



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

BUMEDINST 5450.267
BUMED-N1
12 Mar 2026

BUMED INSTRUCTION 5450.267

From: Chief, Bureau of Medicine and Surgery

Subj: MISSION, FUNCTIONS, AND TASKS OF NAVY BLOODBORNE INFECTION
MANAGEMENT CENTER

Ref: (a) BUMEDINST 5450.174B
(b) OPNAVINST 6400.1D
(c) OPNAVINST 1000.16L
(d) OPNAVINST 3120.32D
(e) Navy Regulations, 1990

Encl: (1) Functions and Tasks of Navy Bloodborne Infection Management Center

1. Purpose. To define the mission, functions, and tasks of Navy Bloodborne Infection Management Center (NAVBLDINFMANCEN) under the mission established by references (a) through (e), chapter 10 and enclosure (1).
2. Cancellation. NAVMCPUBHLTHCENINST 5450.2A.
3. Mission. To safeguard the Department of the Navy's (DON) blood supply through centralized screening, testing, policy development, expert guidance, and effective disease management of bloodborne pathogens, which includes human immunodeficiency virus (HIV), hepatitis B virus (HBV), and hepatitis C virus (HCV), maximizing operational medical readiness requirements.
4. Command Hierarchy. NAVBLDINFMANCEN is a shore activity in an active operating status under an officer in charge.

a. Command

Officer in Charge
Navy Bloodborne Infection Management Center
NMMC Building 17B Room 3376 Suite 3G
8901 Wisconsin Avenue
Bethesda, Maryland 20889-0000

(SNDL: FH30) (UIC: 68591)
(PLA: NAVBLDINFMANCEN BETHESDA MD)

b. Echelon

(1) Echelon 1: Chief of Naval Operations

(2) Echelon 2: Chief, Bureau of Medicine and Surgery

(3) Echelon 3: Commander, Naval Medical Forces Atlantic

(4) Echelon 4: Commander, Navy and Marine Corps Force Health Protection Command (NAVMCFORHLTHPRTCMD)

(5) Echelon 5: Officer in Charge, NAVBLDINFMANCEN

c. Immediate Superior in Command of: None.

d. Area Coordination

(1) Area coordinator: Commander, Navy Installations Command

(2) Regional coordinator: Commandant, Naval District Washington

e. Office of the Chief of Naval Operations (OPNAV) Resource Sponsor

(1) Director, Military Personnel, Plans, and Policy (OPNAV N13) and Expeditionary Health Branch (OPNAV N4L4).

(2) Activity-level aggregation of estimated manpower cost.

(a) Military Personnel Navy: \$176,433

(b) Civilian Personnel: \$1.23 million

(c) Contractors: \$300,000

5. Supporting relationships: None.

6. Obligations to external entities:

a. Memorandum of agreement between NAVMCFORHLTHPRTCMD on behalf of NAVBLDINFMANCEN and U.S. Coast Guard for Subject HIV testing program, Agreement Number 468.

b. Memorandum of understanding between NAVMCFORHLTHPRTCMD on behalf of NAVBLDINFMANCEN and the Defense Manpower Data Center.

7. Action. The Officer in Charge, NAVBLDINFMANCEN will ensure performance of the functions and tasks in enclosure (1) and forward recommended changes via the chain of command to Commander, NAVMCFORHLTHPRTCMD, per reference (a).

8. 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 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).

9. Review and Effective Date. Per OPNAVINST 5215.17A, Manpower Plans and Business Policy (BUMED-N12) will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of War (DOW), Secretary of the Navy (SECNAV), 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 the 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.

10. Information Management Control. Reports required in enclosure (1) of this instruction are exempt from reports control per SECNAV Manual 5214.1 of December 2005, part IV, subparagraph 7k.



R. FREEDMAN
Acting

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/>

FUNCTIONS AND TASKS OF NAVY BLOODBORNE
INFECTION MANAGEMENT CENTER

1. Key Functions. Subparagraphs 1a through 1d identify key functions of the NAVBLDINFMANCEN.

a. Oversee the administration of HIV, HBV, and HCV screening for the DON, as directed by higher authority. Support the development and implementation of policies for HIV, HBV, and HCV screening within the DON, ensuring compliance with all directives and prioritizing operational needs and risk assessments. Recommend policy updates based on operational relevance, feedback, novel technologies, and emerging best practices.

b. Establish partnerships for data sharing and analysis with other agencies, including the Defense Health Agency's (DHA) Armed Forces Health Surveillance Division, to enhance disease surveillance and contribute to research initiatives aimed at improving infectious diseases prevention and control. Execute memorandums of understanding and interservice support agreements for purposes of data sharing services with external partners.

c. Provide an annual report of HIV, HBV, and HCV incidence rates, including trend analysis, to Chief of Naval Operations, Commandant of the Marine Corps, SECNAV, Manpower and Reserve Affairs via NAVMCFORHLTHPRTCMD and the Bureau of Medicine and Surgery, to inform policy and resource decisions.

d. Ensure that NAVBLDINFMANCEN's data repository system, the HIV Management Service, meets all DOW, DON, and Military Health System security requirements to safeguard Service member privacy and protect the system from breaches.

2. Functions and Tasks

a. Officer in Charge. Responsible and accountable for all aspects of the command. Ensures the effective and efficient performance of the functions and operations per U.S. Navy Regulations and other directives issued by competent authority.

b. Disease Management Focus Group. Led by the Disease Management Focus Group lead, this focus group provides guidance and support for the clinical and administrative management of Service members living with HIV, HBV, or HCV.

(1) Provide prompt initial notification of an HIV positive test to the Service member's commanding officer, HIV Evaluation and Treatment Units (HETU), and all Navy and Marine Corps activities, ensuring confidentiality and compassionate communication. Provide support for commands to facilitate the Service members prompt access to medical care.

(2) Track all Active and Reserve Component DON Service members living with HIV, HBV, or HCV for effective treatment coordination and readiness assessment. Collaborate and

coordinate among HETUs and health care providers for a seamless transition of care and long-term disease management.

(3) Conduct operational and overseas medical suitability screening of Service members living with HIV, HBV, or HCV and provide formal notification of suitable or unsuitable determinations to Navy and Marine Corps activities, as directed by higher authority. Consult with the Navy Personnel Command, Headquarters Marine Corps, and HETUs on determining appropriate operational or overseas assignment locations for Service members living with HIV, HBV, or HCV, especially in deployed environments, balancing individual health needs, and maintaining operational readiness.

c. Force Testing and Data Management Focus Group. Led by the Force Testing Focus Group lead, this focus group administers HIV, HBV, and HCV screening programs and other initiatives to reduce bloodborne disease transmission and prevent new infections.

(1) Maintain an accurate and secure central database of DON military personnel who have serologic evidence of infection with HIV, HBV, or HCV for proactive health management and readiness tracking.

(2) Oversee quality control and reliability of contracted infectious diseases laboratory testing services. Explore in-house and local testing capabilities where appropriate. Ensure the delivery of periodic HIV testing services to Active and Reserve Component DON Service members stationed worldwide, as directed by higher authority. Ensure screening for HIV, HBV, and HCV at Navy and Marine Corps initial entry training sites.

(3) Monitor compliance of HIV, HBV, and HCV testing intervals established by the SECNAV at all DON activities, identifying and addressing potential gaps in force health screening.

(4) Partner with program managers to include the Sexual Health and Responsibility Program and Military HIV Research Program, and stakeholders such as the DHA and Armed Forces Health Surveillance Division to support health promotions through data analysis and education programs for military personnel to mitigate the impact of HIV, HBV, and HCV infection in the DON.

(5) Collaborate with DHA, DHA Public Health, and other stakeholders to promote HIV prevention efforts, including expansion of access to HIV pre-exposure prophylaxis within the DOW.

(6) Collaborate with the Military HIV Research Program, DHA, and academic institutions on studies to improve prevention and detection of bloodborne infections. This includes exploring emerging technologies for rapid testing and field-deployable diagnostics.

d. Program Administration Focus Group. Led by the Program Administration Focus Group lead, this focus group oversees and coordinates operational, administrative, and logistical functions essential to the efficiency and compliance of NAVBLDINFMANCEN activities. The group supports the team by leading efforts in acquisition, documentation control, records and system configuration management, and physical security. It also serves as a platform for staff communication and continuous process improvement.

(1) Oversee financial operations and procurement processes to ensure efficient and compliant resource management. This includes timely review and processing of financial documents for the HIV force testing contract to ensure prompt and accurate payments, as well as the development and maintenance of financial and contractual workload data systems. Conducts weekly follow-ups on procurement requests with fiscal and budget personnel and ensures that relevant acquisition information is communicated to appropriate staff to support transparency and accountability.

(2) Manage contracts, agreements, and contractor compliance with data-sharing partners to include expenditures and labor. Oversee the implementation and monitoring of the HIV testing contract to ensure that the contractor meets performance and reporting standards.

(3) Lead the development and governance of acquisition processes, documentation control, and standard operating procedures. This involves promoting the department-wide use of the revised acquisition process, implementing document control policies for all financial and administrative records, and reviewing and updating all standard operating procedures under their control to maintain alignment with current regulatory and operational standards.

(4) Coordinate records management, forms management, and other administrative functions. Develop and implement departmental records management and forms or report management systems to support efficient and compliant documentation practices. Maintain administrative and financial databases to ensure data integrity and continuity of operations. Provide administrative oversight, including human resources coordination, timekeeping, budget administration, audit support, and serving as signing authority for related documents.

(5) Ensure security compliance of NAVBLDINFMANCEN. This includes confirming that NAVBLDINFMANCEN personnel and physical spaces meet NAVMCFORHLTH-PRTCMD and Health Insurance Portability and Accountability Act standards and assist the command security officer with implementing and maintaining the command's security posture.

(6) Facilitate communication, reporting, and continuous process improvement efforts. Collect, compile, and analyze data aligned with the team's charter to support operational planning and process improvement. Provide regular updates to NAVBLDINFMANCEN staff during scheduled meetings, including workload summaries, task status, and challenges encountered. It serves as a communications link between NAVBLDINFMANCEN, contractors, and NAVMCFORHLTHPRTCMD fiscal and budget personnel. The Program Administration

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Focus Group lead determines the reporting focus for bi-monthly NAVBLDINFMANCEN meetings to ensure alignment with organizational priorities.