



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

IN REPLY REFER TO
BUMEDINST 1500.15E CH-1
BUMED-M7
15 Jan 2015

BUMED INSTRUCTION 1500.15E CHANGE TRANSMITTAL 1

From: Chief, Bureau of Medicine and Surgery

Subj: RESUSCITATION EDUCATION AND TRAINING

Ref: (a) BUMEDINST 1500.15E

Encl: (1) Revised pages 1, and 4 through 6 of the basic instruction

1. Purpose. To promulgate procedures for Search and Rescue Medical Technicians (HM-8401) Corpsmen to receive appropriate training as outlined in reference (a). Enclosure (1) is the revised pages 1 and 4 through 6 to reference (a).

2. Scope. Reference (a) prescribes medical readiness training and medical skills training for deployable military medical personnel.

3. Action

a. Remove page 1 of the basic instruction and replace with page 1 of enclosure (1) of this change transmittal. Navy Medicine education and training commands and other eligible participating activities will use enclosure (1) to ensure these training requirements are met as delineated in reference (a).

b. Remove pages 4 through 6 of the basic instruction and replace with pages 4 through 6 of enclosure (1) of this change transmittal.

4. Retain. For record purposes, keep this change transmittal in front of the basic instruction.

A handwritten signature in black ink, appearing to read "M. L. Nathan", is positioned above the printed name.

M. L. NATHAN

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Subj: RESUSCITATION EDUCATION AND TRAINING

Ref: (a) DoDINST 1322.24 of 6 October 2011
(b) OPNAVINST 3130.6E
(c) OPNAVINST 6400.1C
(d) BUMEDINST 6320.80
(e) BUMEDINST 6440.5C
(f) BUMEDINST 6710.67B

Encl: (1) Acronyms

1. Purpose. To provide policy and procedures for planning, prioritizing, and documenting resuscitation training to include basic life support (BLS); advanced cardiac life support (ACLS); advanced trauma life support (ATLS); neonatal resuscitation program (NRP); pediatric advanced life support (PALS); Trauma Nurse Core Course (TNCC) or Advanced Trauma Care for Nurses (ATCN); fetal heart rate monitoring (FHM), advanced life support in obstetrics (ALSO), sugar, temperature, airway, blood pressure, lab work and emotional support (S.T.A.B.L.E.), perinatal orientation and education program (POEP), and neonatal orientation and education program (NOEP).

2. Cancellation. BUMEDINST 1500.15D.

3. Scope. All ships and stations having medical department personnel.

4. Background

a. Reference (a) prescribes medical readiness training and medical skills training for deployable military medical personnel. Reference (b) outlines requirements for HM-8401. Reference (c) provides training and certification requirements for Independent Duty Hospital Corpsmen (IDCs). References (d) and (e) discuss the importance of and requirements for BLS, ACLS, ATLS, and PALS training for personnel assigned to emergency departments and Health Services Augmentation Program (HSAP) platforms. Reference (f) outlines requirements for administering sedation by non-anesthesiologist physicians and non-certified registered nurse anesthetists. Enclosure (1) lists acronyms used in this instruction.

b. Standardized training courses serve as the basis for training for safe and effective initial management of emergencies. Training standards and guidelines have been developed per the American Heart Association (AHA) for BLS, ACLS, and PALS; the American College of Surgeons (ACS) for ATLS; the American Academy of Pediatrics (AAP) for NRP; the American

(5) Information on ALSO is available from:

American Academy of Family Physicians
11400 Tomahawk Creek Parkway
Leawood, KS 66211
(800) 274-2237 or (913) 906-6000
Web site: <http://www.aafp.org>

(6) Information on S.T.A.B.L.E. is available from:

The S.T.A.B.L.E. Program
P.O. Box 980023
Park City, UT 84098
(435) 655-8171 or (888) 655-8171
Web site: <http://www.stableprogram.org>

(7) Information on POEP, NOEP, and FHM is available from:

The Association of Women's Health, Obstetrics and Neonatal Nurses
2000 L Street, NW, Suite 740
Washington, DC 20036
(202) 261-2400 or (800) 354-2268
Web site: <http://www.awhonn.org>

6. Policy. To provide training guidance regarding BLS, ACLS, ATLS, NRP, PALS, TNCC, FHM, ALSO, S.T.A.B.L.E., POEP, and NOEP for all appropriate Medical Department personnel who are subject to performing resuscitative procedures as well as performing other procedures; for providing care to women in the antepartum, intrapartum, and postpartum settings; and for newborns in all hospital settings. Periodicity, didactic, and practical training experiences must follow the guidelines developed by the appropriate authority.

a. BLS. All Navy Medicine health care personnel (i.e., active duty, reserve, civilian, contract, and foreign hire) assigned to, or subject to being assigned to, duties providing direct patient care, either diagnostic or therapeutic, must maintain current BLS Health Care Provider training certification. All Navy Medicine personnel assigned to deployable HSAP platforms must also maintain current BLS health care provider certification. Additionally, per reference (c), all IDCs will be certified and maintain currency as BLS health care provider instructors and non-anesthesiologist physicians and non-certified registered nurse anesthetists will follow the BLS guidelines outlined in reference (f). Remaining Navy Medicine personnel (e.g., non-clinical) are strongly encouraged, but not required, to maintain BLS training for non-health care providers, or higher level.

b. ATLS and ACLS

(1) Medical Corps Officers. All Medical Corps officers with the following subspecialty codes must successfully complete ACLS and ATLS training before they are permitted to detach from their current command to any outside the continental United States (OCONUS) assignments, operational assignments, or to HSAP platforms: 15A0/15A1 (Flight Surgery/Aerospace Medicine); 15B0/15B1 (Anesthesia); 15C0/15C1 (General/Subspecialty Surgery); 15E0/15E1 (Obstetrics and Gynecology); 15F0 (General Medicine); 15H0/15H1 (Orthopedic Surgery); (16P0/16P1) Emergency Medicine; 16Q0/16Q1 (Family Medicine); 16R0/16R1 (Internal Medicine); and 16U0/16U1 (Undersea Medicine). It is preferable that these specialties maintain certification in ACLS and ATLS at all times. However, successful completion of ACLS and ATLS must be achieved within 6 months prior to detachment or by the earliest feasible training opportunity after notification of reassignment/ orders. Additionally, currency must be maintained throughout their OCONUS tour or deployment. Continental United States (CONUS) commands releasing detaching Medical Corps officers without ACLS and ATLS training will be subject to paying all costs related to having the officer returned to CONUS for training, including temporary additional duty coverage of the billet during training, if indicated by the OCONUS commanding officer. All other Navy Medicine physicians (active duty, reserve, civilian, contract, and foreign hire) will successfully complete ACLS and ATLS training, per local policy. Additionally non-anesthesiologists must follow ACLS guidelines outlined in reference (f).

(2) Dental Corps Officers. All Dental Corps officers assigned to OCONUS duty stations, operational assignments or to HSAP platforms should to the greatest extent possible complete either ATLS, the Combat Casualty Care course, or attend the Pre-Hospital Trauma Life Support course. Dental Corps officers with the subspecialty codes of 1750 (Oral and Maxillofacial Surgery) and 1760 (Periodontics) who will be providing sedation in their practice must additionally have current ACLS certification, per reference (f). All other Navy Medicine dentists (active duty, Reserve, civilian, contract) will achieve ACLS and ATLS training per local policy.

(3) Nurse Corps Officers. Nurse Corps officers with the subspecialty codes (primary, secondary, or tertiary) of 1945 (Emergency/Trauma), 1950 (Perioperative), 1960 (Critical Care), and 1972 (Nurse Anesthesia) must maintain current ACLS certification. Nurse Corps officers assigned to HSAP platforms, as Individual Augmentees (IAs), or to other contingency augmentation billets, must maintain current ACLS certification prior to and throughout deployments. Additionally, competency in trauma resuscitation, as demonstrated by completion of TNCC, or equivalent ATCN is mandatory for Nurse Corps officer with the above subspecialty codes and highly recommended and encouraged for all other Nurse Corps officers. All other Navy Medicine nurses (active duty, reserve, civilian, contract, and foreign hire including licensed practical nurses (LPNs)/license vocational nurses (LVNs)) will successfully complete ACLS and TNCC training per local policy.

(4) Medical Service Corps Officers. Medical Service Corps officers with the subspecialty code of 1893 (Physician Assistant (PA)) assigned to HSAP platforms, as IAs, or assigned to other contingency augmentation billets must maintain current ACLS certification prior to and throughout deployment. Additionally, ACLS certification is strongly recommended

for all PAs stationed OCONUS and in remote locations. Additional familiarization with trauma resuscitation is accomplished by attending an ATLS course and is required of all PAs assigned to HSAP platforms, as IAs or assigned to other contingency augmentation billets. Currency in ATLS shall be maintained throughout deployment. All other Navy Medicine PAs (civilian, contract, and foreign hire) will successfully complete ACLS training per local policy.

(5) IDC. IDC Navy Enlisted Classifications (NECs), 8402 (Submarine Force), NEC 8425 (Surface Force), NEC 8401 (Special Operations), and NEC 8494 (Deep Sea Diving) must maintain current ACLS certification per reference (c). Additional familiarization with trauma resuscitation is accomplished by attending a Casualty Treatment Training Course prior to deployment with HSAP platforms, as IAs or when assigned to other contingency augmentation billets.

c. NRP. All Medical Corps officers, Nurse Corps officers, Physician Assistants, and their civilian equivalents (civil service, contract, and foreign hire including LPNs/LVNs) whose primary clinical responsibilities involve caring for newborn infants (i.e., in critical care specialty areas such as neonatal intensive care, labor and delivery, and pediatric intensive care) must be additionally trained and certified in NRP, adhering to local policy. NRP certification is also recommended, but not required, for Hospital Corpsmen assigned to areas where newborn infants will be their primary clinical responsibility, and where the length of the assignment extends beyond initial orientation. It is highly recommended that all personnel detaching to MTFs OCONUS or to Hawaii, whose primary clinical assignment will involve caring for neonatal patients successfully complete NRP before detachment. Recertification for those, whose NRP training will expire while serving OCONUS, is highly recommended before detachment.

d. PALS. All Medical Corps officers, Dental Corps officers, Nurse Corps officers, PAs, and their civilian equivalents (civil service, contract, and foreign hire, including LPNs/LVNs) whose primary clinical responsibilities involve caring for pediatric patients in clinics, inpatient units and critical care and specialty areas such as emergency department, neonatal intensive care unit (ICU), and pediatric ICU must additionally be trained and certified in PALS adhering to local policy. Training is also recommended, but not required, for Hospital Corpsmen assigned to areas where pediatric patients will be their primary clinical responsibility, and where the length of the assignment extends beyond a simple orientation. Training for all personnel detaching to MTFs OCONUS, or to Hawaii, whose primary clinical assignment will involve caring for pediatric patients and whose PALS training will expire while serving OCONUS, is highly recommended before detachment.

e. FHM. All Medical Corps and Nurse Corps officers, and their civilian equivalents (civil service, contract, and foreign hire including LPNs/LVNs) assigned to, or subject to being assigned to duties providing direct patient care in obstetrics, either diagnostic or therapeutic, must maintain current training in FHM.

f. ALSO. All Medical Corps and Nurse Corps officers whose primary clinical responsibilities involve caring for obstetric patients must complete the ALSO course. Medical