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IN REPLY REFER TO
BUMEDINST 6550.9B
BUMED-M00C5
6 Jul 2010

BUMED INSTRUCTION 6550.9B

From: Chief, Bureau of Medicine and Surgery
To: Navy Medicine Activities

Subj: **POLICY AND GUIDANCE FOR SICK CALL SCREENER PROGRAM**

Ref: (a) BUMEDINST 6010.13

Encl: (1) Navy Knowledge Online Guidelines for Prerequisite Courses for the Sick Call Screener Program

1. Purpose. To provide policy and guidance regarding the qualifications, duties, supervision, education, and quality assurance of Navy Sick Call Screeners (SCS) and to standardize the Sick Call Screener Program (SCSP).

2. Cancellation. BUMEDINST 6550.9A.

3. Background. The two primary goals of the SCSP are:

a. To improve the access to primary care for active duty personnel with minor medical conditions by permitting supervised Hospital Corpsmen to provide expeditious, clearly-defined health care services.

b. To train Hospital Corpsmen for service with operational units. This training is available to all Hospital Corpsmen. However, personnel deploying as Individual Augmentees, or are within 180 days of transferring to an operational platform, will have priority enrollment.

4. Quality Assessment and Improvement. The measurement, assessment, and improvement of the care provided by SCS must be conducted within the guidelines of reference (a).

5. Policy. To establish a standardized SCSP and authorize Hospital Corpsmen to provide timely, supervised, quality primary care services to active duty patients with minor medical conditions.

6. Program Components

a. Selection of Students

(1) Any Hospital Corpsman may attend the SCSP, provided they have completed prerequisites for enrollment and receive an endorsement from their chain of command.

(2) All candidates must have completed the Hospital Corpsman Skills Basic (HMSB) training prior to requesting enrollment in the SCSP.

b. Training

(1) SCSP training consists of didactic classroom lectures, practical hands-on training in physical examination, physical diagnosis, and a supervised clinical practicum.

(2) Prerequisite of Navy Knowledge Online Hospital Corpsmen Fundamentals, Anatomy and Physiology, must be completed prior to students enrolling into SCSP. Enclosure (1) provides guidance on accessing and completing prerequisite courses.

(3) Upon satisfactory completion of all phases of the program, the trainee is qualified as a SCS.

(4) Qualified SCS must receive at least 8 hours of supervised clinical in-service training annually and receive annual competency assessments from a SCS Supervisor. This annual training and assessments must be documented in the SCS training record.

(5) SCS training records will be maintained by the SCSP Manager. These records must include documentation of the SCS competencies at the end of the training program, annual re-evaluation, and in-service training.

(6) Navy Medicine Reserve Component Commands may establish a SCSP designed to allow personnel to complete the course of instruction within one year of enrollment. Reserve Commands must implement a process to validate completion of the standard curriculum prior to qualification.

7. Duties and Responsibilities

a. Navy Medicine Manpower, Personnel, Training and Education Command (NAVMED MPT&E)

(1) Develop and distribute a standardized SCSP Curriculum.

(2) Establish and perform ongoing maintenance of electronic links to conduct SCS Curriculum training with current resource material.

(3) Coordinate with the Staff Education and Training Departments to ensure standardized administration of the SCSP Curriculum.

b. Commanders, Commanding Officers, and Officers in Charge

(1) Implement a formal SCSP and exercise overall responsibility for the program.

(2) Appoint, in writing, program directors to oversee and coordinate the program.

c. Sick Call Screener Program Director

(1) Must be a medical officer, physician assistant, or nurse practitioner (at or above the paygrade of O-3).

(2) Responsible for the implementation and oversight of all elements of the SCSP.

(3) Ensure all instructors are appropriately trained to deliver the SCSP.

(4) Ensure appropriate documentation of all SCS competencies.

(5) Appoint, in writing, all program managers to supervise the SCSP training.

(6) Appoint, in writing, all supervisors to provide direct supervision of all qualified SCS.

d. Sick Call Screener Program Manager

(1) Must be a medical officer, physician assistant, nurse practitioner, or Independent Duty Corpsman (IDC) (paygrade of E-7 or above). If none of the above personnel are available, then an IDC (in the paygrade of E-6) may be assigned as the program manager.

(2) Supervise the SCSP Curriculum training.

(3) Establish routine and continuous monitoring of each individual's progress through completion of the curriculum.

(4) Ensure deficiencies are identified and appropriate remediation is taken.

(5) Use direct patient care opportunities whenever possible to accomplish SCS skills. Use training simulations only when direct patient care is not available.

(6) Maintain training records to include documentation of the SCS competencies at the completion of the curriculum, annual re-evaluation, and completion of in-service training.

(7) Ensure documentation of all candidates, who have successfully completed the SCSP, is recorded into Defense Medical Human Resources System Internet.

e. Sick Call Screener Supervisors

(1) Must be a medical officer, physician assistant, nurse practitioner, or IDC.

(2) Supervisors must supervise all SCS and be available throughout each patient's care performed by a SCS.

(3) Supervisors must be involved in the decision-making process and approve all therapeutic interventions before they are carried out by a SCS.

(4) Supervisors must, before the patient leaves the sick call area, concurrently review and cosign every treatment entry pertaining to a patient seen by a SCS. Criteria for review include quality of care, quality of documentation and compliance with the authorized scope of care.

(5) Ensure that all SCS receive detailed guidelines regarding authorized scope of care, approved treatment protocols, approved lists of medications, which can be dispensed and mandatory patient referral to higher echelon of care.

f. Sick Call Screeners. SCS, under direct supervision of a SCS Supervisor must evaluate and treat only minor illnesses for which they have been provided approved treatment protocols.

(1) Conditions which may be treated include:

- (a) Minor headaches.
- (b) Uncomplicated upper respiratory infections.
- (c) Uncomplicated otorhinolaryngological conditions.
- (d) Minor dermatological conditions (e.g., rashes, sunburn, friction blisters).
- (e) Uncomplicated minor musculoskeletal problems.
- (f) Uncomplicated gastrointestinal conditions (e.g., constipation, minor gastroenteritis, minor hemorrhoids).
- (g) Minor wounds not requiring suturing, interval examination, or dressing changes.
- (h) Hypertension (limited to the documentation of serial blood pressure checks which have been requested by a referring provider).

(2) Conditions which require immediate referral to a medical officer, physician assistant, or nurse practitioner include:

- (a) Chest pain.
- (b) Febrile illness with temperature exceeding 102°F.
- (c) Acute distress (e.g., difficulty breathing, abdominal pain, lacerations, suspected fractures).
- (d) Altered mental status.
- (e) Pulse above 120 per minute.

- (f) Respiratory rate above 28 per minute or less than 12 per minute.
- (g) Systolic blood pressure over 180 mm Hg or diastolic blood pressure over 100 mm Hg.
- (h) Any uncertainty or doubt in the assessment of the patient's medical condition.
- (i) Any patient presenting to the SCS with the same complaint twice during a single episode of illness shall be referred to a physician for consultation (this does not apply to patients returning for the treatment of chronic illnesses previously documented in their medical records or for routine follow-up of resolving acute illness or injury).

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**NAVY KNOWLEDGE ONLINE GUIDELINES FOR PREREQUISITE COURSES
FOR THE SICK CALL SCREENER PROGRAM**

- Log onto Navy Knowledge Online
- Select the “Navy E-Learning” link
- Select the “Browse Categories” link
- Select the “Department of the Navy Training” link
- Select “Navy Medical and Education Training link
- Select “Hospital Corpsman Interactive Course” link
- Select “Hospital Corpsman Fundamentals” link
- Select Module 1
- Enroll in Anatomy and Physiology – Musculoskeletal System
- Select Module 2
- Enroll in Anatomy and Physiology – Cardiovascular System
- Enroll in Anatomy and Physiology – Nervous System
- Enroll in Anatomy and Physiology – Respiratory System
- Enroll in Anatomy and Physiology – Integumentary System
- Select Module 3
- Enroll in Anatomy and Physiology – Digestive System
- Enroll in Anatomy and Physiology – Genitourinary System

Course certificate for each module are required. Personnel who completed the courses during Hospital Corps School are not required to repeat the courses; however, they are highly encouraged to review the material prior to beginning the Sick Call Screener course.