



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

IN REPLY REFER TO
BUMEDINST 3440.13
BUMED-M4
1 Mar 2021

BUMED INSTRUCTION 3440.13

From: Chief, Bureau of Medicine and Surgery

Subj: INSTALLATION SUPPORT PATIENT DECONTAMINATION TEAM CONCEPT OF OPERATIONS

Ref: (a) DoD Instruction 6055.17 of 13 February 2017
(b) DoD Instruction 6200.03 of 28 March 2019
(c) OPNAVINST 3440.17A
(d) BUMEDINST 3440.10B

1. Purpose. To establish the standard operating procedures and response tactics for use by Navy Medicine (NAVMED) installation support patient decontamination teams in response to a mass casualty (MASCAL) chemical, biological, radiological, and nuclear (CBRN) or hazardous material (HAZMAT) incident. References (a) through (c) establish the requirement for MASCAL patient decontamination.

2. Background. Following a CBRN or HAZMAT incident on or near a Department of Defense (DoD) installation, personnel that have been contaminated can be expected to seek medical care at the closest medical treatment facility (MTF). Patients presenting to an MTF from the aftermath of a contamination incident should be presumed contaminated and must be decontaminated before entering the MTF or transported to another healthcare facility. Navy Medicine Readiness and Training Commands (NAVMEDREADTRNCMD) and Navy Medicine Readiness and Training Units (NAVMEDREADTRNUNIT) with the requisite active duty staffing have been assigned a patient decontamination team response capability and must be prepared to field that capability throughout their work day.

3. Scope and Applicability. These Concept of Operations (CONOPS) apply to all NAVMED-READTRNCMDs and NAVMEDREADTRNUNITs assigned a patient decontamination team response capability per reference (d) and they delineate the specific procedures for use at NAVMEDREADTRNCMDs and NAVMEDREADTRNUNITs in fielding a first-receiver patient decontamination response.

4. Responsibilities

a. Director, Bureau of Medicine and Surgery (BUMED) Emergency Preparedness (BUMED-M453) will:

(1) Establish NAVMED patient decontamination team policy and provide the funding, training, and equipment to facilitate installation support MASCAL decontamination response per reference (d).

(2) Maintain and update this CONOPS standard operating procedure uploaded at <https://community.max.gov/x/OFftg> which is accessible to users with a common access card or BUMED sponsored MAX.gov account.

b. NAVMED echelon 3 commanders will provide the oversight and program management support to facilitate the implementation of these CONOPS at all designated NAVMEDREADTRNCMDs and NAVMEDREADTRNUNITs within their respective area of responsibility.

c. NAVMED commanders, commanding officers, and officers in charge assigned patient decontamination team capabilities will ensure their team is properly staffed, trained, and equipped per reference (d) and these CONOPS.

(1) Any NAVMED commanding officer or officer in charge that fields a patient decontamination team response and decontaminates one or more patients during an actual CBRN or HAZMAT incident, even if the incident is subsequently determined to present no threat, must report the incident to their respective chain of command per the applicable commander's critical incident reporting procedures, ensuring their host installation leadership is informed.

(2) NAVMED commanders at NAVMEDREADTRNCMDs and NAVMEDREADTRN-UNITs operated under the leadership of the Defense Health Agency, must ensure both BUMED and Defense Health Agency chains of command are informed of the incident and any follow-on impact to personnel or facilities.

5. 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 located on the Department of the Navy Directorate for Administration, Logistics, and Operations, 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 Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division program office.

6. Review and Effective Date. Per OPNAVINST 5215.17A, Fleet Support (BUMED-M4) will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, DoD, 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.

7. Forms and Information Management Control. The reporting requirements contained in subparagraph 4c(1) of this instruction is exempt from reports control per Secretary of the Navy Manual 5214.1 of December 2005, part IV, subparagraph 7k.


G. D. SHAFFER
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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, <http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx>