

Change 172
Manual of the Medical Department
U.S. Navy
NAVMED P-117

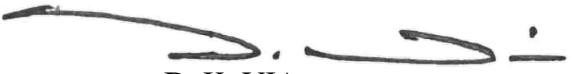
21 Jan 2026

To: Holders of the Manual of the Medical Department

1. **This Change** completely revise Chapter 9, Hospital Corps.
2. **Summary of Changes.** This change represents the first update of Chapter 9 of the Manual of the Medical Department in 24 years. Several articles have been revised to clarify language or maintain consistency with other governing instructions. Many significant changes have been introduced in other articles and these changes are summarized in subparagraphs 2a through 2j:
 - a. Section I, article 9-1 added Acts of 55th Congress versus 51st Congress for correct reference.
 - b. Section I, article 9-2 added Enlisted Programs Authorizations versus outdated U.S.C.
 - c. Section I, article 9-4 added name change correction of NAVPERS 18068F.
 - d. Section II, article 9-5 NAVEDTRA 10500 was removed as this is an outdated reference.
 - e. Section II, article 9-7 Enlisted Transfer Manual NAVPER 15909 was removed as this is an outdated reference.
 - f. Section II, article 9-8 added specific chapter and article to the Geneva Convention for clarity.
 - g. Section II, article 9-11 added name change correction of NAVPERS 18068F.
 - h. Section II, article 9-12 added name change correction of NAVPERS 18068F.
 - i. Section III, article 9-14 added Hospital Corpsman Navy Enlisted Classification codes for Emergency Medical Technician Basic and Emergency Medical Technician Paramedic.
 - j. Section IV, updated references for clarity, removing NAVPERS 1306/7; NAVEDTRA 10500; 10 U.S.C 5412, chapter 463 section 1, 30 Statute, 474; and NAVPERS 15909 (Enlisted Transfer Manual). Additionally changed the names for NAVPERS 18068F and Acts of 55th Congress, session II, chapter 463, section 1, page 474 with the correct nomenclature.

3. **Action**

- a. Remove Chapter 9 and replace with new Chapter 9.
- b. Record this Change 172 in the Record of Page Changes.



D. K. VIA
Chief, Bureau of Medicine and Surgery

Chapter 9

Hospital Corps

Responsible Office	Hospital Corps (BUMED-N01C5)	Phone:	COM DSN	(703) 681-8943 (312) 761-8943
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See list of references used in this chapter in article 9-15, page 9 through11.

Chapter 9

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Section I

Structure of the Hospital Corps

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9-1

Establishment

(1) The Hospital Corps was established within the Medical Department of the Navy under the provisions of an act of Congress approved 17 June 1898 (Acts of the 55th Congress, session II, chapter 463, section 1, page 474).

9-2

Strength

(1) The strength of the Hospital Corps is determined by the Chief of Naval Personnel within personnel allocations from Enlisted Program Authorizations.

9-3

Rate and Rating Structure

(1) A rate identifies personnel occupationally by pay grade. Within a rating, a rate reflects the levels of aptitudes, training, experience, knowledge, skill, and responsibility. For example, the rating hospital corpsman (HM) comprises training and experience in the care of the sick and injured. The rating of hospital corpsman is comprised of rates as follows:

Rate	Rate Abbreviation	Pay Grade
Hospital Recruit	HR	E-1
Hospital Apprentice	HA	E-2
Hospitalman	HN	E-3

Rate	Rate Abbreviation	Pay Grade
Hospital Corpsman, Third Class	HM3	E-4
Hospital Corpsman, Second Class	HM2	E-5
Hospital Corpsman, First Class	HM1	E-6
Chief Hospital Corpsman	HMC	E-7
Senior Chief Hospital Corpsman	HMCS	E-8
Master Chief Hospital Corpsman	HMCM	E-9

9-4**Navy Enlisted Classification (NEC) Structure**

(1) NAVPERS 18068F, Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume II, Chapter 4 contains the NEC coding structure and is the primary tool for the NEC coding of manpower authorization and personnel.

(2) The Chief of Naval Personnel is responsible for formulating and implementing the NEC coding system, controlling the use of NECs in identifying personnel and billets, and in the distribution and detailing of personnel. The Bureau of Naval Personnel (BUPERS) delegates certain related authorities and responsibilities to the Bureau of Medicine and Surgery (BUMED) for the assignment of NEC codes in the HM rating.

(3) An individual's NEC must be reviewed and verified to ensure accuracy and currency upon detachment, receipt, annual service record verification, separation, discharge, reenlistment, transfer to the Fleet Reserve, or retirement.

(4) Rate and NEC requirements for each command are authorized by the Chief of Naval Operations and published in the activity manpower documents. Commanding officers should request modifications of manpower authorization when changes in workload or mission of the activity dictates modification of their NEC job requirements. Quantitative training requirements for technicians are determined from the NEC written into the manpower authorization. Therefore, careful monitoring of the document is mandatory if these requirements are to be met.

Section II

Hospital Corps Personnel

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9-5

Qualifications

(1) Applicants for the Hospital Corps rating must meet all requirements of the Center for Personal Development, Catalog of Naval Training Courses (CANTRAC) Hospital Corpsman Basic course, B-300-0010. The catalog can be found at this Web site which requires registration: <https://app.prod.cetars.training.navy.mil/cantrac/vol2.html>.

9-6

Procurement

(1) Hospital Corps candidates are recruited through several avenues. Individuals may directly enlist as hospitalman recruits or be selected during recruit training via the Personalized Recruiting for Immediate and Delayed Enlistment program's interviews. Additionally, the enlisted Professional Career Apprenticeship Track, who are in pay grades E-1 through E-3 and have relevant training or skills, can request a transfer to the Hospital Corps through their Career Development Board. For Professional Career Apprenticeship Track wishing to apply for Class

“A” Hospital Corps school, the CANTRAC provides guidelines, and the enlisted community manager offers assistance. This multi-faceted approach allows for a diverse range of individuals with different backgrounds and experiences to join the Hospital Corps. Additional information and guidance can be found at the provided link: CANTRAC Volume 2 (<https://app.prod.cetars.training.navy.mil/cantrac/vol2.html>).

9-7**Distribution and Detail**

(1) Hospital Corps personnel may be assigned to any unit of activity of the naval establishment where their services are required. They must be assigned to the medical department of the ship or station to which they are attached. Duties performed by Hospital Corps personnel will follow the limitations set forth in the 1990 Navy Regulation (NAVREG), chapter 10, article 1063.

(2) Hospital Corps personnel holding an NEC code should be assigned to an activity having a requirement written into activity manpower documents for the NEC at the pay grade held by the Hospital Corps personnel so assigned.

9-8**Duties of Hospital Corps Personnel**

(1) The general duties of Hospital Corps personnel are prescribed by the Surgeon General of the Navy, who also performs the duties of Chief, BUMED, as set forth in this manual and BUMED directives. Duties on any specific ship or station are prescribed by the commanding officer, the senior medical officer, or other competent authority. Hospital Corps personnel must be assigned only such duties as allowed by the Geneva Convention of 1949, chapter 4, article 24, and NAVREG chapter 8, article 0854; chapter 10, article 1063; and chapter 10, article 1064. At times adherence to the provisions may be burdensome, but the parties to the Geneva Convention determined the protection of medical personnel was important enough to justify such a burden. NAVREG chapter 8, article 0854 is amplification with greater specificity of a consistent Navy policy that has been followed since the entry into force of the Geneva Convention of 1949, chapter 4, article 24. In time of war, all duties of hospital corpsmen must be concerned with care of the sick and injured, the prevention of disease or injury, or the administration of medical departments, divisions, or commands. These duties must be performed under the supervision of medical officers, except for hospital corpsmen serving on independent duty.

(2) Specific duty assignments should be rotated to provide diversified training and job experience. This rotation should be planned on an individual basis considering the degree of individual adaptability, as well as job and training requirements. A careful balance must be maintained between the advantages of increased job efficiency resulting from permanency of personnel and the training advantages derived from rotation.

9-9**Duties Hospital Corps Rates**

(1) When not operating under the skillset of a NEC, hospital corpsmen should follow levels of responsibility as described in articles 9-9(2) through 9-9(11). Hospital corpsman in paygrades E1 through E3 are designated as hospital recruit, hospital apprentice, and hospitalman; unlike other rates such as logistic specialists. Logistic specialists Sailors in paygrade E1 through E3 are identified as logistic specialists seaman recruit, seaman apprentice, and seaman.

(2) Hospital recruits are new enlistees in the Hospital Corps. Upon completion of basic recruit training and Hospital Corpsman "A" School, Sailors are assigned to their first duty station typically at a military treatment facility or with the Fleet Marine Force.

(3) Hospital apprentice, after graduation from Hospital Corps school, preferably must be assigned duties directly relating to patient care. When feasible, a hospital apprentice should be assigned to on-the-job training (OJT) in those areas that involve elementary nursing and clinical procedures.

(4) Hospitalman should be assigned in the same manner as a hospital apprentice, to include OJT in direct patient care involving advanced procedures or assigned to duty and OJT in elementary nursing and clinical procedures.

(5) Hospital corpsman third class is normally assigned to duties involving direct patient care and to clinical services or OJT in the more advanced clinical procedures.

(6) Hospital corpsman second class may be assigned duty as a senior ward corpsman providing direct patient care support or in an administrative support function.

(7) Additional Duties. Duties for a hospital apprentice, hospitalman, hospital corpsman third class, and hospital corpsman second class may also include service with the operating forces. When and where possible, personnel must be given the opportunity to work in direct patient care.

(8) Hospital corpsman first class may be assigned supervisory duty on wards, as assistant to the chief of a clinical service or in a role of administrative support.

(9) Chief hospital corpsman may be assigned supervisory duties as senior assistant to the chief of a clinical service and other duties including those previously stated in article 9-9(7).

(10) Senior chief hospital corpsman serves as supervisory and middle management personnel with primary concern directed toward the HM rating in general or a specialty area in which he or she has expertise based on formal training and experience. Additionally, they may fill administrative billets within and outside their field of expertise.

(11) Master chief hospital corpsman serves in an advisor or administrator billet within the HM rating. When necessary, they may augment the officer corps in billets as overall supervisors and administrators of personnel and equipment within their organization. Although assigned a NEC, they may be assigned to medical administrative billets when required by the needs of the service.

9-10

Utilization

(1) The maximum number of Hospital Corps personnel possible must be assigned to duties involving direct patient care and clinical services, or in paramedical assignments dictated by their NEC unless otherwise prohibited by statute or regulation. (See article 9-8(1).)

(2) Consistent with mission requirements, watches should be equitable for Hospital Corps personnel, by pay grade, with progressively fewer watches being assigned as they advance in rate.

(3) Commands should consider rotating Hospital Corps personnel throughout the various patient care areas, clinics, emergency rooms, and recovery areas to assure wide exposure to the various techniques in the care and treatment of the sick and injured.

(4) Hospital Corps personnel who cannot perform effectively in the patient care environment should be recommended for administrative discharge or change in rating as appropriate, rather than arbitrarily reassigning them to non-patient care functions.

(5) Hospital Corps personnel should not be considered eligible for reassignment from a patient care environment solely because they have completed a certain length of time in that environment or have advanced in rate.

(6) Hospital Corps personnel holding an NEC code and assigned to an activity to fill an allowance for that classification will be used in that specialty or their NEC should be removed.

9-11**Training**

(1) The Surgeon General of the Navy is responsible for all training of the Hospital Corps except general military training which is under the cognizance of Naval Education and Training Command. Training consists of the Class "A" Basic Hospital Corps school and formal training programs for medical technicians taught in the Class "C" schools. Training quotas are established annually and reviewed quarterly to ensure billet revisions authorized by Chief of Naval Operations are properly reflected in the training plan.

(2) Class "A" Basic Hospital Corps schools mission is to instruct and train enlisted personnel in the basic subjects and procedures required to qualify them for duties as general service Hospital Corps personnel. The curriculum emphasizes direct patient care and is designed to prepare the student to perform the general duties normally required of Hospital Corps personnel during their first enlistment in the naval service. This school, together with the subsequent in-service training they will receive, is designed to prepare all Hospital Corps personnel for advancement in rate through hospital corpsman third class. Class "A" Hospital Corps school is mandatory for all personnel entering the Hospital Corps or first reporting to active duty in the HM rating if comparable training has not previously been completed. Upon completion of this course of instruction, appropriate entries will be made in the service record and a training certificate issued.

(3) Formal in-Service training, Class "C" schools. Formal training courses for Hospital Corps personnel are listed in the CANTRAC, which provides data on the purpose, scope, prerequisites, location, and convening dates of the courses. Requests for training should be submitted to BUPERS in accordance with CANTRAC guidance. Personnel earning an NEC as a result of formal training will be assigned in the Manpower Personnel and Training Information System (MAPTIS) or by BUMED if indicated per NAVPERS 18068F, Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume II, chapter 4. If selected for Class "C" training, candidates are ordered to duty under instruction at the time of sea or shore rotation to the extent feasible. Upon successful completion of technical training a certificate of special instruction will be issued and appropriate entries made in the electronic service record.

9-12**Advancement in Rate**

(1) The objective of the enlisted advancement system is to furnish the qualified petty officers the Navy requires to man its ships and stations. This system provides the opportunity for orderly advancements of qualified enlisted personnel to higher levels of responsibility throughout their naval careers.

(2) BUPERSINST 1430.16G provides for the administration of the advancement in rate system. To further supplement the advancement policies and procedures, BUPERS notices are issued semiannually.

(3) Examinations are prepared by Naval Education and Training Command, based on the qualifications outlined for each rate in the NAVPERS 18068F, Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume I, chapter 40 and 41. The Bibliography for Advancement Study lists the training courses and study guides applicable to each rating in the Navy. The Bibliography for Advancement Study serves as a working list of materials for personnel to study in preparing for advancement and the source document for questions used in the Navy-wide advancement examinations.

(4) To be eligible for advancement in rate, Hospital Corps personnel must fulfill service requirements, both time in service and time in pay grade, complete the required Professional Military Knowledge Eligibility Exam, meet performance mark requirements, and be recommended by their commanding officer.

(5) Hospital Corps personnel with technical NECs take the same examinations as their contemporaries who are not technicians. For this reason, and because technicians may be called upon at any time to perform the general duties of their rate, technicians must maintain professional competence in the general duties of the Hospital Corps as published in NAVPERS 18068F, Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume I, chapter 40 and 41.

9-13

Path of Advancement of Officer Status

(1) Hospital Corps personnel may apply for commissions in the programs listed provided they meet all eligibility requirements per OPNAVINST 1420.1B.

- (a) Officer Candidate School Program
- (b) U.S. Naval Academy
- (c) Medical Enlisted Commissioning Program
- (d) Medical Service Corps In-Service Procurement Program
- (e) Seaman to Admiral-21 Program

Section III

Composition of the Hospital Corps

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9-14 Composition of the Hospital Corps

(1) The Hospital Corps is comprised of 40 unique NECs, each offering skills vital to the to the wellbeing of patients, home and abroad.

(2) Some NECs are secondary to a previously earned NEC (e.g. L15A - Ultrasound Technologists and L17A - Advanced X-Ray Technician). For specific NEC information please review Volume II of the Navy Enlisted Occupational Classification Standards at: <https://www.mynavyhr.navy.mil/References/NEOCS-Manual/NEOCS-Vol-II/>.

L00A - Search and Rescue Medical Technician
L01A - Submarine Force Independent Duty Corpsman
L02A - Fleet Marine Force Reconnaissance Independent Duty Corpsman
L03A - Field Medical Service Technician
L04A - Aerospace Medical Technician
L05A - Radiation Health Technician
L06A - Cardiovascular Technician
L07A - Aerospace Physiology Technician
L08A - Bio-Medical Equipment Technician
L09A - Nuclear Medicine Technologist
L10A - Surface Force Independent Duty Corpsman
L11A - Fleet Marine Force Reconnaissance Corpsman
L12A - Preventive Medicine Technician
L13A - Hemodialysis Technician
L14A - Ophthalmic Surgical Technician
L15A - Ultrasound Technologist
L16A - Mammography Technologist
L17A - Advanced X-Ray Technician
L18A - Electroneurodiagnostic Technologist
L19A - Optician
L20A - Physical Therapy Technician

L21A - Occupational Therapy Assistant
L22A - Pharmacy Technician
L23A - Surgical Technologist
L24A - Behavioral Health Technician
L25A - Urology Technician
L26A - Orthopedic Technician
L27A - Medical Deep Sea Diving Technician
L28A - Deep Sea Diving Independent Duty Corpsman
L29A - Mortician
L30A - Histopathology Technician
L31A - Medical Laboratory Technician
L32A - Respiratory Therapist
L33A - Dental Assistant
L35A - Dental Hygienist
L36A - Dental Laboratory Technician, Basic
L37A - Dental Laboratory Technician, Advanced
L38A - Dental Laboratory Technician, Maxillofacial
L50A - Emergency Medical Technician
L50B - Emergency Medical Technician (Paramedic)

Section IV References

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REFERENCES USED IN THIS CHAPTER

OPNAVINST 1420.1B	Enlisted to Officer Commissioning Programs Application Administrative Manual – available at https://www.secnav.navy.mil/doni/opnav.aspx
BUPERSINST 1430.16G	Advancement Manual for Enlisted Personnel of the U.S. Navy and U.S. Navy Reserve – available at https://www.mynavyhr.navy.mil/References/BUPERS-Instructions/
NAVPERS 18068F	Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume I – available at https://www.mynavyhr.navy.mil/References/NEOCS-Manual/NEOCS-Vol-I/
NAVPERS 18068F	Manual of Navy Enlisted Manpower and Personnel Classifications and Occupational Standards, Volume II – available at https://www.mynavyhr.navy.mil/References/NEOCS-Manual/NEOCS-Vol-II/

All NAVREGS listed are available at

<https://www.secnav.navy.mil/doni/US%20Navy%20Regulations/Forms/doniNavyRegs.aspx>

NAVREG Chapter 8, article 0854	Hospital Ship or Medical Aircraft
NAVREG Chapter 10, article 1063	Detail of Persons Performing Medical or Religious Services
NAVREG Chapter 10 article 1064	Detail of Enlisted Persons for Certain Duties

Miscellaneous References

Acts of 55th Congress, session II, chapter 463, section 1, page 474 is available at
<https://www.loc.gov/item/llsl-v30/>

CANTRAC, Hospital Corpsman Basic course, B-300-0010 is available at
<https://app.prod.cetars.training.navy.mil/cantrac/vol2.html>

The Geneva Conventions of 12 August 1949 is available at
<https://www.icrc.org/sites/default/files/external/doc/en/assets/files/publications/icrc-002-0173.pdf>