



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

BUMEDINST 5830.1C  
BUMED-N10G  
24 Jan 2025

BUMED INSTRUCTION 5830.1C

From: Chief, Bureau of Medicine and Surgery

Subj: HEALTH CARE INVESTIGATION PROCEDURES FOR SPECIALTY REVIEWS

Ref: (a) OPNAVINST 5450.215F  
(b) DHA-PM 6025.13, Volume 3  
(c) BUMEDINST 6010.18C  
(d) BUMEDINST 5420.12G  
(e) JAGINST 5800.7G  
(f) 10 United States Code §1102  
(g) BUMEDINST 6010.13  
(h) BUMEDINST 6010.21

Encl: (1) Sample Specialty Leader Appointing Letter to Specialty Reviewer for a Litigation Report  
(2) Sample Specialty Leader Appointing Letter to Specialty Reviewer for a Quality Assurance Investigation  
(3) Sample Specialty Reviewer Letter to Investigating Officer for a Litigation Report  
(4) Sample Specialty Reviewer Letter to Investigating Officer for a Quality Assurance Investigation

1. Purpose. Establishes Bureau of Medicine and Surgery (BUMED) policy, assigns responsibility, and prescribes procedures for convening health care investigations under references (a) through (h) where adequacy of the medical care provided is at issue. Appropriate medical specialty review to determine standard of care (SOC) must be obtained prior to command endorsement of a health care investigation. Adherence to these procedures will streamline the specialty review process and provide subject specific expertise to convening authorities and investigating officers.

2. Cancellation. BUMEDINST 5830.1B.

3. Scope and Applicability. This instruction applies to Navy and Marine Corps operational clinical services, regardless of platform type or installation. It is applicable to all privileged, non-privileged, and unlicensed staff who work under a scope of practice or are supervised (directly or indirectly) by a licensed healthcare provider (e.g., hospital corpsman or independent duty corpsman).

4. Background. The Secretary of the Navy (SECNAV) has policy oversight of the Clinical Quality Management Program within the Department of the Navy (DON). BUMED serves as

the principal advisor to SECNAV on all health and medical matters of the Navy and Marine Corps, including policy development relating to such matters, per reference (a). The Chief of Naval Operations and Commandant of the Marine Corps are committed to continuously improving the quality of medical and dental care provided to all DON personnel regardless of assignment. Timely, thorough, and unbiased clinical specialty reviews are essential for objective analysis of potential medical malpractice claims against the Navy for mitigation and for appropriate reporting.

## 5. Policy

a. To ensure a valid, unbiased, impartial review of the SOC, BUMED requires that a clinical specialty review be prepared externally to the command where the event occurred. A complete, comprehensive review must state the SOC for any practices, procedures, policies, protocols, or systems involved in the incident, and the basis which establishes that SOC. Reference (b) defines SOC as, “healthcare judgments and actions of a healthcare provider generally accepted in the discipline or specialty involved as reasonable and appropriate.”

b. The impartiality of specialty reviews is critical to any future evaluations by BUMED of paid malpractice claims per reference (b). Designated panels consider these reviews in determining whether involved providers should be reported to the National Practitioner Data Bank (NPDB) as required in reference (c).

## 6. Roles and Responsibilities

### a. High Reliability Office Clinical Quality Management (BUMED-N10G) must:

(1) Upon request for medical specialty review(s), identify the appropriate clinical specialties involved.

(2) Coordinate with appropriate medical specialty leader(s) to identify and to appoint a separate specialty review for each specialty involved in the investigation.

### b. Fleet and Force Command Surgeons must:

(1) Coordinate with BUMED-N10G to identify per references (g) and (h), the type of health care investigation to be convened and the appropriate investigating officer. Request appropriate medical specialty review(s) to BUMED-N10G and include a brief synopsis of the incident, the identities of all significantly involved providers who rendered care to the patient, the involved providers’ clinical specialties, and their level of training.

(2) If a trainee (intern or resident) is identified, the attending staff will also be identified.

(3) For unlicensed healthcare providers (e.g., hospital corpsman or independent duty corpsman) working under supervision (i.e., direct, or indirect) the supervisor must be identified.

c. Specialty Leader Responsibilities

(1) Assign a specialty reviewer. In their capacity as a specialty leader per reference (d) and based on their review, knowledge of the incident, and professional expertise, must assign a fully trained specialist to serve as the specialty reviewer. This can be any medical department officer, or providers assigned to operational platforms with the requisite credentials and competence necessary to analyze the incident and to provide a professional specialty opinion on whether the SOC was met.

(2) Notify the specialty reviewer. To expedite the assignment of a specialty review, the specialty leader must directly notify the specialty reviewer of the assignment in writing using the appointing letter template of enclosure (1) for reviews requested for litigation report investigations and enclosure (2) for reviews requested for non-litigation report investigations. Copies of the appointing letters will be provided to:

(a) Reviewer's commanding officer

(b) Fleet and Force Command Surgeon convening the investigation

(3) Review the completed specialty review. In any instance where the SOC was not met, and the specialty leader has concerns about the quality of care being delivered, a copy of the specialty review must be forwarded to BUMED-N10G. The intent is to identify issues at the time of discovery and not to delay corrective action until completion of the investigative report or payment of the compensatory event.

(4) Exceptions to assigning a specialty reviewer. If the specialty leader determines that appointment of a specialty reviewer is unnecessary based on the criteria in subparagraphs 6c(4)(a) and 6c(4)(b), the commanding officer or convening authority of the investigation will be provided with written notification of this decision. This correspondence will become an enclosure in the litigation report or non-litigation investigation. The exceptions in subparagraphs 6c(4)(a) and 6c(4)(b) do not require assignment of a specialty reviewer.

(a) When the incident is obvious malpractice and would not require specialized expertise on whether the SOC was met (e.g., surgical removal of the wrong limb).

(b) When the investigating officer is known by the specialty leader to possess the requisite demonstrated skills as a specialty reviewer to evaluate the event and is sufficiently removed from the matter to render an unbiased opinion. In this case, the investigating officer, acting as specialty reviewer, must include an SOC analysis and determination in the "opinions" section of the report, their curriculum vitae, and any literature supporting such opinions as enclosures to the report. The investigating officer must also reference the specialty leader's determination that the investigating officer was authorized to act as a specialty reviewer in the case in the "preliminary statement" of the report.

d. Specialty Reviewer Responsibilities

(1) The specialty reviewer will act as a consultant and must advise the investigating officer of relevant information required to conduct a thorough investigation and specialty review. The specialty reviewer is not responsible for compiling information or writing the investigative report.

(2) When the investigating officer has completed the “Finding of Fact” portion of the investigation, a copy, along with enclosures, must be sent to the assigned specialty reviewer for review. To provide a credible review with supporting documentation, the specialty reviewer must render an SOC analysis and determination in the format provided in enclosures (3) for a litigation report investigation or enclosure (4) for a non-litigation report investigation. The original review is forwarded to the investigating officer, with a copy to the specialty leader. If there is insufficient information to render an SOC, the specialty reviewer must indicate why they are unable to render an SOC review.

(3) Specialty reviewers must be sensitive to investigative time requirements and must expedite reviews to ensure the investigation is completed in a timely manner. If the information provided by the investigating officer is insufficient to render an opinion, the specialty reviewer must advise the investigating officer as soon as possible. The specialty reviewer is not permitted to contact any involved providers or to obtain information outside of the investigation. Specialty reviews must be returned to the investigating officer no later than 30 days after receipt of the investigation. Delays in specialty review completion should be reported to the cognizant specialty leader.

(4) If a specialty reviewer uses support staff to research literature or to assist in any way, the specialty reviewer remains ultimately responsible for the professional specialty review and opinions provided to the investigating officer.

e. Investigating Officer and Convening Officer’s Responsibilities Regarding Opinions. The investigating officer must summarize all specialty review determinations in the “opinions” section of the investigation and include any specialty reviews as enclosures to the investigation. If desired, the investigating officer and convening officer may comment on the opinions and suggestions made in the specialty reviews but may not approve or disapprove the specialty review. The convening officer’s endorsement of the investigation may clarify disagreements with the specialty reviewer, but comments must be supported by evidence in the investigation.

7. Confidentiality

a. Specialty reviews conducted as part of a litigation report, per reference (e), are created in anticipation of claims or litigation and are for the express purpose of assisting attorneys representing interests of the U.S. government. As such, these investigations and specialty reviews are privileged as an attorney work product. Specialty reviews for this purpose

are not quality assurance documents under reference (f) and must not contain documents obtained from quality assurance records and files. Guidance concerning this privilege must be sought from the Staff Judge Advocate or health law attorney at either the medical treatment facility or the applicable Navy Medicine regional headquarters.

b. Specialty reviews requested for specific quality assurance programs are covered under separate BUMED instructions, per references (g) and (h).

c. Convening officers are to take special care when issuing appointment letters to ensure the appropriate reference is used in identifying litigation reports vice quality assurance investigations (i.e., non-litigation report investigations).

#### 8. Records Management

a. Records created as a result of this instruction, regardless of format and media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Assistant for Administration, Directives and Records Management Division portal page at <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-InformationManagement/Approved%20Record5%Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this instruction or 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, BUMED-N10 will review this instruction annually around the anniversary of its 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 the guidance in OPNAV Manual 5215.1 of May 2016.



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/>

BUMEDINST 5830.1C  
24 Jan 2025

SAMPLE SPECIALTY LEADER APPOINTING LETTER TO SPECIALTY REVIEWER  
FOR A LITIGATION REPORT

5830  
Date

From: Specialty Leader  
To: Specialty Reviewer

Subj: SPECIALTY REVIEW IN THE CASE OF (insert case name and identifiers from subject line of the investigation)

Ref: (a) BUMEDINST 5830.1C  
(b) JAGINST 5800.7G, Manual of the Judge Advocate General, Chapter II

1. You are appointed to provide technical assistance to the investigating officer by conducting a specialty review of the care rendered in the case under investigation. The investigating officer, (enter name), will provide you with a copy of the factual portion of the investigation and other documents needed to prepare your review. As indicated in reference (a), the purpose of your review is to assess the medical care provided to assist Government attorneys in the defense of an existing or anticipated medical malpractice claim.
2. Your review must be in the format provided in enclosure (3) of reference (a) and must discuss the standard of care at the time of the incident. You must objectively evaluate and state whether the standard of care was met based upon accepted medical practice and current professional literature. Your review should not include opinions concerning whether a claim should be denied or settled.
3. Your review is privileged as attorney work product per reference (b) and may not include any quality assurance documents or labels.
4. Your review must be completed within 30 days of receipt of the investigation from the investigating officer. If you cannot meet this deadline, contact BUMED-N10G for guidance.

Your signature block  
Rank, Corps, Service  
Specialty Leader for

Copy to:  
Reviewer's commanding officer  
Commanding officer convening investigation

Enclosure (1)

BUMEDINST 5830.1C  
24 Jan 2025

SAMPLE SPECIALTY LEADER APPOINTING LETTER TO SPECIALTY REVIEWER  
FOR A QUALITY ASSURANCE INVESTIGATION

5830  
Date

From: Specialty Leader  
To: Specialty Reviewer

Subj: SPECIALTY REVIEW IN THE CASE OF (insert case name and identifiers from subject line of the investigation)

Ref: (a) BUMEDINST 5830.1C  
(b) 10 United States Code §1102

1. You are appointed to provide technical assistance to the investigating officer by conducting a specialty review of the care rendered in the case under investigation. The investigating officer, (enter name), will provide you with a copy of the factual portion of the investigation and other documents needed to prepare your review. As indicated in reference (a), the purpose of your review is to assess the medical care provided to identify any quality assurance issues.
2. Your review must be in the format provided in enclosure (4) of reference (a) and must discuss the standard of care at the time of the incident. You must objectively evaluate and state whether the standard of care was met based upon accepted medical practice and current professional literature. Your review should not include opinions concerning whether a claim should be denied or settled.
3. Your review is considered a quality assurance document and is protected per reference (b) and must be appropriately labeled.
4. Your review must be completed within 30 days of receipt of the investigation from the investigating officer. If you cannot meet this deadline, contact BUMED-N10G for guidance.

Your signature block  
Rank, Corps, Service  
Specialty Leader for (enter name of specialty)

Copy to:  
Reviewer's commanding officer  
Commanding officer convening investigation

Enclosure (2)

BUMEDINST 5830.1C  
24 Jan 2025

SAMPLE SPECIALTY REVIEWER LETTER TO INVESTIGATING OFFICER  
FOR A LITIGATION REPORT

**CONTROLLED UNCLASSIFIED INFORMATION (CUI) – ATTORNEY WP**  
5830  
Originator's Code  
Date

From: Specialty Reviewer  
To: Investigating Officer  
Via: Specialty Leader

Subj: SPECIALTY REVIEW IN THE CASE OF (insert case name and identifiers from subject line of the investigation)

Ref: (a) Specialty Leader ltr 5830 of \_\_\_\_\_  
(b) BUMEDINST 5830.1C  
(c) JAGINST 5800.7G, Manual of the Judge Advocate General, Chapter II

Encl: (1) Curriculum Vitae  
(2) (Cite articles)  
(3) (Cite investigative report)

1. Per references (a) through (c), this specialty review has been prepared to assess the care provided in the matter under investigation and assist Government attorneys in defense of an existing or anticipated medical malpractice claim. Enclosure (1) Curriculum vitae attests to my qualifications.

2. Relevant Facts. (Set out the facts as they pertain to the matters under review, identifying providers involved, including their area of practice, training level, and employer.)

3. Standard of Care (SOC). (Describe, citing appropriate literature (enclosure (2), the SOC at the time of the incident.)

4. SOC Determination. (Discuss how the SOC was met or breached. If the SOC was breached, identify, and discuss how specific provider or specific systems or equipment deviated from SOC.) Cite investigative report as appropriate (Enclosure (3)).

5. Injury and Causation. (Identify and discuss the nature, extent, and prognosis of any injury and its relationship to the breach of SOC.)

6. Miscellaneous. (Identify and discuss any other relevant issues.)

Your signature block  
Rank, Corps, Service

**CONTROLLED UNCLASSIFIED INFORMATION (CUI) – ATTORNEY WP**

Enclosure (3)



BUMEDINST 5830.1C  
24 Jan 2025

**SAMPLE SPECIALTY REVIEWER LETTER TO INVESTIGATING OFFICER**  
**FOR A QUALITY ASSURANCE INVESTIGATION**  
**CONTROLLED UNCLASSIFIED INFORMATION (CUI) – PRIVILEGE**

5830  
Originator's Code  
Date

From: Specialty Reviewer  
To: Investigating Officer  
Via: Specialty Leader

Subj: SPECIALTY REVIEW IN THE CASE OF (insert case name and identifiers from subject line of the investigation)

Ref: (a) Specialty Leader ltr 5830 of \_\_\_\_\_  
(b) BUMEDINST 5830.1C

Encl: (1) Curriculum Vitae  
(2) (Cite articles)  
(3) (Cite investigative report)

1. Per references (a) and (b), this specialty review has been prepared to assess the care provided in the matter under investigation and to assess the medical care provided to identify any quality assurance issues. Enclosure (1) Curriculum vitae attests to my qualifications.
2. Relevant Facts. (Set out the facts as they pertain to the matters under review, identifying providers involved, including their area of practice, training level, and employer.)
3. Standard of Care (SOC). (Describe, citing appropriate literature (enclosure (2), the SOC at the time of the incident.)
4. SOC Determination. (Discuss how the SOC was met or breached. If the SOC was breached, identify, and discuss how specific provider or specific systems or equipment deviated from the SOC.) Cite investigative report as appropriate (Enclosure (3)).
5. Injury and Causation. (Identify and discuss the nature, extent, and prognosis of any injury and its relationship to the breach of SOC.)
6. Miscellaneous. (Identify and discuss any other relevant issues.)

Your signature block  
Rank, Corps, Service

The information provided herein was obtained from records maintained as part of Navy Medicine's Quality Assurance Program and is strictly confidential and privileged. No part of this information may be disclosed, subject to discovery, or admitted into evidence in any judicial or administrative proceeding, except in accordance with 10 U.S.C. section 1102.

**CONTROLLED UNCLASSIFIED INFORMATION (CUI) – PRIVILEGE**

Enclosure (4)