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

BUMEDINST 6710.72
BUMED-N4
20 Aug 2026

BUMED INSTRUCTION 6710.72

From: Chief, Bureau of Medicine and Surgery

Subj: MANAGEMENT OF CONTROLLED SUBSTANCES FOR EXPEDITIONARY MEDICINE UNITS

Ref: (a) NAVMED P-117
(b) NAVSUPINST 6710.1D
(c) BUMEDINST 3000.1
(d) BUMEDINST 6710.70A
(e) BUMEDINST 1300.8

Encl: (1) Department of Defense Activity Address Code Management

1. Purpose. To integrate, organize, and manage the lifecycle of controlled substances supporting the expeditionary medicine (EXMED) family of systems (FoS) units.

2. Scope and Applicability

a. This instruction applies to all Budget Submitting Office (BSO) 18 activities, EXMED FoS units, and any non-BSO-18 personnel responsible for the transportation, management, and destruction of EXMED FoS controlled substances.

b. Personnel assigned lifecycle management responsibilities for EXMED FoS controlled substances, to include ordering, receipt, custody, accounting, reporting, transportation, inventory, and disposition are required to comply with the provisions of this instruction.

3. Definitions

a. Authorized Medical Allowance List (AMAL) and Authorized Dental Allowance List (ADAL). Consolidated list containing the minimum requirements of materiel to establish a specific health service support capability during combat and deployed operations.

b. Controlled Substances. Any narcotic, depressant, stimulant, hallucinogenic drug, or any other drug or substance listed in the Controlled Substance Act (section 812 of Title 21 U.S Code) or controlled under the comprehensive Drug Abuse Prevention and Control Act of 1970 (Public Law 91-513).

c. Responsible Officer (RO). An individual appointed by proper authority to exercise custody, care, and safekeeping of property entrusted to that individual's possession or under his or her supervision; may include financial liability for losses occurring because of failure to exercise this obligation. The RO may also perform the duties of the controlled substance custodian when meeting qualifying criteria.

d. Controlled Substance Custodian. A commissioned pharmacy officer, civilian pharmacist, or commissioned officer appointed in writing by the commanding officer (CO) to maintain direct physical control and handling of controlled substances; responsible for day-to-day management of controlled substance inventory and security.

4. Background

a. Command and control of EXMED personnel and equipment sets are vital to Navy Medicine's ability to conduct force development, generation, and sustainment of ready Naval Medical Forces in support of operational requirements. Managing controlled substances oversight as a critical and complex component within Class VIII materiel being a key part of these efforts.

b. Per reference (a), Manual of the Medical Department, chapter 21, ordering, receipt, custody, and issuance of controlled substances must follow Navy audit and chain of custody business practices and regulations. This policy aims to clarify processes, ownership, custody transfer, and other responsibilities related to the management of controlled substances.

5. Policy

a. The Medical Assemblage Metadata Suite is the authoritative system for EXMED FoS AMALs and ADALs. The AMALs and ADALs identify the required quantities for all controlled substances for EXMEDS. EXMED units will only order controlled substances contained within the associated AMAL or ADAL without prior authorization from Naval Medical Forces Atlantic (NAVMEDFORLANT). In addition, the EXMED unit will not order controlled substances above the prescribed amount in the associated AMAL or ADAL without prior authorization from NAVMEDFORLANT.

b. All EXMED equipment set unit identification codes (UICs) must have a corresponding Department of Defense Activity Address Code (DoDAAC) in order to conduct controlled substance procurement actions. The process to assign a DoDAAC to each BSO-18 EXMED unit is outlined in enclosure (1).

c. EXMED units will have an authorization letter on file with NAVMEDFORLANT and Naval Medical Readiness Logistics Command (NAVMEDREDLOGCOM) that authorizes the procurement of controlled substances, per reference (b). NAVMEDFORLANT will ensure generation of the authorization letter when the EXMED unit begins the basic phase of the optimized Fleet response plan, per reference (c). The controlled substance authorization letter

will be forwarded to NAVMEDREDLOGCOM and remain on file through the sustainment phase unless otherwise revoked. In case of revocation, Director, Logistics, Supply, and Support (BUMED-N4) and NAVMEDFORLANT must be notified.

d. Each EXMED unit must have a controlled substance custodian, appointed in writing by the CO of the EXMED's personnel UIC, to assume direct responsibility and full-time chain of custody for controlled substances included in the AMAL and ADAL of the assigned equipment set. The controlled substance custodian must be a commissioned officer who is not in a billeted medical provider role.

(1) The controlled substance custodian identified on the AMAL or ADAL request must receive the controlled substances from NAVMEDREDLOGCOM. If the controlled substance custodian is separated from the assets under his or her control for any reason, a new controlled substance custodian is to be appointed, and a complete turnover will be conducted. A formal chain of custody will be maintained by the controlled substance custodian.

(2) When the AMAL and ADAL are in a forward-positioned status, the CO, NAVMEDREDLOGCOM will appoint the RO and the controlled substance custodian.

(3) When the AMAL and ADAL are in an employed status, the CO of the EXMED personnel utilizing the set will appoint the RO and the controlled substance custodian.

e. All EXMED units with controlled substances must maintain control and account for controlled substances, per reference (a).

(1) Per reference (d), all units and detachments in receipt of controlled substances must ensure oversight via the Controlled Substances Inventory Board (CSIB) process. Duties and responsibilities of the CSIB will be carried out per references (a) and (d).

(2) An EXMED unit with sufficient manpower resources (e.g. expeditionary medical facility, expeditionary medical unit) will leverage assigned personnel to comprise a CSIB, as appointed by the EXMED unit CO.

(3) An EXMED unit without the minimum number of eligible potential CSIB members (e.g. Expeditionary Resuscitative Surgical System, En-Route Care System) will leverage host unit personnel to comprise a CSIB, as appointed by the host unit CO.

(4) Permission to conduct destruction of controlled substances will be requested by the controlled substance custodian when substances expire or become compromised and will be carried out and documented per procedures in reference (d). Expired substances should only be held by the EXMED unit when the replacement substance has been ordered but not yet received.

f. Chemical, Biological, Radiological, and Explosive Defense Materials. Chemical, biological, radiological and explosive supplies categorized as controlled substances that are issued to an EXMED unit will be managed and accounted for within the guidance provided by this instruction.

g. The issuing and receiving organizations will ensure that a limited technical inspection of controlled substances is performed by their respective controlled substance custodians upon transfer of custody, per reference (e).

6. Roles and Responsibilities

a. Director, Manpower and Personnel (BUMED-N1) will:

(1) Support the review process for requests to establish, modify, or disestablish DoDAACs from subordinate activities using the UIC Management System (UMS).

(2) Provide notification of newly established EXMED equipment set UICs to BUMED-N4 and Director, Resource Management (BUMED-N8) to enable coordination of DoDAAC establishment via echelon 3 commands.

b. BUMED-N4 will designate a DoDAAC manager. The BUMED-N4 DoDAAC manager will:

(1) Review all DoDAAC requests from subordinate command DoDAAC managers for accuracy and tracking.

(2) Ensure all DoDAAC actions are initiated in UMS.

(3) Sign and submit all requests establishing new DoDAACs supporting EXMED equipment sets upon receipt of BUMED-N1 UIC creation documentation.

(4) Ensure proper assignment of requisitioning, shipment, and billing authority codes for newly established DoDAACs.

(5) Support the annual review and validation of assigned DoDAACs coordinated by the Naval Supply Systems Command (NAVSUP) Central Service Point (CSP).

(6) Issue procedures to control DoDAAC submission processes.

c. BUMED-N8 will:

(1) Appoint DoDAAC monitors and alternates within BSO-18 to approve or disapprove requests to establish, modify, or disestablish DoDAACs from subordinate activities using UMS.

(2) Provide the appointment letter with the DoDAAC monitor's contact information to the NAVSUP CSP.

(3) Assign the proper requisitioning, shipment, and billing authority codes for newly established DoDAACs.

(4) Submit approved DoDAAC requests to the NAVSUP CSP.

(5) For DoDAACs that are associated with financial execution, establish master data within the accounting system of record to align DoDAACs to facilitate cost tracking.

(6) Issue internal procedures to control DoDAAC request approval or disapproval processes.

(7) Contact the NAVSUP CSP with DoDAAC questions and issues.

d. Secondary and Specialty Care (BUMED-N10C2) will provide subject matter expertise and policy guidance for controlled substance practices in an operational setting and for controlled substances as it is related to EXMED AMALs and ADALs.

e. Commander, NAVMEDFORLANT will:

(1) Review and validate all DoDAAC requests from NAVMEDREDLOGCOM and forward to Logistics and Sustainment Policy and Programs (BUMED-N42) for appropriate action.

(2) Ensure all DoDAAC information related to EXMED equipment sets is accurate and complete.

(3) Generate all EXMED DoDAAC controlled substance authorization requests and forward to the Navy Controlled Substances Program Manager.

f. CO, NAVMEDREDLOGCOM will:

(1) In coordination with NAVSUP, provide oversight and management of controlled substances requisitioning, per reference (b).

(2) Appoint in writing Navy's Controlled Substances Program Manager to manage requests for additions, deletions or changes to authorized activity lists.

(3) Ensure the submission of signed DoDAAC requests to NAVMEDFORLANT utilizing NAVSUP 4400/2 Request for Navy DoDAAC or RIC.

(4) Maintain BSO-18's consolidated DoDAAC list of authorized Navy activities approved by the Defense Logistics Agency's (DLA) Troop Support Medical for requisitioning of controlled substances.

(5) Forward requests to DLA Troop Support Medical for additions, deletions or changes to the controlled substance authorized activities list. Requests must be accompanied by a letter signed by a military officer with a paygrade of O-6 or civilian equivalent (GS-15).

(6) Annually review and validate the DoDAAC authorized activities list for controlled substances. Notify DLA of necessary changes to the authorized activities list as well as any changes of the Navy Controlled Substances Program Manager.

(7) Monthly, upon receipt of the controlled substance report provided by DLA Troop Support Directorate of Medical Material representative via e-mail or file transfer protocol server, prepare surveillance reports for use by the requisitioning unit's CSIB.

(8) Requisition, maintain, and account for authorized AMAL and ADAL controlled substance allowances while in sustainment or forward positioned status, via the controlled substance custodian. Ensure compliance with periodic inventory reporting requirements as defined in reference (d).

7. 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 found on the Directives and Records Management Division portal page at https://www.secnav.navy.mil/doni/Records%20Management%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 Office of the Chief of Naval Operations (OPNAV) Records Management Program (DNS-16).

8. Review and Effective Date. Per OPNAVINST 5215.17A, BUMED-N4 will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of War, 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.

9. Information Management Control. Reports required in paragraph 6 of this instruction are exempt from reports control per Secretary of the Navy manual 5214.1 of December 2005, part IV, subparagraph 7k.

M. CASE
Acting

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web Site at: https://www.med.navy.mil/directives/

# DEPARTMENT OF DEFENSE ACTIVITY ADDRESS CODE MANAGEMENT

1. The Surgeon General of the Navy, who also performs the duties of Chief, Bureau of Medicine and Surgery will designate a DoDAAC monitor to oversee BSO-18 DoDAAC operations, per NAVSUPINST 4400.108A, which is located on a restricted, common access card enabled Web site available at: https://mynavsup.nag.navy.mil/apps/ops$nll.SEARCHLIBRARY?p_keyword=NAVSUPINST+4400.108A.

2. All BSO-18 EXMED equipment set UICs will have a corresponding DoDAAC in the NAVSUP UMS and the DLA DoDAAD. All DoDAAC information will be updated to ensure the required points of contact information are posted and maintained in both tables.

3. To support execution of DoDAAC operations and ensure all BSO-18 EXMED UICs have corresponding DoDAACs, echelon 3 commands will assign DoDAAC managers. DoDAAC managers will be responsible for the management of DoDAACs in NAVSUP's UMS and DLA's DoDAAD for all UICs within their area of responsibility.

4. Type of Address Code (TAC) 1 for EXMED sets while not employed will reflect NAVMEDREDLOGCOM. Once employed, TAC 1 will be updated as necessary to support mission requirements.

5. TAC 2 for EXMED sets while not employed will reflect NAVMEDREDLOGCOM or the set's designated prepositioned site, as applicable. Once employed, TAC 2 will be updated as necessary to support mission requirements.

6. TAC 3 identifies the billing address of the command or activity responsible for payment of bills. If no TAC 3 address is entered, the TAC 1 address should be used. For Defense Finance and Accounting Services and Enterprise Resource Planning billing addresses, a 6-position accounting and disbursing station number is also required.

7. Update DoDAAC information at least 30 days before the equipment set is repositioned and 14 days after returning from deployment to ensure the requisition and distribution of materials for the commands within their area of responsibility.

8. DoDAAC managers will implement a risk management framework, to include quarterly internal reviews of DoDAACs within their area of responsibility, to identify and mitigate risks associated with DoDAAC mismanagement.