



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

Canc: Aug 2026

BUMEDNOTE 1300

BUMED-N10

27 Aug 2025

BUMED NOTICE 1300

From: Chief, Bureau of Medicine and Surgery

Subj: UPDATES TO THE OVERSEAS AND REMOTE DUTY ASSIGNMENT
SUITABILITY SCREENING PROCESS

Ref: (a) BUMEDINST 1300.2B
(b) OPNAVINST 1300.14E
(c) NAVPERS 15560D
(d) BUMEDINST 6320.104
(e) MCO 1300.8
(f) DoD Instruction 6000.20 of 1 October 2024
(g) DoD Instruction 1315.18 of 28 October 2015
(h) DoD Instruction 6200.06 of 8 September 2016
(i) CMC WASHINGTON DC 182005Z Dec 19 (MARADMIN 702/19)

Encl: (1) Timelines and Responsibilities for Suitability Screening, Inquiries, and
Reconsiderations
(2) Service Member Risk Assessment Memorandum Template

1. Purpose. Pending the revision of reference (a), this notice provides updates to the five specific aspects of the suitability screening process listed in subparagraphs 1a through 1e and will supersede existing guidance:

a. Provides updated guidance, per reference (b) and the Department of State (DOS), in adjudicating suitability screenings for personnel assigned to a billet outside of the continental United States (OCONUS) in direct support of chief of mission (COM) authority.

b. Outlines the process by which a gaining commanding officer (CO) may conduct a risk assessment for a Service member recommended as medically or dentally unsuitable, with the assistance of the reviewing medical department which has medical cognizance to support their unit, to aid their final overall suitability determination, per reference (b).

c. Provides details for processes by which a Service member may request reconsideration of an unsuitable finding by the gaining Navy Medicine Readiness and Training Command (NAVMEDREADTRNCMD) on behalf of their dependents.

d. Provides expected timelines associated with the medical, dental, and educational screening process to enhance transparency to the process, which must account for coordination with outside agencies and their respective procedures.

e. Provides updated guidance on the process and initial signature authority for a finding of medically unsuitable solely for an immunization status that does not comply with current recommendations, and process and timeline for reconsideration requests.

2. Scope and Applicability

a. Medical and Dental Suitability Reconsideration Process. Of note, educational reconsiderations are not conducted. Educational suitability recommendations are the sole responsibility of the Department of Defense Education Activity (DoDEA) Headquarters. If there is new information to be considered, an appeal may be submitted and will follow processes as directed by DoDEA Headquarters. The reconsideration process mentioned herein is applicable to medically or dentally unsuitable Department of the Navy (DON) family members planning to accompany their sponsor to:

(1) A remote location as identified in reference (c), Naval Military Personnel Manual (MILPERSMAN), Article 1300-302.

(2) An OCONUS location serviced by a military treatment facility (MTF), which is also designated as a NAVMEDREADTRNCMD or subordinate unit or clinic.

b. Medical and Dental Suitability Risk Assessment. For U.S. Navy Service members going to an operational command the risk assessment process mentioned herein does not apply. The procedures as outlined in reference (c), MILPERSMAN, Article 1300-800, under the direction of Commander, Navy Personnel Command (COMNAVPERSCOM), and Deployability Assessment and Assignment Branch (PERS-454), will be followed. For the purposes of this guidance, the risk assessment process is applicable to the persons listed in subparagraph 2b(1) and 2b(2):

(1) U.S. Navy Service members with orders to non-operational commands, or

(2) U.S. Marine Corps Service members

c. All portions of paragraphs 3, and 6 through 9, as well as corresponding timelines as noted in enclosure (1) of this notice apply to all DON Service members and their dependents who required screening for operational, OCONUS, or remote duty. In the case of remote locations being reviewed by a NAVMEDREADTRNCMD or subordinate unit that is greater than 50 miles from the assignment location, the NAVMEDREADTRNCMD performing the review will be that which is designated as having medical cognizance (MEDCOG) for that area, per reference (d).

3. Background

a. Automatic denial listings will not exist in any form, and every case will be reviewed on an individual basis. Each suitability screening package will be reviewed and considered individually based on the capabilities of the NAVMEDREADTRNCMD and specific MTF or facility delivering care, if different than the designated NAVMEDREADTRNCMD; the local TRICARE network; and for school-aged dependents, the capabilities of the DoDEA (OCONUS only) and the Educational and Developmental Intervention Services Program.

b. Medical and Dental Inquiries for Remote or OCONUS assignments, except those designated as COM authority (e.g., embassies).

(1) Per reference (a), the gaining MEDCOG NAVMEDREADTRNCMD has 7 working days to reply to the inquiry. Each gaining NAVMEDREADTRNCMD, to include subordinate Navy Medicine Readiness and Training Unit (NAVMEDREADTRNUNIT) or branch clinic, must designate medical and dental provider reviewer or reviewers.

(a) Those reviewers must consider capabilities to manage care within the direct care system, which includes network or purchased care. The suitability screening coordinator (SSC) will ascertain input of network capabilities from the responsible TRICARE area office (TAO) as part of the review process.

(b) TAO may require up to 72 hours to adjudicate inquiries and assess host nation capabilities; the TAO assessment will occur concurrently to the gaining medical assessment and therefore should not extend the inquiry timeline noted in the table in enclosure (1).

(2) If the recommendation is unsuitable, the gaining MEDCOG NAVMEDREADTRNCMD SSC will provide a signed memorandum to the screening (previously known as 'losing') MEDCOG NAVMEDREADTRNCMD or NAVMEDREADTRNUNIT SSC stating the reason(s) the Service or family member cannot be supported and detail the specialties and outside entities involved in the adjudication.

(a) The screening MEDCOG NAVMEDREADTRNCMD SSC is responsible for providing written documentation of the unsuitable recommendation to the Service member and uploading a copy of this documentation into the electronic health record. Service members will be provided names and details regarding the reasons for unsuitability for themselves and any minor dependents as well as details and recommendations of any outside agencies involved in the adjudication (e.g., DoDEA or TAO).

(b) If the reason for unsuitability includes a dependent 18 years or older, the information provided to the Service member must not include any medical details for that dependent. Adult dependents found unsuitable will receive further details on their reason for unsuitability directly from the screening MEDCOG NAVMEDREADTRNCMD SSC, and that notification will be included in their individual electronic health record.

(c) All notifications of unsuitability will include guidance on initiating the reconsideration process, if applicable. Screening offices are encouraged to utilize the MHS GENESIS Patient Portal to transmit these notifications.

c. Medical and Dental Inquiries for OCONUS Assignments Under COM Authority.

(1) The MEDCOG NAVMEDREADTRNCMD designated medical and dental provider reviewer(s) must consider capabilities to manage care if medical evacuation to their facility was needed. The SSC will ascertain local host nation capabilities from both the TAO for that location and the DOS medical foreign clearances office (MFCO) prior to the MEDCOG NAVMEDREADTRNCMD rendering a decision to ensure all care needs are considered. The DOS MFCO provides the inputs on behalf of the local Embassy Health Unit noted in reference (b).

(2) If the medical recommendation is unsuitable, the signed memorandum sent to the screening MEDCOG NAVMEDREADTRNCMD SSC will state the reason and detail specialties and outside entities involved in the adjudication. The screening MEDCOG NAVMEDREADTRNCMD SSC will provide written documentation to the Service member or adult dependent per guidance outlined in subparagraph 3b of this notice.

(3) In instances of inquiries for OCONUS COM authority assignments, the DOS MFCO requires 30 days to conduct an assessment; as such, any inquiries for OCONUS COM assignments will require a delay message as noted in reference (a), due to the external coordination required.

d. Educational inquiries for all overseas or remote assignments.

(1) Adjudication of educational suitability inquiries with DoDEA Headquarters is the responsibility of the screening NAVMEDREADTRNCMD SSC and will be conducted using the Education Screening and Assignment Concerns Management System (ESACMS) screening process.

(2) Any SSC that does not yet have access to ESACMS must contact Forces Medical Readiness (BUMED-N10D) at the e-mail address provided in subparagraph 7b(3) of this notice.

(3) DoDEA Headquarters is responsible for the educational inquiry process and timeline. Due to the level of external coordination with schools and community partners required to determine the educational capabilities available at the gaining location, educational inquiries may take 30 business days to adjudicate.

e. To aid the SSC in communication with the TAO and DOS Medical Foreign Clearance Office, the listed Web sites and organizational e-mails are provided. Please Note: If unable to send encrypted e-mail, ensure all communication is sent using DoD Secure Access File Exchange (DoD SAFE).

(1) TAO. To identify the appropriate TAO e-mail, utilize the following link:
<https://health.mil/Military-Health-Topics/Access-Cost-Quality-and-Safety/TRICARE-Health-Plan/TRICARE-Area-Offices>.

(2) DOS MFCOs. medclearances@state.gov.

f. The only policy-supported results of a final suitability determination are “Suitable” or “Unsuitable”. If there is a pathway for being found suitable (e.g., changing a treatment plan to one that is supported within the facility or local host nation network), this information must be included in the notification to the Service member or adult dependent. There are no mandatory timelines required to determine stability; stability of a particular condition or treatment plan should be determined on a case-by-case basis with the inputs of the treating provider considered strongly in supporting that determination. Theater entry requirements and procedures for Service member waivers from the respective combatant command (COCOM) surgeon via the Service Component surgeon must be followed if explicitly indicated for permanent change of station personnel, per the COCOM theater entry guidance.

4. Overseas and Remote Suitability Risk Assessment for Service Members.

a. In cases where a Service member has been determined to be unsuitable on medical or dental grounds, the gaining CO may opt to assume the risk for that Service member and find the Service member suitable for their orders. Please Note: This risk assessment applies only to Service members. Per references (g) and (h), family members may only be command sponsored if the necessary capabilities exist to support their individual needs, to include but not limited to medical, dental, and educational services. There is a separate suitability reconsideration process for dependents found medically or dentally unsuitable outlined in paragraph 5 of this notice.

b. To make an informed risk assessment, the CO should request that the reviewing medical department or personnel who responded to the initial suitability inquiry provide a risk assessment memorandum, following the template provided in enclosure (2). Medical personnel involved in the screening process will not need to revise their initial suitability recommendation. This risk assessment memorandum will only be provided at the request of the gaining CO and should not contain specific, sensitive medical information pertaining to the Service member, in compliance with Health Insurance Portability and Accountability Act (HIPAA) Privacy regulations: the level of detail provided should be sufficient for the CO to understand and make a risk-based decision regarding the suitability of the Service member.

5. Overseas and Remote Suitability Screening Reconsideration Process for Dependents

a. If found medically or dentally unsuitable, Service members have the right to request reconsideration for their dependents. The reconsideration process is not automatic in nature and will be pursued only if requested by the Service member. The reconsideration process has two tiers.

(1) Tier One. The reconsideration request will be sent to the respective NAVMED Region, Naval Medical Forces Atlantic or Naval Medical Forces Pacific for adjudication. The respective Region, Naval Medical Forces Atlantic or Naval Medical Forces Pacific, is determined by the gaining MEDCOG NAVMEDREADTRNCMD location. The process will be as outlined in subparagraphs 5a(1)(a) through 5a(1)(c):

(a) The Service member requests a reconsideration to the screening NAVMEDREADTRNCMD SSC by:

1. Submitting a written request stating why they would like a reconsideration for their dependent(s). Please Note: If new information is available, such as change in status or resolved diagnosis, the gaining NAVMEDREADTRNCMD will be given the opportunity to review and determine if they now find the dependent(s) suitable based on the new information, prior to the NAVMED Region adjudication.

2. Completing DD Form 2870 Authorization for Disclosure of Medical or Dental Information, asking for records to be released to BUMED in block 6a of the DD Form 2870, which will allow both the Region, either Naval Medical Forces Atlantic or Naval Medical Forces Pacific, and BUMED to review health records pertinent to the case.

(b) The screening NAVMEDREADTRNCMD SSC submits a copy of the completed forms listed in subparagraphs 5a(1)(b)1 through 5a(1)(b)4 to the appropriate gaining Region, either Naval Medical Forces Atlantic (N10D) or Naval Medical Forces Pacific (N10D), offices via encrypted e-mail or DoD SAFE. Please Note: Members must work through their SSC and may not submit the package to the Region directly.

1. NAVMED 1300/1 Medical, Dental, and Educational Suitability Screening for Service and Family Members.

2. NAVMED 1300/2 Medical, Dental, and Educational Suitability Screening Checklist and Worksheet.

3. DD Form 2870.

4. Initial, signed unsuitability notification memorandum from the gaining MEDCOG NAVMEDREADTRNCMD.

5. Written request from the Service member for reconsideration.

6. Signed memorandum from the gaining MEDCOG NAVMEDREAD-TRNCMD to the Regional N10D office responding to the Service member's reconsideration request letter, detailing why it is still the recommendation that the dependent is unsuitable.

7. Any e-mail correspondence between the gaining and losing MEDCOG NAVMEDREADTRNCMD during the review process, to include the e-mail in which the final decision was communicated, if applicable.

8. Any additional supporting documentation or required forms reviewed to make the initial determination (e.g., DD Form 2792 Family Member Medical Summary, specific medical notes or memoranda from treating providers).

(c) The respective Region, Naval Medical Forces Atlantic or Naval Medical Forces Pacific, has 10 business days to adjudicate the case and provide a written response to the gaining and losing NAVMEDREADTRNCMD SSC via encrypted e-mail or DoD SAFE.

1. If found medically and dentally suitable, the screening MEDCOG NAVMEDREADTRNCMD will complete an updated NAVPERS 1300/16 Report of Suitability for Overseas Assignment denoting the individual(s) as medically suitable.

2. If the Region upholds the unsuitability finding in the first tier of review, the Service member may utilize the second tier of the reconsideration process on behalf of themselves or their dependent(s).

(2) Tier Two. The screening MEDCOG NAVMEDREADTRNCMD SSC will notify the respective gaining Region, Naval Medical Forces Atlantic or Naval Medical Forces Pacific, of the Service member request for BUMED reconsideration of non-suitability. The respective Region will then submit the reconsideration request to BUMED-N10D, utilizing Enterprise Task Management Software Solution (ETMS2) tasker, which will include the documents as listed in subparagraphs 5a(1)(a) through 5a(1)(b) and associated subparagraphs, with the addition of including the Region unsuitability memo signed by the Region designee. If the reconsideration involves a Marine Corps dependent, BUMED-N10D will make the Office of the Medical Officer of the Marine Corps (TMO) aware of the pending reconsideration.

(a) Any new information submitted in the second-tier review will be sent to the gaining MEDCOG NAVMEDREADTRNCMD and the respective Region, either Naval Medical Forces Atlantic or Naval Medical Forces Pacific, to review and determine if this new information substantively changes the previous determinations of unsuitable.

(b) BUMED-N10D will have 10 business days to respond within ETMS2 and via encrypted e-mail to the gaining MEDCOG NAVMED Region N10D office of either Naval Medical Forces Atlantic or Naval Medical Forces Pacific. If new information is provided, BUMED will provide a determination within 15 business days, to allow 5 business days for the gaining MEDCOG NAVMEDREADTRNCMD and NAVMED Region either Naval Medical Forces Atlantic or Naval Medical Forces Pacific to respond to the new information.

b. If a school-aged child is found unsuitable for educational reasons, and the sponsor has new information indicating a change in educational needs, and wishes to go through the DoDEA

DoDEA. A determination should be provided within 30 business days of the appeal request and submission of documentation into ESACMS. Once a determination is made, the screening NAVMEDREADTRNCMD SSC will communicate the result of the reconsideration to the sponsor, to include providing a copy of any comments or notes provided by the DoDEA representative.

6. Immunization-Only Unsuitability Cases.

a. Recommendations of unsuitable based solely on immunization non-compliance will require Regional Chief Medical Officer (CMO) review and signature. This tier is not considered a reconsideration but will follow a similar process and timeline as noted in subparagraphs 5a(1)(a) through 5a(1)(c).

b. In addition to the items identified in subparagraph 5a(1)(b), the gaining MEDCOG NAVMEDREADTRNCMD will include in the letter to the perspective NAVMED Region either Naval Medical Forces Atlantic or Naval Medical Forces Pacific the listed information:

- (1) Age and health of the dependent.
- (2) Applicable local laws of, and Status of Forces Agreements with, the host nation.
- (3) Local conditions and public health concerns.
- (4) Any area of responsibility specific guidance.
- (5) Ability of the nearest MTF to treat infection and the local capabilities to accommodate an outbreak.
- (6) Plan for childcare and school attendance (e.g., child development center, DoDEA, homeschool, etc.).
- (7) Potential impact on the mission.

c. These cases will be allotted a maximum of 10 business days from date sent to the responsible NAVMED Region either Naval Medical Forces Atlantic or Naval Medical Forces Pacific for completion and notification to the screening MEDCOG NAVMEDREADTRNCMD. To ensure transparency in the process, the gaining MEDCOG NAVMEDREADTRNCMD SSC will provide a written response to the screening MEDCOG NAVMEDREADTRNCMD SSC within the required 7 business day timeline to inform them of the preliminary finding of 'unsuitable solely on the basis of immunization status,' and this information, to include the next steps in the process, will be shared with the Service member or adult dependent, as appropriate.

d. The letter containing additional documentation required to be sent to the respective Region either Naval Medical Forces Atlantic or Naval Medical Forces Pacific, should include details as noted in enclosure (3) of reference (a).

e. The respective regional CMO must endorse his or her suitability decision in writing. The written, endorsed determination must be provided to both the screening and gaining MEDCOG NAVMEDREADTRNCMD SSC within 10 business days. If upholding the unsuitability recommendation, the letter will also include procedures for requesting reconsideration by BUMED-N10D.

f. If the Service member wishes to request reconsideration, the process is similar to that described for the tier two reconsideration outlined in subparagraph 5a(2).

(1) The Service member submits a written request to the screening NAVMEDREADTRNCMD SSC requesting reconsideration for themselves or their dependent(s) and describing why they believe the original finding to be in error or inappropriate.

(2) The Service member or adult dependent completes DD Form 2870 asking for records to be released to "Navy Medicine and Bureau of Medicine and Surgery" in block 6a of the form.

(3) The screening NAVMEDREADTRNCMD SSC submits a copy of the listed completed documentation via encrypted e-mail to BUMED-N10D and places a tasker into ETMS2 directed to BUMED-N10D containing the listed documents:

(a) NAVMED 1300/1.

(b) Initial, signed unsuitability recommendation notification memorandum from the gaining MEDCOG NAVMEDREADTRNCMD.

(c) Initial, signed unsuitability recommendation notification memorandum from the gaining MEDCOG NAVMED Region.

(d) Written request from the Service member for reconsideration.

(e) Memorandum from the gaining MEDCOG NAVMEDREADTRNCMD identifying the specific information identified in subparagraph 6b of this notice.

(f) Signed memorandum from the NAVMED Region CMO upholding the finding of unsuitable for immunization noncompliance.

(g) Any additional supporting documentation with information relevant to the case.

(4) BUMED-N10D will have 10 business days to respond within ETMS2 and via encrypted e-mail to the gaining MEDCOG NAVMED Region N10D office for Naval Medical Forces Atlantic or Naval Medical Forces Pacific.

7. Information Sharing.

a. It is the responsibility of the screening MEDCOG NAVMEDREADTRNCMD SSC to be the conduit for information-sharing, including providing updates on any Service member risk assessment determinations by the gaining CO or dependent reconsideration packages or DoDEA appeals. It is critical that complete information be provided to the screening offices and agency-to-agency coordination procedures be followed to avoid confusion and unnecessary delays in final determinations. As such, commands and SSCs should caution Service members against conducting any independent coordination with other agencies or outside sources such as host nation schools, as these results are not considered official or sanctioned for consideration in the suitability screening recommendation process.

b. All direct communication with the Service member or dependent is to be completed via the screening MEDCOG NAVMEDREADTRNCMD SSC acting as the main point of contact for status updates and requests for information received from the respective NAVMED Region either Naval Medical Forces Atlantic or Naval Medical Forces Pacific and BUMED-N10D. Concerns with timely and effective communication or processing of suitability screening packages should be directed to the screening NAVMEDREADTRNCMD SSC chain of command for efficient investigation and action as appropriate. The points of contact at each NAVMED Region, Naval Medical Forces Atlantic and Naval Medical Forces Pacific and BUMED are:

(1) Navy Medicine Forces Atlantic N10D: usn.hampton-roads.navmedlant-porsva.list.nme-pad@health.mil.

(2) Navy Medicine Forces Pacific N10D: usn.san-diego.navmedpac-sanca.list.medical-readiness-pad@health.mil.

(3) BUMED-N10D: usn.ncr.bumedfchva.mbx.bumed-suitability-screening@health.mil. Any reconsideration requests to BUMED will be sent by encrypted e-mail and via ETMS2, specifically requesting review by BUMED-N10D.

8. 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.secnnav.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 instruction or the records disposition schedules, please contact the local records manager or the OPNAV Records Management Program (DNS-16).

9. Forms

a. The listed NAVMED forms are available at:
<https://www.med.navy.mil/Directives/NAVMED-Forms/>

(1) NAVMED 1300/1 Medical, Dental, and Educational Suitability Screening for Service and Family Members.

(2) NAVMED 1300/2 Medical, Dental, and Educational Suitability Screening Checklist and Worksheet.

b. The listed DD Forms are available at:
https://www.esd.whs.mil/directives/forms/dd2500_2999/

(1) DD Form 2870 Authorization for Disclosure of Medical or Dental Information.

(2) DD Form 2792 Family Member Medical Summary.

c. NAVPERS 1300/16 Report of Suitability for Overseas Assignment is available at:
<https://www.mynavyhr.navy.mil/References/Forms/NAVPERS/>.



D. K. VIA

Releasability and distribution:

This notice is cleared for public release and is available electronically only via the Navy Medicine Web site, <http://www.med.navy.mil/Directives/>

TIMELINES AND RESPONSIBILITIES FOR
SUITABILITY SCREENING, INQUIRIES AND RECONSIDERATIONS

	Action	Timeline
Screening Initiation	Navy Sailors and dependents (if applicable) must initiate suitability screening	Within 3 days of receipt of orders, per reference (b).
	Marines and dependents (if applicable) must initiate suitability screening	Within 10 days of receipt of orders, per reference (e).
Screening Inquiry	Medical or dental suitability inquiry is submitted to gaining NAVMEDREADTRNCMD or organic medical staff (non-COM assignments)	7 business days for gaining MEDCOG NAVMEDREADTRNCMD final response back to screening NAVMEDREADTRNCMD
	Educational inquiry is submitted to DoDEA HQ via ESACMS for review by DODEA or Non-DoD Schools Program (NDSP), as appropriate	30 business days for DoDEA or NDSP response to screening NAVMEDREADTRNCMD SSC via ESACMS
	Medical or dental suitability inquiry is submitted for OCONUS COM (i.e., foreign assignments) MEDCOG NAVMEDREADTRNCMD review must include input from both the TAO and the DOS Medical Clearances Office	30 business days for gaining MEDCOG NAVMEDREAD-TRNCMD response to screening NAVMEDREADTRNCMD SSC, due to external coordination and DOS MFCO 30-day inquiry timeline
Suitability Screening Completion (Not Inclusive of Reconsideration)	Unaccompanied DON Service members: Medical and dental screening complete, required inquiry response received (if applicable); NAVPERS 1300/16, part II, medical and dental suitability recommendation is complete and signed by screening NAVMEDREADTRNCMD CO or designee and returned to SM to complete administrative process	Within 30 calendar days from initiation of suitability screening, per reference (b).
	Accompanied DON Service members: Both the SM and accompanying dependents complete required medical, dental and educational (dependents only) screenings and required inquiry responses received (if applicable); NAVPERS 1300/16, part II, DON Service members receive overall medical, dental, and educational suitability determination for accompanied orders, signed by screening NAVMEDREADTRNCMD CO or designee and returned to SM to complete administrative process	Family Member Travel Screening (previously 'dependent suitability screening') completed within 45 calendar days of dependent initiating screening, per reference (f). Within 60 days from initiation for Service member overall medical, dental, and educational suitability for accompanied orders, per reference (f)

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Immunization-Only Review	Immunization-only suitability determination is warranted, requiring Regional CMO signature	10 business days for determination and notification to the losing and gaining MEDGOC NAVMEDREADTRNCMD by Regional CMO 10 business days for BUMED review if requested by Service member
Dependent Reconsideration	Tier one medical or dental reconsideration for dependent(s). Respective Region adjudicates case and provides written response to gaining and losing NAVMED-READTRNCMDs regarding suitability	10 business days for Region response
	Tier two of medical or dental reconsideration for dependent(s) or reconsideration request for immunization-only unsuitable finding. BUMED adjudicates case and provides response	10 business days if no new information; 15 business days if new information, to allow 5 days for gaining NAVMEDREAD-TRNCMD and regional review and input
	Educational suitability appeal request is submitted to DoDEA or Non-DoD Schools Program (NDSP) for review. Educational appeals are only permitted if providing new information (i.e., child's Individualized Education Program is closed due to all objectives being met)	30 business days for DoDEA or NDSP response

SERVICE MEMBER RISK ASSESSMENT MEMORANDUM TEMPLATE

[DD Mmm YY]

MEMORANDUM

From: Chief Medical Officer, Navy Medicine Readiness and Training Command [Activity]

To: Commanding Officer, [Activity title]

Via: Commanding Officer, Navy Medicine Readiness and Training Command [Activity]

Subj: NON-SUITABILITY FOR OVERSEAS OR REMOTE DUTY ASSIGNMENT
RECOMMENDATION RISK ASSESSMENT ICO RANK, NAME, DEPARTMENT
FO DEFENSE IDENTIFICATION NUMBER

Ref: (a) OPNAVINST 1300.14E
(b) BUMEDINST 1300.2B
(c) BUMEDNOTE 1300 of 27 Aug 2025 (Canc: Aug 26)

1. On [DD Mmm YYYY], rank and name, was found medically unsuitable for overseas or remote assignment to [duty station] located in [city and state] or [city and country]. Per references (a) through (d), a risk assessment is being provided at your request to aid in your final determination of the overall suitability of this prospective gain to your command.

2. The listed inputs were considered in making the medical recommendation of suitability:

- a. NAVMEDREADTRNCMD Suitability Screening Multi-Disciplinary Board: RESULT.
- b. TRICARE Area Office: RESULT
- c. Department of State Medical Clearances Office: RESULT.

3. Specific concerns and risk to member, command and mission:

- a. Condition status: [XXXXXXX].
- b. Access to necessary care: Not available at medical facility or local network; limited availability in local network; will require routine medical TAD to access care at closest facility in [XXXXXX] medical logistics; supply chain for required medications unreliable.
- c. Risk of unplanned loss due to LIMDU, MEDEVAC, or Early Return: high, medium, or low.

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RECOMMENDATION RISK ASSESSMENT ICO RANK, NAME, DEPARTMENT
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d. Risk can be mitigated by: Re-screen in [XX] months to confirm stability or optimize condition; delay report to allow confirmation of stability on new treatment that can be supported; delay report, complete specialty follow-up CONUS and command prepare for routine medical TAD for future routine specialty follow-up, if necessary every [XX] months.

4. I can be reached to discuss further at (XXX) XXX-XXXX or i.m.physican1.mil@health.mil.

I. M. PHYSICIAN