BUMEDINST 1500.35A
BUMED-N7
13 Jan 2025

BUMED INSTRUCTION 1500.35A

From: Chief, Bureau of Medicine and Surgery

Subj: HIGH-RISK TRAINING POLICY

Ref: (a) OPNAVINST 1500.75D
       (b) OPNAVINST 3500.39D
       (c) OPNAVINST 6110.1K
       (d) BUMEDINST 5100.13F
       (e) OPNAVINST 5100.23H
       (f) OPNAVINST 5100.19F
       (g) OPNAVINST 5102.1E

Encl: (1) Nutritional Supplement and Over-the-Counter Medication Screening Guidance
       (2) Cold and Heat Stress Guidance

1. <u>Purpose</u>. To provide policy and governance for Navy Medicine (NAVMED) high-risk training by adopting and supplementing the policy requirements of reference (a); to incorporate references (b) through (g), as appropriate, in establishing NAVMED mission-essential training objectives; to provide amplifying policy; to assign responsibilities; and to publish a procedural directive for training safety in high-risk training assignments. The enclosures in reference (a) are adopted for use in the implementation of this instruction. This instruction is a complete revision and should be reviewed its entirety.

2. <u>Background</u>. High-risk training is operationally defined as training activities, courses, and evolutions that expose students, instructors, and support staff to a heightened level of risk that may result in death, serious bodily injury, or loss of asset should a mishap occur. NAVMED conducts high-risk training courses such as aviation physiology training, flight medic course, and survival swimming. As such, risk mitigation is critical to achieve desired training outcomes safely and effectively. Thorough course planning, incorporating operational risk management (ORM) per reference (b), precise training execution, and meticulous course oversight provide the greatest opportunity for instructors and students to safely and effectively complete NAVMED high-risk training.

3. <u>Scope and Applicability</u>. This instruction applies to all NAVMED commands responsible for management, administration, execution, and oversight of training programs.

4. Policy

a. Evaluate for Operational Risk. NAVMED formal training courses and unit-level training designed to meet formal training requirements will be evaluated for operational risk per reference (b) prior to implementation and during each subsequent curriculum review.

b. Assign Risk Assessment Code. NAVMED formal training courses and unit-level training, where an ORM assessment results in the assignment of any of the following risk assessment codes (RAC), is considered high-risk training and will be managed, administered, executed, and overseen as stated in this instruction:

(1) RAC 1 Catastrophic (extremely high or high probably for death, loss of asset, mission capability or unit readiness).

(2) RAC 2 Critical (extremely high or high probability for severe injury or damage significantly degrading mission capability or unit readiness).

(3) RAC 3 Moderate (high probability for minor injury or damage, degraded mission capability or unit readiness).

c. Unit Level High-Risk Training. Unit level high-risk training requires a deliberate risk assessment using reference (b) and, at a minimum, will include an emergency action plan (EAP) and training time-out procedures within the ORM brief.

d. Prospective High-Risk Training Instructors. All prospective high-risk training instructors (military or civilian) will:

(1) Meet Suitability Requirements. Be screened for professional, physical, and psychological suitability per reference (a) prior to assuming duties as a high-risk training instructor. Civilians qualified as high-risk instructors are required to complete a pre-employment physical and will be subject to periodic medical examinations, as needed. Physical requirements must be clearly defined through position description, memorandum of agreement, memorandum of understanding, or statement of work, as appropriate.

(2) Complete Instructor Training. Complete Navy-recognized, formal instructor training and core unique instructor training prior to beginning high-risk training instructor duty. The member's command training department will assure scheduling and completion of these training requirements. Onboard training will include the listed ORM courses is subparagraphs 4d(2)(a) through 4d(2)(d) which are available at Navy eLearning via My Navy Portal at Web site, https://learning.nel.navy.mil/ELIAASv2p/:

(a) NSC-ORM-MYR-2.0 Individual - Managing Your Risk.

(b) NSC-ORM-MYTR-2.0 ORM - Time-Critical Risk Management.

(c) NSC-ORM-LRMI-2.0 Assistant - Leading Risk Management Integration.

(d) NSC-ORM-DYCRM-2.0 Manager – Directing Your Command's Risk Management.

e. Prospective High-Risk Training Student Screening. All prospective high-risk training students will be screened to assure they meet administrative and physical prerequisites as prescribed in references (c) and (d).

f. Physical Training. All student and instructor participation in physical training must follow guidelines in reference (d). Physical training must not be part of a formal course of instruction unless the requirement exists within the course for instructor-led physical training and approved by the curriculum control authority. Staff-led physical training is normally a function of the Navy Military Training program; however, some high-risk training courses include physical training in the curriculum that must be successfully completed to meet training objectives. For these instances, physical training will be treated as a high-risk training event and is subject to high-risk training safety protocols. If physical conditioning or training beyond reference (d) is required, then a specific physical enhancement curriculum will be designed to meet training requirements. Commanding officers (CO) and officers in charge (OIC) must assess the physical demands required for high-risk training task and skill completion and weigh them against staff and student physical conditioning. Any increased fitness requirement must be reviewed by the requesting command's safety and educational staff as well as the command's immediate superior in charge. Risk will be assessed via procedures outlined in reference (b); the endorsed assessment will be maintained as part of the course curricula. Enhanced fitness training will only include those abilities and skills needed to proceed to the next stage of the student's training pipeline. Training to skills beyond the aforementioned is contraindicated. Environmental confidence training (i.e., in water) must not be authorized without a documented needs statement and justification from the requirements sponsor.

5. Responsibilities

a. Director, Education and Training, (Bureau of Medicine and Surgery (BUMED)-N7):

(1) Prepares and maintains amplifying policy and procedural directives for Navy Medicine high-risk training safety implementation including, but not limited to responsibilities for:

(a) Commands sending students to high-risk training.

(b) Commands transferring personnel to high-risk training instructor duty.

(c) Gaining commands receiving personnel for high-risk training instructor duty.

(d) COs and OICs of high-risk training activities, instructors, training safety officers, and high-risk training safety officers.

(2) Provides, upon request, an updated list of all NAVMED high-risk training courses to Commander, Navy Safety Command (COMNAVSAFECOM).

b. Director, Clinical Operations, Policy, and Standards (BUMED-N10):

(1) Provides medical guidance on the use of over-the-counter medications and nutritional supplements by student or instructor participants during high-risk training. See enclosure (1).

(2) Periodically reviews OPNAV 1500/53 Medical Questionnaire, for relevance and forwards amendment recommendations to COMNAVSAFECOM or forwards an endorsement triennially.

c. Director, Logistics, Supply and Support (BUMED-N4):

(1) Produces and maintains amplifying policy and procedural directives for NAVMED's Safety and Occupational Health Programs, including cold and heat stress guidance in enclosure (2).

(2) Via Naval Medical Forces Atlantic, Naval Medical Forces Pacific and Naval Medical Forces Development Command, ensures all training-related mishaps are reported per references (e) and (f) requirements using the COMNAVSAFECOM's Enterprise Safety Applications Management System or the Risk Management Information Management System Streamlined Incident Reporting online application.

(3) Performs triennial Safety and Occupational Health Management Evaluation of NAVMED echelon III command high-risk training programs.

d. Commander, Naval Medical Forces Development Command:

(1) Designates high-risk training courses under their cognizance and maintains a list of these courses by title and course identification number, and ensures course information is accurate, current, and listed, as in reference (c), as voluntary and high risk.

(2) Includes applicable safety requirements of references (f) and (g) personnel qualification standards, technical manual, Naval Air Training and Operating Procedures Standardization manual, job qualification requirements, and other curricula source documentation in course content for all high-risk courses conducted by subordinate commands.

(3) Standardizes curricula, including safety precautions, when the same course of instruction is taught at more than one site.

(4) Requires command high-risk training safety officers or assistant high-risk training safety officers to oversee and monitor all high-risk training events and prepare and implement a high-risk training self-assessment program which quantitatively and qualitatively evaluates oversight program effectiveness. Naval Medical Forces Development Command determines the self-assessment frequency.

(5) Establishes qualification requirements for military, civilian, and contracted training safety officers; high-risk training safety officers; and assistant training safety officers at subordinate training activities as applicable.

(6) Ensures the CO, OIC, or director of training activities conduct safety reviews at least annually of all formal high-risk training. Additionally, a safety review is required after any major curriculum changes, course revisions, technical training equipment upgrades or replacements.

(7) Provides an annual high-risk training safety evaluation schedule to COMNAV-SAFECOM no later than 30 September for the forthcoming fiscal year.

(8) Ensures subordinate training commands:

(a) Incorporate ORM and safety awareness training into instructor and student training.

(b) Conduct training and high-risk evolutions following approved course curricula.

(c) Establish an instructor certification process for all high-risk training instructors (military or civilian). See reference (a) for certification content.

(d) Establish an evaluation program that assesses high-risk training instructors in classroom, laboratory, or field settings on a recurring basis, in percentages commensurate with the amount of time spent instructing in those environments. Commands will maintain documentation of subsequent evaluations for 3 years.

(e) Prepare high-risk training EAPs, review EAPs monthly, conduct procedural walk-throughs quarterly, and fully exercise EAPs annually.

(f) Include training safety officer procedures in all high-risk course curricula. Include drop on request procedures in all voluntary high-risk curricula. Ensure training time out procedures are briefed to students prior to commencing training daily and prior to continuing training, until course completion, regardless of length.

(g) Provide policy for qualification and designation of the training safety officer or high-risk training safety officer in accordance with Naval Medical Forces Development Command as applicable.

(h) Establish a mishap analysis program to examine near miss or hit, mishap data, student critiques, and any unsafe conditions or practices identified in high-risk training courses

(i) Ensure students meet Navy standards and complete medical screening and other prerequisites as prescribed in reference (c) before beginning training.

(j) Ensure high-risk course instructor candidates (military and civilian) complete all training and certification requirements prior to beginning high-risk training instructor duties.

(k) Ensure all equipment utilized in high-risk training is maintained per applicable Navy monitoring and preventive maintenance programs, to include manufacturer's maintenance and repair guidelines.

(l) Publish amplifying procedural directives for execution of physical training programs, including specific physical enhancement curricula.

(m) Ensure all requirements of reference (a) are adopted during the curricula development phase and that no course is taught to students during the piloting phase until instructors are certified, a risk assessment is conducted and assessed, and an EAP is developed and approved.

(n) Complete deliberate risk assessment as per references (a) and (b).

e. Naval Medical Forces Atlantic ensures implementation of all applicable responsibilities listed in subparagraphs 5d(1) through 5d(8) for Navy and Marine Corps Force Health Protection Command courses.

f. Naval Medical Forces Pacific ensures implementation of all applicable responsibilities listed in subparagraphs 5d(1) through 5d(8) for Naval Expeditionary Medicine Warfighter Development Center.

g. COs and OICs of NAVMED commands and activities providing prospective high-risk training instructors and students or delivering high-risk training will ensure compliance with instructor and student screening requirements specified in subparagraph 4d and 4e of this instruction.

6. <u>Records Management</u>

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the DON Assistant for Administration, Directives and Records Management Division portal page at https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager or the OPNAV Records Management Program (DNS-16).

7. <u>Review and Effective Date</u>. Per OPNAVINST 5215.17A, BUMED-N7 will review this instruction annually around the anniversary of the issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense, Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40, Review of Instruction. This instruction will be in effect for 10 years, unless revised or cancelled in the interim and will be reissued by the 10-year anniversary date if it is still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following guidance in OPNAV Manual 5215.1 of May 2016.

8. <u>Forms</u>. The OPNAV 1500/53 Medical Questionnaire, is available at: https://forms.documentsservices.dla.mil.

D. K. VIA

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site, https://www.med.navy.mil/Directives/.

NUTRITIONAL SUPPLEMENT AND OVER-THE-COUNTER
MEDICATION SCREENING GUIDANCE

1.   All students participating in high-risk training (military or civilian) must be screened for physical and psychological fitness as appropriate for the type and level of training conducted. Screening for over-the-counter medications and nutritional supplement use must occur prior to participation in high-risk training. The Catalog of Navy Training Courses (CANTRAC) identifies all Navy high-risk training courses, medical screening clearance requirements associated with each high-risk training course, and screening documentation that the prospective participant must complete and deliver upon reporting for training.

2.   Medical screeners should follow the guidance of authorized nutritional supplements as published by Navy Medicine Operational Training Center's Aeromedical Reference and Waiver Guide at https://www.med.navy.mil/Navy-Medicine-Operational-Training-Command/Naval-Aerospace-Medical-Institute/Aeromedical-Reference-and-Waiver-Guide/. Supplements identified as Class A and B are generally allowed, while Class C supplements are generally prohibited from use by all personnel (student, instructor, and staff member) participating in high-risk training.

COLD AND HEAT STRESS GUIDANCE

1.   Heat stress and cold stress injuries are usually preventable. Unless exposure to extreme environments is required by the curriculum, all efforts should be made to ensure that heat and cold stress injuries be avoided by proper planning of events. These efforts should include acclimatization of students, proper monitoring of environmental stress factors including physical activity, ensuring maintenance of adequate hydration levels, etc. NAVMED P-5010, Manual of Preventive Medicine, chapter 3 provides heat and cold stress prevention information.

2.   If a heat or cold stress injury occurs during training, treat as directed by the Navy Environmental Health Center Technical Manual Occupational and Environmental Medicine 6260.6A (NEHC-TM-OEM 6260.6A), Prevention and Treatment of Heat and Cold Stress Injuries and site-specific emergency action plan protocols. Report heat and cold stress injuries per reference g, Navy and Marine Corps Mishap and Safety Investigation, Reporting and Record Keeping Manual via the Risk Management Information (RMI) program of record. The RMI program of record database application is required for reporting, recording, and analyzing all mishaps, hazards (including near misses) and incidents. The RMI program of record database is Department of Defense Common Access Card (CAC) enabled and is available on the Naval Safety Command (NAVSAFECOM) Web site: https://afsas.safety.af.mil/my.policy and per BUMED instruction 6220.12, Medical Surveillance and Notifiable Event Reporting which stipulates Naval Disease Reporting System electronic report, or written, fax, e-mail, or phone report to the cognizant Navy Environmental Preventive Medicine Unit.