



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
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BUMEDINST 6110.15C
BUMED-N3N5
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BUMED INSTRUCTION 6110.15C

From: Chief, Bureau of Medicine and Surgery

Subj: MEDICAL DEPARTMENT RESPONSIBILITIES FOR THE PHYSICAL READINESS PROGRAM

Ref: (a) OPNAVINST 6110.1K
(b) Navy Physical Readiness Program Guide 6 (January 2024)
(c) Navy Physical Readiness Program Guide 8 (January 2024)
(d) SECNAVINST 6120.3A
(e) BUMEDINST 6320.104
(f) SECNAV WASHINGTON DC 271542Z Feb 23 (ALNAV 017/23)
(g) NAVMED P-117

1. Purpose. To assign responsibility for Navy Medicine personnel in support of reference (a). This instruction is a complete revision and should be reviewed in its entirety.
2. Cancellation. BUMEDINST 6110.15B.
3. Scope and Applicability. This instruction applies to all ships and stations with Navy Medical Department personnel.
4. Background. Per references (a) and (b), prior to the physical readiness test, participants must have a Physical Fitness Assessment (PFA) medical screening, which includes an annual periodic health assessment (PHA), the Physical Activity Risk Factor Questionnaire (PARFQ) NAVPERS 6110/3 Pre-physical Activity Questions and, when necessary, a Deployment-Related Health Assessment. The Deployment-Related Health Assessment consists of DD 2796 Post-Deployment Health Assessment or DD 2900 Post Deployment Health Reassessment, as appropriate. References (b) and (c) contain official Physical Readiness Program supplemental policy guidance to reference (a) and are available at <https://www.mynavyhr.navy.mil/Support-Services/Culture-Resilience/Physical-Readiness/Guides/>. Navy Medical Department personnel are responsible for conducting PHAs and Deployment Health Assessments, per reference (d), and evaluating members with any action required in response to the PARFQ or pre-physical activity questions.
5. Responsibilities
 - a. Director, Clinical Operations, Policy, and Standards (BUMED-N10) must:

(1) Ensure a training program for the Physical Readiness Program Authorized Medical Department Representatives (AMDR) is in compliance with the requirements contained in reference (a) and (b) in order to ensure consistency of the process.

(2) Coordinate with Navy Physical Readiness Program Office, Office of the Chief of Naval Operations (OPNAV) N171A:

(a) To develop and execute a training program for all providers on proper procedures for body composition assessment and physical readiness test medical screening waivers.

(b) To perform an annual review of Physical Readiness Program guidance, in coordination with OPNAV N171A, to update the Physical Readiness Program AMDR training program, per any new policy changes.

(3) Ensure the Physical Readiness Program AMDR training is current and available at <https://www.mynavyhr.navy.mil/Support-Services/Culture-Resilience/Physical-Readiness/>.

b. Commanders, Naval Medical Forces Atlantic and Naval Medical Forces Pacific. Must ensure each Navy Medicine Readiness and Training Command (NAVMEDREADTRNCMD) or Navy Medicine Readiness and Training Unit (NAVMEDREADTRNUNIT) is in compliance with this instruction and maintains trained AMDRs, per subparagraph 5e(4).

c. Type Commander Surgeons. Must ensure each operational medical department is in compliance with this instruction and maintains trained AMDRs, per subparagraph 5e(4).

d. Commanders, Commanding Officers, and Officers in Charge, NAVMEDREADTRNCMDs and NAVMEDREADTRNUNITs must:

(1) Designate, in writing, physicians, adult or family nurse practitioners, physician assistants, or independent duty corpsmen as AMDRs to perform PFA medical screenings. Per reference (a) and (b), AMDRs may not also be appointed as a command fitness leader or assistant command fitness leader. To maximize patient privacy, ensure AMDRs are properly authorized to provide patient care and have access to the necessary resources (e.g., clinical exam space, access to electronic health record). The guidance in subparagraphs 5d(1)(a) and 5d(1)(b) applies:

(a) Commands with organic medical departments that include at least one healthcare provider and provides at least primary or readiness care for command personnel will appoint the AMDR by name.

(b) Commands without an organic medical department in which care is provided, will designate the NAVMEDREADTRNCMD with medical cognizance for their command to allow their AMDRs to make PFA medical waiver recommendations for their personnel, per reference

(e). In instances where the NAVMEDREATRUNITs are providing medical support to their assigned tenant commands, they will also serve as the appointed AMDR for those commands.

(2) Ensure designated providers are properly authorized to provide patient care and have completed AMDR training prior to appointment.

(3) Ensure PFA medical screenings (e.g., PHA, possible Post-Deployment Health Re-Assessment and PARFQ) are conducted, per references (b), (c), and (d).

(4) Ensure post-partum Sailors desiring to waive their post-partum exemption are medically screened and cleared prior to participation in the official PFA cycle, per references (a) and (c).

(5) Ensure there is an established process in place for Sailors who chose to delay pregnancy notification for up to 20 weeks gestation, per reference (f), and to adhere to guidance that exempts post-partum Sailors from participation in the official PFA, for up to 12 months.

(6) Assign responsibility of Medical Evaluation Boards (MEB) for members with multiple PFA medical waivers, adhering to the guidance in references (a), (b), and (g), Manual of the Medical Department, chapter 18.

(7) Ensure command deployability coordinators are granted the appropriate level of access to view MEB findings through the limited duty Sailor and Marine Readiness Tracker (also referred to as LIMDU SMART).

(8) Ensure members receive proper medical screening prior to participation in any military organized physical training, as outlined in reference (a).

e. AMDRs must:

(1) Be appointed in writing by their commander, commanding officers, or officers in charge.

(2) Familiarize themselves with references (a) through (c) and be held responsible for their content.

(3) Be the only authorized members of the medical staff who may recommend a PFA medical waiver by completing section 4 of NAVMED 6110/4 PFA Medical Clearance/Waiver.

(4) Complete the AMDR training prior to appointment, which is available online at <https://www.mynavyhr.navy.mil/Support-Services/Culture-Resilience/Physical-Readiness/>. It is required that AMDRs review this training prior to each PFA cycle and, at a minimum, every calendar year.

(5) Document PFA medical waivers on the NAVMED 6110/4 following guidance in reference (b), and, as appropriate, reference (c).

(6) Review and sign any NAVMED 6110/4 initiated by a non-AMDR treating provider, per reference (b).

(7) Ensure the NAVMED 6110/4 is scanned into the electronic health record upon completion of section 4 and prior to returning it to the Sailor.

(8) Coordinate with and assist command and unit command fitness leaders to refer all members with multiple waivers that meet criteria, per reference (a), for MEB review. For AMDRs with operational units, this may require a referral to an appropriate specialist at the nearest NAVMEDREADTRNCMD or NAVMEDREADTRNUNIT for an initial review and referral to an MEB.

f. MEB Convening Authority must:

(1) Perform a medical record review on all PFA waiver cases submitted to the MEB to determine appropriate disposition, including if a member should be found fit for full duty, placed on a period of limited duty, referred to the Disability Evaluation System, or recommended for administrative separation for a condition not amounting to a disability, per reference (g), Manual of the Medical Department, chapter 18.

(2) Provide MEB reports with medical recommendations based on guidance in references (a), (b), and (g), Manual of the Medical Department, chapter 18.

(3) Forward MEB reports to Career Progression, Navy Personnel Command (PERS-454), for disposition as stated in references (a) and (b).

6. 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-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 OPNAV Records Management Program (DNS-16).

7. 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 (1) 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.

8. Forms and Information Management Control

a. Forms

(1) NAVPERS 6110/3 PARFQ. NAVPERS Forms are available for download from the NAVMED Web site at:

https://www.mynavyhr.navy.mil/Portals/55/Reference/Forms/NAVPERS/NAVPERS_6110-3_rev_10-23.pdf?ver=q8wqbtTYZfrwaMJD3mMmFA%3d%3d

(2) NAVMED 6110/4 Physical Fitness Assessment Medical Clearance/Waiver is available at: <https://www.med.navy.mil/Directives/NAVMED-Forms/>

(3) DD 2796 Post-Deployment Health Assessment is available at: https://www.esd.whs.mil/Directives/forms/dd2500_2999/

(4) DD 2900 Post Deployment Health Re-Assessment is available at: https://www.esd.whs.mil/Directives/forms/dd2500_2999/

(5) Electronic Health Assessment (EHA) Website is available at: <https://eha.health.mil/EHA/>

b. Information Management Control. Reports required in subparagraphs 5f(2) and 5f(3) of this instruction are exempt from reports control per Secretary of the Navy Manual 5214.1 of December 2005, part IV, subparagraph 7k.



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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/>