



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

IN REPLY REFER TO
BUMEDINST 6320.80A CH-1
BUMED-M3
10 Mar 2020

BUMED INSTRUCTION 6320.80A CHANGE TRANSMITTAL 1

From: Chief, Bureau of Medicine and Surgery

Subj: EMERGENCY MEDICINE CARE GUIDELINES

Encl: (1) Revised page 7

1. Purpose. To issue change and direct outside the continental United States commands to train general duty hospital corpsmen E-5 and below.

2. Action. Remove page 7 of the basic instruction and replace with page 1 enclosure (1) of this change transmittal.

3. Records Management

a. Records created as a result of this change transmittal, 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 change transmittal 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.


G. D. SHAFFER
Acting

Releasability and distribution:

This change transmittal is cleared for public release and is available electronically only via the Navy Medicine Web site at,

<http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx>

(b) The RN responsible for the direct supervision of emergency nursing care for the ED must meet at least one of the following criteria: (1) have a master's degree in either emergency trauma nursing or critical care nursing; (2) be a certified emergency nurse or; (3) have a minimum of 2 years of emergency nursing experience and possess a nursing subspecialty code of 1945S.

(c) It is strongly recommended that RNs assigned to the ED obtain moderate sedation certification within 6 months of their initial assignment.

(d) It is recommended that civilian or contract nurses employed as ED nurses must meet the same training requirements as active duty ED nurses, as allowable by current contract.

(6) Hospital Corpsmen and Nursing Support Staff

(a) It is recommended that all hospital corpsmen have 1 year of patient care experience elsewhere in a hospital prior to assignment in the ED. This experience will have ideally been obtained in an intensive care unit, critical care, or inpatient setting. In addition, it is strongly recommended that hospital corpsmen successfully complete one or all of the identified courses: Pre-hospital Trauma Life Support, Advanced Trauma Life Support (ATLS), Tactical Combat Casual Care (TCCC), and Advanced Cardiac Life Support (ACLS).

(b) Overseas Continental United States (OCONUS) commands are responsible to train general duty hospital corpsmen, E-5 or below, identified to work in the ED. Those commands that do not have an approved EMT-Basic program must establish a plan for the training to be completed.

(c) Civilian or contract ED nursing support personnel (licensed practical nurses, nurse technicians, and medical assistants) must meet the minimum equivalent training requirements for active duty hospital corpsmen.

(7) Consultants. Specialty consultants are staff physicians or senior residents who must respond within 30 minutes if in-house and 60 minutes if taking "home call," unless superseded by a specific MTF policy. Physician clinical specialty services must provide and maintain an accurate up-to-date duty roster of specialty consultants, specified by name, and posted in the ED or available electronically. An MTF with residency programs will post the on-call residents, plus the credentialed staff consultants. Specialty consultants must be available and report to the ED when requested by the medical officer on duty. A method of communication that is simple, rapid, and efficient must be maintained by the specialty consultants at all times to ensure expeditious access by the ED providers and staff.

9. Triage and Transfer Protocols

a. Any person presenting for evaluation to an MTF ED must receive a triage evaluation on arrival and subsequent medical screening examination to determine if an emergency medical