



**NTC BRANCH CLINIC
ACTIVE DUTY OVERSEAS/OPERATIONAL DUTY SCREENING
PROCESS INSTRUCTION SHEET**

Suitability Screening Center
Branch Health Clinic - Naval Training Center (NTC)
2051 CUSHING RD.
SAN DIEGO, CA 92106

PHONE: 619-524-0562/0229
PRE-SCREENING (walk-in):
0730-1100 & 1300-1430
APPOINTMENTS: 0800-1530

Upon receiving the Letter Of Intent (LOI) or the hard copy order, the medical pre-requisites on the following page need to be completed as soon as possible.

PART I (PRE-SCREENING). Walk-in hours: M-F 0730-1100 and 1300-1430.

*Review and verification of all the medical records and required documents are complete, only then will an appointment be made with a medical provider. **All Medical Pre-Requisites will need to be completed at your medical department, prior to a Suitability Screening appointment.***

All Medical Screenings are booked in person after completion of Part I.

PART II (SUITABILITY SCREENING APPOINTMENT). By appointments only: M-F 0800-1530.

*A medical interview and record screening will be conducted by a Provider trained in Suitability Screening. The goal of this screening is to identify any medical condition(s) that may be beyond the medical capabilities of the gaining Medical Treatment Facility. **At your medical appointment, you can be found suitable for transfer, be placed on hold, or found unsuitable.***

SUITABILITY SCREENING FORMS: TO BE COMPLETED PRIOR TO AN APPOINTMENT.

1. **NAVMED 1300/1 - ONLY NAME, SSN, NEXT DUTY STATION FOR PAGE 1. DENTAL CLASSIFICATION WITH A DENTAL OFFICER SIGNATURE ON NAVMED 1300/1 PART II (PAGE 3).**
2. **DD FORM 2807 – COMPLETE ALL BLOCKS 1-29, WITH EXPLANATIONS OF ALL YES ANSWERS IN BLOCK 29.**
3. **NAVPERS 1300/16 - FILL OUT THE TOP OF THE PAGE WITH SERVICE MEMBER'S NAME.**

IF RECENTLY RELEASED FROM LIMDU – BRING ALL RELATED PAPERWORK.

IF YOU HAVE ANY PENDING CONSULTS OR FOLLOW UPS WITH SPECIALTY CLINICS (Orthopedics, Endocrinology, Mental Health, Physical Therapy etc.) please ensure the follow ups are completed and there is full documentation of treatment completion as well as duty status prior to your screening appointment. Otherwise, you may be placed on hold status.

*****FAILURE TO COMPLETE THE FOLLOWING PREREQUISITES WILL RESULT IN DELAYS IN SCHEDULING AN APPOINTMENT. IF YOU PRESENT TO YOUR APPOINTMENT WITHOUT ALL THE COMPLETED ITEMS, IT WILL RESULT IN THE CANCELATION OF YOUR MEDICAL SCREENING APPOINTMENT*****



**NTC, BRANCH CLINIC
ACTIVE DUTY OVERSEAS/OPERATIONAL DUTY SCREENING
PROCESS CHECK LIST**

_____ **ORDERS/LETTER OF INTENT** _____ **MEDICAL RECORD**

_____ **PHA** (Within last 12 months) *must have an electronic copy in AHLTA or a hard copy NAVMED 6120/4 in medical record.*

_____ **PHYSICAL EXAMS IF APPLICABLE** (Submarine, Flight, Radiation, Dive, MSG duty etc.)

READINESS LABS:

- 1. HIV (WITHIN LAST 2 YEARS) _____
- 2. DNA _____
- 3. BLOOD TYPE/RH FACTOR _____
- 4. G6PD _____
- 5. SICKLE CELL TRAIT _____

TEST/SCREENINGS:

PPD/RISK ASSESSMENT (ANNUAL) _____
FOR PPD CONVERTORS (+PPD), ANNUAL SCREENING _____, A CHEST X-RAY ON FILE _____

AUDIO:

- 1. DD 2215 Every 5 years (non- hearing conservation program personnel) _____
- 2. DD 2216 Annual (hearing conservation program personnel) _____

IMMUNIZATIONS: ALL REQUIRED MILITARY IMUNIZATIONS UP TO DATE _____
JEV IF APPLICABLE, AFTER APPOINTMENT, UPON DETERMINATION OF SUITABLE FOR TRANSFER.

FEMALES:

- 1. PAP SMEAR (PER ACOG GUIDELINES) _____
- 2. MAMMOGRAM (AGES 40 AND ABOVE, WITHIN LAST 12 MONTHS) _____

REQUIRED FORMS FOR SUITABILITY SCREENING:

DD FORM 2807-1: TO BE COMPLETED BY MEMBER W/ ALL YES'S EXPLAINED IN BLOCK 29 _____
NAVMED 1300/1, PART I: COMPLETE ALL IDENTIFIABLE INFORMATION AT THE TOP (NAME, SSN, AND NEXT DUTY STATION). LEAVE THE REST BLANK _____
NAVMED 1300/1, PART II: DENTAL CLASS & DENTAL OFFICER SIGNATURE _____

VERIFICATION OF PRE-REQUISITES COMPLETED BY NTC SUITABILITY SCREENING STAFF ONLY

PRE-SCREENER NAME: _____ APPOINTMENT BOOKED YES- NO _____
PRE-SCREENER REMARKS (Please annotate any discrepancies on the space below: