

Change 173
Manual of the Medical Department
U.S. Navy
NAVMED P-117

28 Jan 2026

To: Holders of the Manual of the Medical Department

1. **This Change**. Updates Chapter 7, Medical Service Corps.
2. **Summary of Changes**. This change represents the first update of Chapter 7 of the Manual of the Medical Department in 8 years. Several articles have been revised to clarify language or retain consistency with other governing instructions; but the overall intent remained unchanged. This is a complete revision and should be read in its entirety. The listed significant changes have been implemented:
 - a. Section I, article 7-2 added additional information about Medical Service Corps officers.
 - b. Section II, article 7-3 changed title to Chief per 10 U.S.C. section 8090.
 - c. Section II, article 7-4 updated Bureau of Medicine and Surgery (BUMED) N-Codes and official titles.
 - d. Section IV, article 7-9 updated general duty assignments to align with current BUMED activity names.
 - e. Section IV, article 7-10 updated to reflect the Navy Medicine Readiness and Training Command structure.
 - f. Section IV, article 7-9 updated Navy to Department of the Navy to incorporate U.S. Marine Corps activities.
 - g. Section IV, article 7-10 revised title to “Executive Medicine” and updated corresponding section.
 - h. Section IV, article 7-10 updated role of current commanding officer responsibilities and, where required, dual-hatted nature of serving as director, Defense Health Agency (DHA) activity.
 - i. Section IV, article 7-10 updated role of current executive officer responsibilities and, where required, dual-hatted nature of serving as deputy director, DHA activity.

3. **Action**

- a. Remove Chapter 7 and replace with the revised Chapter 7.
- b. Record Change 173 in the Record of Page Changes.



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Chief, Bureau of Medicine and Surgery
Acting

Section I

Establishment

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7-1 **Establishing Legislation**

(1) In July 1941, legislation authorized temporary appointment of commissioned officers in the Hospital Corps and appointment of health scientists in the Naval Reserve. During World War II, hundreds of industrial hygienists, optometrists, entomologists, microbiologists, physiologists, chemists, psychologists, podiatrists, and pharmacists served as hospital-volunteer specialists (H-V[S]). The Hospital Corps Officers School was established in 1942 at the National Naval Medical Center, Bethesda, Maryland, to provide instruction in hospital supply and administration.

(2) The Navy Medical Service Corps was established as a staff corps of the United States Navy on 4 August 1947 by the Army-Navy Medical Service Corps Act of 1947 (section 30 a-j of Title 34, U.S. Code 34 U.S.C. section 30 a-j). This staff corps was created as a component of the Medical Department of the Navy to complement the functions of the Medical and Dental Corps (as revised and reenacted by section 6027 of Title 10, U.S. Code and updated by section 8090 of Title 10, U.S. Code).

(3) The legislation provides for the Corps to consist of such specialties as the Secretary of the Navy considers necessary. The Corps currently consist of officers in health care administration, health care clinical services, and health care sciences. All Navy Medical Service Corps specialties are enumerated in the Navy Officer Manpower and Personnel Classifications Manual (NAVPERS 15839I).

7-2 **Mission**

(1) The Medical Service Corps delivers world-class operational medical services and support to U.S. Navy and U.S. Marine Corps commands, squadrons, battalions, and units through 31 specialized uniformed disciplines positioned across three distinct professional communites composed of health care administrators, health care scientists, and health care clinicans.

(2) Medical Service Corps officers deploy in support of national defense, joint combat operations, disaster relief, power projection, and humanitarian assistance missions providing the best warfighter health care our nation can deliver both ashore and afloat.

Section II

Organization

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7-3

Chief of the Navy Medical Service Corps

(1) The Chief, Navy Medical Service Corps is appointed by the Secretary of the Navy upon the recommendation of the Navy Surgeon General.

(2) The Chief, Navy Medical Service Corps is responsible to the Surgeon General of the Navy, who also performs the duties of Chief, BUMED, for the administration, direction, and coordination of the Medical Service Corps.

7-4

Office of the Medical Service Corps of BUMED

(1) The Chief, Medical Service Corps is also the Chief of the Office of the Medical Service Corps. The Chief is responsible for the performance of all functions of the office. The office plans, advises, and makes recommendations regarding changes in administrative policy; develops, coordinates, evaluates, and advises on matters pertaining to personnel policy, military requirements, and professional qualifications of Medical Service Corps officers; makes recommendations to Navy Personnel Command (NAVPERSCOM) regarding procurement, distribution, separation, training, career development, and accounting of Medical Service Corps personnel; and implements policies of the Surgeon General of the Navy\Chief, BUMED, as they relate to service, education, and research.

(2) The Office of the Medical Service Corps includes the Chief, Deputy Chief, Career Planner, Policy and Practice Officer, Reserve Affairs Officer, and Liaison Officer.

(a) The Deputy Chief, Medical Service Corps is responsible for the performance of all functions of the office. The office plans, advises, and makes recommendations regarding changes in administrative policy; develops, coordinates, evaluates, and advises on matters pertaining to personnel policy, military requirements, and professional qualifications of Medical

Service Corps officers; makes recommendations to NAVPERSCOM regarding procurement, distribution, separation, training, career development, and accounting of Medical Service Corps personnel; and implements policies for the Surgeon General of the Navy\Chief, BUMED as they relate to service, education, and research.

(b) The Career Planner maintains an effective liaison role with the Navy Recruiting Command (NAVCRUITCOM), administers selected accessions programs, serves as primary president of the professional review boards, works with Medical Service Corps specialty leaders to develop career progression and career counseling, and liaises with Naval Medical Leader and Professional Development Command (NAVMEDLEADPRODEVCMMDMLPDC) and Director, Education and Training (BUMED-N7) for development of educational programs and other programs and projects as directed.

(c) The Policy and Practice Officer administers development of system-wide policies for the Medical Service Corps involving manpower and reserve issues, works to coordinate and monitor appropriate legislative initiatives related to Medical Service Corps issues, and evaluates Navy Medical Service Corps programs to ensure consistency with Navy Medicine policy and compliance with professional standards of practice and provider credentialing as well as recruiting and retention efforts.

(d) The Reserve Affairs Officer advises the Corps Chief and Deputy Chief, Corps Reserve Affairs on all matters pertaining to Medical Service Corps officers in the reserve component and monitors active and reserve issues, anticipating impact on Reserve Corps personnel.

(e) The Liaison Officer is responsible for administrative support to the Chief and Deputy Chief, Medical Service Corps; manages communication initiatives within the Medical Service Corps and collaborates with Medical Service Corps specialty leaders, Navy detailers, Navy Medicine command leadership and regional commanders to disseminate Medical Service Corps related direction and guidance.

(3) Other Medical Service Corps officers may supplement the office with their subject matter expertise related to their roles and responsibilities within their cognizant BUMED N-Codes, such as:

(a) Chief, BUMED's specialty leaders of Active and Reserve Components (see BUMEDINST 5420.12G) provide expert advice to the Surgeon General of the Navy\Chief, BUMED and Chief, Medical Service Corps regarding their specialty and maintain pertinent specialty information to assist with recruiting and accession activities.

(b) Chief, BUMED's Medical Service Corps personnel plans analyst, Medical Service Corps manpower analyst, and others, as applicable.

Section IV

Duties of the Medical Service Corps Officers

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7-9

General Duty Assignments

(1) Medical Service Corps officers may be assigned to the following Navy activities: Navy Medicine Readiness Training Commands(NAVMEDREDTRNCMD) or Navy Medicine Readiness Training Units (NAVMEDREADTRNUNIT) affiliated with medical treatment facilities (MTF) in the continental United States and outside the continental United States; duty afloat on a large combatant or auxiliary ship of the Fleet, duty with the U.S. Marine Corps Fleet Marine Force, or other duties as assigned. Tour length follows NAVPERSCOM policy and will be in conformity with the overall needs of the Naval Service.

(2) Medical Service Corps officers render support to the Navy Medical Department by performing primary duties in administration, clinical, and scientific specialties related to health care, safety, health engagement, and human performance optimization of Navy Department personnel. In addition to the primary duties prescribed for the billet to which a Medical Service Corps officer is detailed, additional duties which contribute to the proper functioning of the command, and for which the officer is qualified, may also be assigned.

7-10

Executive Medicine

(1) Per BUMEDINST 1412.1D, the Medical Service Corps officer, serves as commanding officer when assigned as such by NAVPERSCOM. General duties include serving as commanding officer of the NAVMEDREADTRNCMD; and where required at the direction of the DHA Director, serve dual-hatted as director of the associated DHA MTF. The commanding officer accomplishes an economic, effective, and efficient performance of mission, functions, and tasks of the assigned NAVMEDREADTRNCMD and any supporting

NAVMEDREADTRNUNIT, and does so per U.S. Navy Regulations, the Manual of the Medical Department (MANMED), and other directives issued by competent authority. The commanding officer is responsible for the safe and effective care and services provided to patients and for the safety and well-being of the entire command. Subject to the orders of higher authority, the commanding officer is vested with military jurisdiction for those under their purview.

(2) Per BUMEDINST 1412.1D, the Medical Service Corps officer serves as executive officer when assigned as such by NAVPERSCOM. General duties include serving as executive officer of the NAVMEDREADTRNCMD and where required at the direction of the Director of the DHA, serve dual-hatted as deputy director, associated DHA MTF. General duties include serving as executive officer and assuming command in the absence of the commanding officer. In the performance of these duties, the executive officer must conform to and effectuate the policies and orders of the commanding officer and must keep the commanding officer informed of all significant matters pertaining to the command. The executive officer will be primarily responsible, subject to the directives of the commanding officer, for the organization, performance of duty, operational readiness, provision of services, training plans, and good order and discipline of the entire command.

7-11

Career Milestone Opportunities

(1) The Surgeon General of the Navy has designated certain Navy Medicine billets as career milestone billets. Career milestone billets will be assigned by NAVPERSCOM and include all officer in charge, Director for Administration, and Expeditionary Medical Director opportunities that require specialized health care leadership expertise, experience, and a documented career progression that prepares an officer for the duties and responsibilities associated with these positions

(2) Other leadership positions may include non-milestone leadership roles and opportunities that the commanding officer appoints at the local level.

7-12

Off-Duty Employment

(1) Officers of the Medical Service Corps must comply with MANMED Chapter 1, article 1-22 with regard to off-duty remunerative employment.