer or Member of the Senior Executive Service in the Soldier's Chain of Command)

SUBJECT: Recommendation for Approval of a Service Dog for (Insert Soldier's Name, Rank and Unit of Assignment)

1. I have reviewed the multidisciplinary team's recommendation that (insert Soldier's name and rank), assigned under my command, receive a service dog.

   ______ I recommend approval of this recommendation.

   ______ I do not recommend approval of this recommendation.

2. Insert appropriate comments. (If the commander is recommending approval, the comments should include any suggested limitations on use of the dog in addition to, or different from, any that the multidisciplinary team recommended. If the commander does not believe additional limitations are required, he/she should document that position here. If the commander does not recommend approval of the team's recommendation, he/she should detail the rationale for disapproval here).

AUTHORITY LINE: (if necessary)

COMMANDER'S
SIGNATURE BLOCK
OFFICE SYMBOL

MEMORANDUM FOR Primary Care Manager of (Insert Soldier’s Name, Rank and Unit of Assignment)

SUBJECT: Action on Recommendation to Approve a Service Dog for (Insert Soldier’s Name, Rank and Unit of Assignment)

_______ I approve the recommendation for a service dog for (insert Soldier’s name and rank). The Soldier’s use of a service dog is subject to the following limitations (specify):

_______ I disapprove the recommendation for a service dog for the following reason(s):

My point of contact is (insert name, telephone number and email address).

APPROPRIATE SIGNATURE BLOCK

CF:
CHAIN OF COMMAND