



DEPARTMENT OF THE NAVY  
BUREAU OF MEDICINE AND SURGERY  
7700 ARLINGTON BOULEVARD  
FALLS CHURCH VA 22042

BUMEDINST 1500.37  
BUMED-N7  
13 May 2026

BUMED INSTRUCTOR 1500.37

From: Chief, Bureau of Medicine and Surgery

Subj: INDIVIDUAL LEVEL TRAINING

Ref: (a) DoD Instruction 1322.24 of 16 Mar 2018  
(b) BUMEDINST 1510.25B  
(c) OPNAVINST 3000.15A  
(d) BUMEDINST 3000.1  
(e) BUMEDINST 6310.16  
(f) BUMEDINST 3400.3A  
(g) DoD Instruction 6490.11 of 18 Sep 2012

Encl: (1) Minimum Training Requirements for Medical Personnel  
(2) Minimum Training Requirements for Non-Medical Personnel

1. Purpose. To establish policy identifying minimum training requirements, per reference (a). This policy will be used to guide personnel in planning, prioritizing, and documenting individual-level training requirements.
2. Cancellation. BUMEDINST 1500.15F.
3. Scope and Applicability. This instruction applies to all Budget Submitting Office 18 Active Component and Reserve Component personnel.
4. Policy. Personnel will meet all individual-level training requirements as outlined in enclosures (1) and (2).
5. Background
  - a. Individual-level training requirements are essential for force development and force generation to support an agile ready medical force across the full range of military operations. Individual-level training is based on the development of a core set of validated and operationally unique readiness criteria required for effective performance in an expeditionary environment.
  - b. Reference (a) prescribes the requirements for appropriate individual-level training for Service members as the foundation for effective force health protection. Enclosures (1) and (2) identify training requirements for medical and non-medical personnel, per reference (a) through (g). Reference (b) identifies the appropriate tactical combat casualty care (TCCC) tier assignment by role and specialty.

6. Roles and Responsibilities

a. Director, Education and Training (BUMED-N7)

(1) Submit all individual-level training requirements to Director, Manpower and Personnel, (BUMED-N1) for entry into Navy Medicine's designated official readiness tracking and reporting system – Expeditionary Medicine Platform, Augmentation, Readiness, and Training System (EMPARTS).

(2) Ensure all individual-level training requirements have course identification numbers and are listed in the Fleet Training Management and Planning System (FLTMPS).

b. BUMED-N1. Ensure the individual-level training requirements are properly entered into EMPARTS.

c. Director, Reserve Policy and Integration (BUMED-N1R). Coordinate with Commander, Navy Reserve Forces Command and other key stakeholders to facilitate Reserve Component participation in individual-level training requirements.

d. Director, Operations Plans and Policy (BUMED-N3N5). Identify and provide BUMED-N7 with recommended changes to individual-level training requirements based upon emerging requirements from combatant and component commanders.

e. Commander, Naval Medical Forces Development Command

(1) Conduct regular and systematic evaluations of training course effectiveness to enable individuals to master critical knowledge, skills, and abilities.

(2) Generate required courses not commercially available, based on identified training gaps and develop course identification numbers to enable documentation in FLTMPS.

(3) Conduct performance improvement activities to regularly integrate new evidence into course curricula.

(4) Ensure sufficient quotas are available for courses included in enclosures (1) and (2) to meet Expeditionary Medical Family of Systems (EXMED FoS) force development requirements.

f. Commander, Naval Medical Forces Atlantic and Commander, Naval Medical Forces Pacific

(1) Program, budget, and account for the cost of individual-level training for EXMED FoS and personnel under their administrative control.

(2) Provide oversight and monitor compliance of individual-level training requirements for subordinate commands.

(3) Coordinate with Joint Trauma System to evaluate individual and unit-level training effectiveness based on metrics derived from Joint Trauma System Trauma Patient Registry.

(4) Report key individual and unit-level training related findings in the Navy Medicine Lessons Learned system.

(5) Exemption to training policy waivers which support the rapid deployment of a member or an EXMED FoS may be approved by the first flag officer in the chain of command. Notify the Surgeon General of the Navy, who also performs the duties of Chief, BUMED, via BUMED-N3N5 for any exempted training.

g. Commanders, Commanding Officers, and Officers in Charge, Echelon 4 and 5

(1) Ensure requirements for all personnel are completed whether in a deployable or non-deployable status and within the Optimized Fleet Response Plan, per reference (c) and (d). Personnel assigned to EXMED FoS, or selected to augment combat casualty care deployments, remain highest priority for training and skills sustainment.

(2) Coordinate with medical type commander and immediate superior in command to program, budget, and plan for the cost to provide individual-level training for personnel assigned to the command.

(3) Take proactive measures to ensure personnel maintain clinical skills and competencies as part of their overall readiness.

(4) Ensure all individual-level training requirements are properly documented in FLTMPs.

7. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules found on the Division and Records Management Division portal page at <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-InformationManagement/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 Office of the Chief of Naval Operations (OPNAV) Records Management Program (DNS-16).

8. Review and Effective Date. Per OPNAVINST 5215.17A, Director, Logistics, Supply, and Support (BUMED-N4) will review this instruction annually on or about the issuance date to ensure applicability, currency, and consistency with Federal, Department of War, 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 the guidance in OPNAV manual 5215.1 of May 2016.

9. Information Management Control. Reports required in subparagraph 6f(4) of this instruction are exempt from reports control per Secretary of the Navy manual 5214.1 of December 2005, part IV, subparagraph 7k.



R. FREEDMAN  
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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/>

Minimum Training Requirements for Medical Personnel

<u>Corps</u>	<u>Non-Platform-Assigned</u> (Training assigned per reference (a))	<u>Platform-Assigned</u> (Training listed under "Non-Platform-Assigned" also required)
Hospital Corpsman	<ul style="list-style-type: none"> <li>- BLS (Basic Life Support)</li> <li>- TCCC Tier 3 (except L00A, L10A)</li> <li>- TCCC Tier 4 (only L00A, L01A, L02A, L10A, and L28A)</li> </ul>	<ul style="list-style-type: none"> <li>- Advanced Life Support (ALS) (L00A, L01A, L02A, L10A, L28A, and L32A only)</li> <li>- Chemical, Biological, Radiological, Nuclear, and High Yield Explosives (CBRNE) First Responder</li> <li>- Field Management Chemical and Biological Casualties (L12A only)</li> <li>- Medical Ethics and Detainee Operations Basic</li> <li>- Concussion Training for Medical Personnel</li> <li>- Military Acute Concussion Evaluation (Version 2) (MACE2)</li> <li>- Hospital Corpsman Trauma Training (Expeditionary Medical Unit Casualty receiving personnel, and Forward Deployed Preventive Medicine Unit L03A, L12A)</li> </ul>
Dental Corps	<ul style="list-style-type: none"> <li>- BLS</li> <li>- TCCC Tier 3 (except 1750)</li> <li>- TCCC Tier 4 (only 1750)</li> </ul>	<ul style="list-style-type: none"> <li>- CBRNE Clinician</li> <li>- Medical Ethics and Detainee Operations Basic</li> <li>- Concussion Training for Medical Personnel</li> <li>- MACE2</li> </ul>
Nurse Corps	<ul style="list-style-type: none"> <li>- BLS</li> <li>- TCCC Tier 4</li> <li>- Trauma Nurse Core Course (1945 and 1960 only)</li> <li>- ALS (1945 and 1960 only)</li> </ul>	<ul style="list-style-type: none"> <li>- ALS (except for 1930, 1940, 1973)</li> <li>- ATLS (Advanced Trauma Life Support) (1972 and 1976 only)</li> <li>- CBRNE Clinician</li> <li>- Medical Ethics and Detainee Operations Basic</li> <li>- Concussion Training for Medical Personnel</li> <li>- MACE2</li> <li>- Trauma Nurse Core Course (except 1930, 1940, 1972, 1973, 1976)</li> </ul>
Medical Service Corps	<ul style="list-style-type: none"> <li>- BLS (1840, 1862, 1870, 1874, 1876, 1880, 1887, 1892, and 1893)</li> <li>- TCCC Tier 1 (except 1893)</li> <li>- TCCC Tier 4 (1893 only)</li> </ul>	<ul style="list-style-type: none"> <li>- BLS</li> <li>- CBRNE Basic (except 1893)</li> <li>- CBRNE Clinician (1893 only)</li> <li>- ALS (1892 and 1893 only)</li> <li>- ATLS (1893 only)</li> <li>- Medical Ethics and Detainee Operations Basic</li> <li>- Concussion Training for Medical Personnel</li> <li>- MACE2</li> </ul>
Medical Corps	<ul style="list-style-type: none"> <li>- BLS</li> <li>- TCCC Tier 4</li> </ul>	<ul style="list-style-type: none"> <li>- CBRNE Clinician (except 16P0 or 16P1)</li> <li>- Medical Management of Chemical and Biological Casualties (16P0 or 16P1 only)</li> <li>- Medical Ethics and Detainee Operations Basic - ATLS (15B0 or 15B1, 15E0 or 15E1, 15F0, 16R0 or 16R1, 16P0 or 16P1, 15H0 or 15H1 only)</li> <li>- ALS (except 16P0 or 16P1)</li> <li>- Concussion Training for Medical Personnel</li> <li>- MACE2</li> </ul>

Please Note: Additional training may be required based on emerging requirements from the combatant commander or the area of responsibility.

Minimum Training Requirements for Non-Medical Personnel

<u>Corps</u>	<u>Non-Platform-Assigned</u>	<u>Platform-Assigned</u> (Training listed under "Non-Platform-Assigned" also required)
Chaplain	<ul style="list-style-type: none"> <li>- BLS</li> <li>- TCCC Tier 1</li> <li>- Clinical Pastoral Education</li> </ul>	<ul style="list-style-type: none"> <li>- CBRNE (Basic)</li> <li>- Concussion Training for Service Members</li> <li>- SafeTALK and ASIST Workshops</li> <li>- U JKO Humanitarian Essentials Course- Expanded Operational Stress Control Course</li> <li>- International Critical Incident Stress Foundation - Group Crisis Intervention Course</li> <li>- International Critical Incident Stress Foundation - Assisting Individuals in Crisis Course</li> </ul>
Religious Program Specialist	<ul style="list-style-type: none"> <li>- BLS</li> <li>- TCCC Tier 1</li> </ul>	<ul style="list-style-type: none"> <li>- Concussion Training for Service Members</li> <li>- CBRNE (Basic)</li> <li>- SafeTalk and ASIST Workshops</li> <li>- JKO Humanitarian Essentials Course- Expanded Operational Stress Control Course</li> </ul>
Non-Medical Service Members	<ul style="list-style-type: none"> <li>- TCCC Tier 1</li> </ul>	<ul style="list-style-type: none"> <li>- Concussion Training for Service Members</li> </ul>

Please Note: Additional training may be required based on emerging requirements from the combatant commander or the area of responsibility.