

Change 140
Manual of the Medical Department
U.S. Navy
NAVMED P-117

3 May 2012

To: Holders of the Manual of the Medical Department

1. **This Change** revises Chapter 15, article 15-31, Waivers of Physical Standards.
2. **Summary of Changes.** This revised article establishes Navy Medicine Operational Training Center Detachment, Naval Aerospace Medicine Institute (NAMI), Code 342 as the Program Manager for assessment and determination of physical qualification of candidates for aviation duty. As the Program Manager, NAMI Code 342, is authorized to issue correspondence deemed sufficient by the Bureau of Medicine and Surgery (BUMED) for recommendations of waiver of physical standards and commissioning.
3. **Action**
 - a. Remove pages 15-25 and 15-26 and replace with like-numbered pages.
 - b. Record this Change 140 in the Record of Page Changes.



M. L. NATHAN
Chief, Bureau of
Medicine and Surgery

15-30**Purpose**

(1) The primary purposes of the physical standards contained in this section are to ensure individuals applying for enlistment or commission are:

(a) Physically capable of performing assigned and prospective duties without unnecessary risk of injury or harm to themselves or other service members.

(b) Physically capable of performing assigned and prospective duties without assignment limitations or modifications to existing equipment and systems.

(c) Not likely to incur a physical disability as a result of military service.

(2) Many individuals will be physically qualified to enlist or commission, but not be physically qualified for some special duties or assignments; see Section IV for further guidance.

(3) Based upon the needs of the Naval Service and DOD, as well as ongoing changes in the understanding of many physical or medical conditions, the standards contained in this chapter are frequently reviewed and modified; ensure that the most current version is in use.

15-31**Waivers of the Physical Standards**

(1) For some applicants, their current level of functioning and/or state of health in spite of the presence of a disqualifying medical condition warrants a waiver of the standards.

(2) Waivers of the standards do not make an applicant "physically qualified" but rather provide the applicant the opportunity to enlist or commission despite the fact that a disqualifying condition exists.

(3) The authority to grant a waiver lies with the commander charged with enlisting or commissioning the applicant and the specific program desired (e.g., Commander, Marine Corps Recruiting Command is the authority for applicants desiring enlistment in the Marine Corps). The medical authority to recommend a waiver of the standards to these various commands

resides with the Chief, Bureau of Medicine and Surgery. By direction authority to carry out this function has been granted to:

(a) *The Director, BUMED Qualifications and Standards.* Provides waiver recommendations to: Commander, Marine Corps Recruiting Command; Commander, Naval Services Training Command (NROTC entry, commission of NROTC enrollees, commission of MMR, USNR enrollees); Commander, Naval Medical Education and Training Command; Commander, Officer Candidate School; Superintendent, U.S. Naval Academy; Superintendent, United States Merchant Marine Academy (USMMA entry); Commander, Navy Recruiting Command (Health Professions Scholarship Program, Nurse Commissioning Program). Additionally, the Director, Bureau of Medicine and Surgery, Qualifications and Standards provides guidance to the Navy and Marine Corps Reserve commands regarding physical qualification for retention of service members in the reserves and to the recruit training commands regarding retention of recruits found to have disqualifying medical conditions.

(b) *The Senior Medical Officer, Naval Recruiting Command.* Provides waiver recommendations to: Commander, Naval Recruiting Command (including Reserve Recruiting Command, excepting the programs listed in article 15-31(3)(a) above).

(c) *The Navy Brigade Surgeon, Uniformed Services University of Health Sciences.* Provides waiver recommendations to: Assistant Secretary of Defense for Health Affairs (enrollment and graduation commissions).

(4) The processes for requesting a waiver vary based on the program the applicant is seeking. Review the pertinent guidance issued by the enlisting or commissioning authority above. However, regardless of the specific procedures involved, most delays in waiver recommendations result from inadequate information provided with the waiver request. When assembling a waiver request package ensure, at a minimum, the following information is included: most recent complete physical examination, all pertinent past medical records, documentation regarding past and current limitations of activity associated with the condition, and the results of any laboratory testing or specialty evaluation initiated by the examiner.

(5) Results of waiver requests (approved or denied) should be recorded in block 76 or 77 of the DD 2808.

(6) Waiver processes for special duty examinations and assignments are contained in Section IV within the description of the standards for each specific program.

(7) The Navy Medicine Operational Training Center Detachment, Naval Aerospace Medical Institute, (NAMI Code 342) is designated as the Program Manager for assessment and determination of the qualification of applicants, both enlisted and commissioned, for duties involving aviation. In this capacity, NAMI is authorized to issue correspondence recommending waivers of physical standards to the commander charged with enlisting or commissioning and the specific program desired. Such correspondence shall include letters recommending commissioning by the appropriate authority.

15-32

Introduction to the Physical Standards

(1) The following list of disqualifying physical and medical conditions is organized generally by organ system and from the head down. If an applicant currently or by history (as appropriate) has none of these conditions then he or she will be found "physically qualified." See articles 15-3 and 15-4 for additional guidance on application of the standards and recording of the examination.

15-33

Head

(1) Uncorrected deformities of the skull, face, or mandible (754.0) of a degree that will prevent the individual from properly wearing a protective mask or military headgear are disqualifying.

(2) Loss, or absence of the bony substance of the skull (756.0 or 738.1) not successfully corrected by reconstructive materials, or leaving residual defect in excess of 1 square inch (6.45cm²) or the size of a 25-cent piece is disqualifying.

15-34

Eyes

(1) Lids

(a) Current blepharitis (373.0), (chronic, or acute until cured (373.00)) is disqualifying.

(b) Current blepharospasm (333.81), is disqualifying.

(c) Current dacryocystitis, (acute or chronic (375.30)) is disqualifying.

(d) Deformity of the lids (374.4), (complete or extensive lid deformity) sufficient to interfere with vision or impair protection of the eye from exposure is disqualifying.

(e) Current growths or tumors of the eyelid, other than small non-progressive, asymptomatic benign lesions are disqualifying.

(2) Conjunctiva

(a) Current chronic conjunctivitis (372.1), including but not limited to trachoma (076), and chronic allergic conjunctivitis (372.14) is disqualifying.

(b) Current or recurrent pterygium (372.4) if condition encroaches on the cornea in excess of 3 millimeters, or interferes with vision, or is a progressive peripheral pterygium (372.42), or recurring pterygium after two operative procedures (372.45) is disqualifying.

(c) Current xerophthalmia (372.53) is disqualifying.

(3) Cornea

(a) Current or history of corneal dystrophy, of any type (371.5), including but not limited to keratoconus (371.6) of any degree is disqualifying.

(b) History of Keratorefractive surgery including, but not limited to Lamellar (P11.7) and/or penetrating keratoplasty (P11.6), radial keratotomy and astigmatic keratotomy are disqualifying. Refractive surgery performed with an eximer laser (P11.7), including but not limited to photorefractive