



# **GUIDE FOR COMMANDING OFFICERS AND OFFICERS IN CHARGE OF HIV INFECTED MEMBERS**

(Updated April 2023)

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## 1.0 Notification Procedures

### Commanding Officers

**Due to various state laws, neither you nor other members of your command are legally authorized to notify assumed prior/potential sexual partners of their contact with an HIV-positive member.**

### 1.1 Notification of the Service Member

One of the most difficult things a Commanding Officer may ever have to do is notify a service member that he or she is infected with Human Immunodeficiency Virus (HIV), the virus that causes Acquired Immune Deficiency Syndrome (AIDS). It is not feasible to design an all-purpose counseling statement for such an event. However, the following facts and ideas may be helpful when informing one of your service members that he or she is HIV infected.

- **Positive Member Identification** – ensure verification of member’s first and last name, FMP/SSN, and date of birth prior to proceeding with the notification process.
- **Timely Notification** – to prevent further infection of others.
- **HIV positive test does not mean AIDS** – The initial positive confirmed and verified test means the member has been infected with HIV. It does not mean the member has AIDS.
- **Exercise Discretion** –
  - When possible, notify the member early in the week during duty hours.
  - If the HIV specimen was drawn at a Medical Treatment Facility (MTF) that transitioned to MHS Genesis; Please note that patients at MHS Genesis MTFs will have access to their HIV result through the Patient Portal 36 hours after the result is released in the system. Notification must be performed within 10 working days of receipt of the commanding officer’s notification letter from BUMED.
  - Try to avoid telling the member on a Friday or the day before the member’s leave or liberty period when the member may have inadequate emotional support. There continues to be reports of events of self-injurious behavior by members following an HIV diagnosis.
  - If conditions are such that the member must be informed on a Friday (or prior to or during leave/liberty period), ensure that a proactive plan is in place to mitigate risk of self-harm. This includes availability of, and follow-up, by chaplain, clinician, chain of command or hospital.
  - A Physician or Independent Duty Corpsman (IDC) and Chaplain should be immediately available to the member after notification for medical and emotional support.
  - Note: Having a physician in the room for the notification is highly encouraged, but not required if it would mean a delay in notification.
  - Always protect member’s privacy.
- **Reassure the Member-**
  - There is no evidence of immediate danger of dying

- There is most likely still a career for them in the Navy/Marine Corps.
- Do not treat an HIV-positive member differently than any other member of your command.
- There is no risk to the health of the infected member, shipmates, fellow Marines, or co-workers in performing ordinary activities such as sharing heads, berthing spaces, galleys, and workspaces.
- The virus is not spread by casual contact such as sneezing, shaking hands, sharing eating utensils, sweating, etc.
- **Post Notification Support** - Initial counseling about HIV infection is often not totally comprehended. Offer to make yourself or another person (i.e., Executive Officer (XO), Command Master Chief (CMC), Medical Officer (MO) in the command available for questions that may follow the initial notification.
- **OCONUS and Shipboard, and Deployed Sailors and Marines**- A Medical Officer/Physician at the member's local command must place the member on Limited Duty Status (LIMDU) expeditiously to facilitate service member movement CONUS to receive appropriate medical care.

## 1.2 United States Navy (USN) Commanding Officers Requirements

- Send an encrypted email confirming that the individual has been notified to Navy Bloodborne Infection Management Center (NBIMC) within 10 working days of receiving the command notification documents. Please contact the NBIMC POCs for any questions.
- The Navy Bloodborne Infection Management Center (NBIMC) POCs:
  - **CAPT Nimfa Teneza-Mora**
    - 301-295-5246, (DSN 295)
    - Email: [nimfa.c.tenezamora.mil@health.mil](mailto:nimfa.c.tenezamora.mil@health.mil)
  - **Ms. Vanessa Santiago-Miranda**
    - 301-319-2985
    - Email: [vanessa.santiago-miranda.civ@health.mil](mailto:vanessa.santiago-miranda.civ@health.mil)
  - **Ms. Denise Chambers**
    - 301- 295-1644
    - Email: [denise.a.chambers6.civ@health.mil](mailto:denise.a.chambers6.civ@health.mil)

## 1.3 United States Marine Corps (USMC) Commanding Officers Requirements

- Guided by SECNAVINST 5300.30 series for counseling and disposition of Marines that are HIV positive upon receipt of the BUMED notification letter
- The commanding officer will also supervise the execution of the Command Orders Transmittal (Active Duty) found in Appendix (F) of the NAVMC 2904.
- The POC for HIV questions are: Medical Evaluation/Testing (M3/5CCPH) at DSN 319-2985 or 301-319-2985; Marine Corps Manpower at DSN 278-9387 or 703-784-9387; or Marine Corps Monitor – Liaison at DSN 278-9220 or 703-784-9220.

## **1.4 OPNAVINST 1300.20 Information**

- Per OPNAVINST 1300.20; member's Medical Officer/Physician will put him/her on a limited duty status (LIMDU). While placing the service member on a LIMDU status, the Medical Officer or physician must NOT enter the member's diagnosis on the physical or electronic form to ensure that the member's privacy is protected. The LIMDU office will be in contact with the member to provide LIMDU orders to a location near their medical unit for the duration of LIMDU. All members' questions/concerns should be addressed with the respective HETU coordinator.

## **1.5 SECNAVINST 5300.30 Information**

- Per SECNAVINST 5300.30, the member's Commanding Officer will issue to the Service member an order to follow preventive medicine requirements, as specified in APPENDIX C. The Service member shall acknowledge the order, as specified in APPENDIX D. The order is intended to educate the Service member on how to prevent transmission to others and direct the Service member to do the following:
  - Inform all sexual partners (military, dependents, or other civilian persons) about their HIV status prior to sexual relations.
  - Use proper methods to prevent the transmission of HIV to other individuals.
  - In the event that the Service member requires emergency medical care, he or she shall inform personnel responding to the emergency about the Service member's HIV status.
  - When seeking medical or dental care, the Servicemember shall inform the provider about his or her HIV status.
  - Not donate blood, tissues, sperm, or other organs.

## **2.0 Frequently Asked Questions**

The following are frequently asked questions during the notification process

### **2.1 Career**

#### **What will happen to my career?**

- HIV-positive members who have been medically evaluated to have controlled HIV disease may be considered for OCONUS or large ship platform tours. Numerous factors will affect the suitability of a Service member living with HIV for operational and OCONUS assignments. These factors include but are not limited to the availability of medical capabilities at the operational or OCONUS site, the nature of the assignment itself, and the Status of Forces agreements with host nations. Newly diagnosed members are initially transferred to shore duty to ensure that the service member can obtain medical care.
- Once certain medical criteria are met, service members may apply for OCONUS and operational duty as per MPM 1300-1300 for Navy members and MCO 1300.8S for Marine members. Service members living with HIV will not be considered for overseas

individual augmentee (IA) tours given the austere environments where they potentially could be placed.

- Alternatively, junior enlisted members in sea intensive ratings (i.e., OS, BT, QM, etc.) may consider a change in their rate to a more shore favorable rate (i.e., HM, YN, PS).
- Some personnel in special communities such as aviation duty, diving duty, special warfare, or submarine duty may request a BUMED waiver of medical standards to continue in these programs. In our recent experience, service members living with HIV in the submarine, aviation, and special forces communities have encountered challenges in remaining in their rating, specialty, or position.

## 2.2 Advancement

### Can I advance?

- Yes. By law, personnel records cannot contain a member's HIV status, nor can a member be denied reenlistment or promotion solely because of HIV infection.
- Outstanding performance is the key, Service members living with HIV are subject to high- year- tenure, ENCORE, Continuation Boards and Selected Early Retirement Boards (SERB).

## 2.3 Informing Spouse/Partner of Positive Diagnosis

### Will I have to inform my spouse/significant other that I have HIV?

- It is your moral responsibility to personally notify people you may have infected.
- When you get to the military hospital, you will be asked to list all the people you may have infected.
- Without providing your name, the military will officially inform all active-duty members and state health departments in which they reside will officially inform civilians.

## 2.4 Protecting the Member's Privacy

### Who in the command knows I'm HIV positive?

Right now, just myself, Chaplain (if desired) and Dr. \_\_\_\_\_ (or an Independent Duty Corpsman when no physician is available). I will also inform \_\_\_\_\_, so that they may help you prepare for MEDEVAC/transfer from the command to the Military Treatment Facility and be available to answer any questions you may have after our meeting today.

**One of the most important issues to a Service member with a positive HIV test is knowing that only a very select few are aware of their HIV status. It goes without saying that the CO must be extremely vigilant to ensure the member's privacy confidentiality are not compromised. If you inform someone else in your command, you should advise the infected service member of your decision.**

## 2.5 Information of HIV Positive

- This is a useful website from the Department of Health and Human Services website on the next steps – after receiving a diagnosis.

Link: <https://hivinfo.nih.gov/understanding-hiv/fact-sheets/just-diagnosed-next-steps-after-testing-positive-hiv>

## 3.0 Medical Evaluations

The Department of Defense Instruction 6485.01 and SECNAVINST 5300.30 series govern the policy regarding HIV diagnosed members.

### 3.1 Initial Medical Evaluation

The initial medical evaluation includes the following:

- HIV positive validation, complete physical, psychological counseling, drug/alcohol training, legal counseling, and treatment options.
- Determination of fitness for duty. Most members are found fit for full duty. Members may not be assigned or reassigned without NAVPERSCOM (PERS-454) and Navy Bloodborne Infection Management Center (NBIMC) approval at OCONUS or operational duty stations. Members not fit for full duty shall be processed IAW SECNAVINST 1850.4F, Disability Evaluation System.

#### 3.1.1 Reporting for Evaluation

- Evaluations are conducted at one of the four HIV Evaluation and Treatment Units (HETU):
  - Naval Medical Center Camp Lejeune
  - Naval Medical Center, Portsmouth
  - Naval Medical Center, San Diego.
  - Walter Reed National Military Medical Center (WRNMMC), Bethesda
- Initial medical evaluation and administrative processing may take up to two weeks. Initial medical evaluation may take less time for Service members who are already on shore duty (type 1) and whose current duty stations are located within driving distance to the HETUs.
- Do not rush the member to the HETU immediately after notification.
  - Rapid removal from the command can be very stressful for the member and adds more disruption, confusion, and sense of loss on top of the initial news.
  - However, if confidentiality has not been maintained, remaining at the command can also be stressful.
- Ensure the individual reports through normal regulating channels.
- Direct the individual to bring medical and dental records as well as appropriate uniform and civilian attire.

- Members who need to return to CONUS from overseas may need a longer period to begin to arrange and supervise movement of household goods and family members.
- Ten to fourteen days is usually sufficient time to arrange personal matters. The active-duty member must designate an agent in writing to care for and store household goods until shipment to next duty station can be arranged.

### 3.1.2 Travel to HETU

- All members with newly diagnosed HIV must be assigned to shore duty (type 1) for medical care.
- Members currently on shore duty and returning to parent shore duty command after initial evaluation shall be sent to the HETU on Temporary Duty (TDY) orders for treatment.
- Members currently stationed aboard ship, operational command, or from any OCONUS duty station shall be transferred via PCS orders to shore duty (type 1). NAVPERSCOM 454 Medical Officer shall assist with transfer orders to the new shore duty command (type 1) (mill\_DAOPERS-454@navy.mil or 901-874-3201). Prior to detaching the current command, the member shall receive PCS orders with an intermediate stop at the HETU with follow on orders to report to new shore duty (type 1) command. Alternatively, if NAVPERSCOM is unable to execute PCS orders in a timely manner (10-14 days after initial notification), Temporary Duty (TDY) orders for further assignment may be written to the HETU. While at the HETU, the member will await PCS orders to shore duty assignment. This information (TDY versus PCS) should be communicated to NAVPERSCOM and BUMED accordingly.
- **For confidentiality purposes, indicate only the NAME of the military treatment facility on the orders (WRNMMC Bethesda, NMC Camp Lejeune, NMC Portsmouth, or NMC San Diego).**
- **DO NOT indicate on any Orders that the member is going to the “Navy HIV Evaluation and Treatment Unit.”**
- BUMED provides TDY funding for transfer of Navy/Marine Corps members worldwide (and one non-medical attendant (e.g., spouse) from OCONUS commands) to the initial evaluation visit using the line of accounting data below.

## 3.2 Line of Accounting (LOA) Temporary Duty Travel (TDY) Orders Requirements

### **Line of accounting (LOA) TDY orders: LOA Requirements:**

- The LOA is used for BUMED responsible travelers only.
- BUMED will provide funding for the duration of the medical appointment not to exceed 2 weeks. If the member is waiting for orders at HETU sites enroute to the next duty station, the parent command will be responsible for funding.
- Physician recommendation is required for non-medical attendant (CONUS/OCONUS).



- A HETU Patient Memo (Appendix B) must be completed and sent to BUMED for the LOA to be processed.

**Requesting Sites must –**

- Use the Defense Travel System (DTS)
- Ensure Government issued credit card is activated
- Provide a memo documenting non-availability of government quarters if BEQ/BOQ/Navy Lodge/Gateway Inn and Suites/are not used.
- Requesting sites must contact Ms. Wanda Ford at BUMED to obtain a Managed Care Line of Accounting for a member to go to the specified HIV Evaluation and Treatment Unit (HETU)
  - **Ms. Wanda Ford:**
    - COMM 703-681-9445, DSN 761-9445
    - Email at [wanda.f.ford.civ@health.mil](mailto:wanda.f.ford.civ@health.mil)
  - **Ms. Togi Rosa:**
    - COMM 703-681-9386, DSN 761-9386
    - Email [togi.n.rosa.civ@health.mil](mailto:togi.n.rosa.civ@health.mil)
  - **Alternate, LCDR Harry Qui**
    - Email [harry.z.qui.mil@health.mil](mailto:harry.z.qui.mil@health.mil)

**Travel funds for additional (above ONE allowable) OCONUS non-medical attendants and for any CONUS non-medical attendants are the parent command's responsibility.**

### **3.3 Re-Evaluation**

- Complete medical re-evaluation and follow-up HIV/AIDS counseling and education are required at 6-month intervals at one of the HETUs. On a case-by-case basis, follow up HIV evaluations may be performed at smaller naval MTFs with the results of those appointments being reported to the cognizant HETU and NBIMC for tracking purposes.
- The duration will be one to three days based on the member's medical condition and needs.
- The member's command is responsible for providing TDY funding for their follow-up medical evaluations (See Joint Federal Travel Regulations).
- Though the command has no funding obligation, the spouse of an HIV-positive member should be strongly encouraged to attend the evaluations.
- Direct the individual to bring medical and dental records as well as appropriate uniform and civilian attire.

### **4.0 HIV/AIDS Education and Training Information**

SECNAVINST 5300.30 requires that all commands conduct HIV preventive training in command health promotion programs. Emphasize modes of transmission and methods of prevention.

## Guide for Commanding Officers and Officers in Charge of HIV-Infected Members

- DON civilian employees and their supervisors (military and civilian) should receive information relevant to HIV/AIDS and workplace policies, procedures, and resources.
- Resources to assist you with training materials are available from local MTFs, Navy chaplains and the following:

### **4.1 Navy Bloodborne Infection Management Center:**

<https://www.med.navy.mil/Navy-Marine-Corps-Public-Health-Center/Field-Activities/Navy-Bloodborne-Infection-Management-Center/>

### **4.2 Navy Marine Corps Public Health Center:**

<https://www.med.navy.mil/Navy-Marine-Corps-Public-Health-Center/>

- Phone: DSN 312-377-0756 or COMM 757-953-0756.
- Email: [francis.a.obuseh.civ@health.mil](mailto:francis.a.obuseh.civ@health.mil)

### **4.3 CDC National Prevention Information Network (NPIN):**

<https://npin.cdc.gov/disease/hiv>

### **4.4 Commander, Navy Reserve Force (CNRF-009):**

- Email: [CNRF\\_PAO@us.navy.mil](mailto:CNRF_PAO@us.navy.mil)
- DSN 445-8500 or COMM 757-445-8500

## 5.0 Appendix B: BUMED Data Sheet

### APPENDIX B



#### BUMED DATA SHEET FOR CROSS-ORGANIZATIONAL LOA IN SUPPORT OF METU TRAVEL

1. The patient is an ACTIVE DUTY SERVICE MEMBER.

2. The patient is traveling from \_\_\_\_\_ to \_\_\_\_\_ for METU care on the first available MILITARY / COMMERCIAL (select one) flight.

Patient Name/SSN:

Email Address(es):

Phone Number(s):

Grade:

GOVCC Expiration Date:

GOVCC ACTIVATED:

Non-Medical Attendant Name (Spouse or Significant other)/SSN:

Physician's Recommendation Statement Required.

Email Address(es):

Phone Number(s):

Grade:

GOVCC Expiration Date:  
(If Applicable)

GOVCC ACTIVATED:

#### LODGING REQUIREMENTS FOR METU PATIENT:

Mandatory DTS/CTO Lodging Reservations must be utilized.

**NMC Portsmouth, VA:** The Navy Gateway Inn and Suites, Navy Lodge or the BEQ/BOQ will be utilized.

**Walter Reed National Military Medical Center, Bethesda, MD:** The BEQ/BOQ, Navy Lodge, Gateway Inn and Suites will be utilized.

**NMC San Diego, CA:** The BEQ/BOQ, Navy Lodge, Gateway Inn and Suites will be utilized.

**\*NOTE: For E-6 and above, Navy Lodge, Gateway Inn and Suites (Government Quarters) will be utilized.**

Non-availability statements from each lodging facility below are required if the member obtains other lodging. Lodging reimbursement will not exceed the maximum daily-authorized rate in DTS.

An economy or compact rental car is authorized (Bethesda excluded). Additional cost for an upgrade will not be reimbursed. POV must not exceed the cost of a plane ticket (plane comparison must be attached to DTS authorization). An E-Z pass may be required for bridges and tolls (authorized one round trip toll).

Failure to provide a liquidation claim within the allotted time will warrant contact with the traveler's Executive Officer.

BUMED must approve the authorization and voucher.

Service members and DoD civilian employees who are eligible to a Government Travel Charge Card (GTCC) must use their Individual Billed Account (IBA) when submitting a travel authorization and voucher. Member is authorized to travel to NMC Portsmouth, NMC San Diego Balboa or Walter Reed NMMC, MD only.

I (Patient) \_\_\_\_\_ certify that I understand and will comply with the above information.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approximate Dates (from/to):

Estimated Cost:

CO or XO's Name:

Email Addresses:

Phone Number(s):

3. TAD point of contact is \_\_\_\_\_, Navy Liaison, at (phone number) and (email address).

4. Travel claims must be submitted within 5 days upon return and liquidated. All vouchers must be liquidated prior to transfer or detaching.

5. BUMED funds command to MTF travel only. This request must be completed prior to LOA being issued for travel. The military member must provide a SSN to utilize DTS. Requesting official's signature is required. PII must be blackened out prior to uploading documents into DTS.

\_\_\_\_\_  
Requesting official signature, printed name and title

Date: \_\_\_\_\_

## 5.1 Appendix C: SECNAVINST 5300.30F

27 DEC 2018

### ORDER TO FOLLOW PREVENTIVE MEDICINE REQUIREMENTS

1. Because of the necessity to safeguard the overall health, welfare, safety, and reputation of this command and to ensure unit readiness and the ability of the unit to accomplish its mission, certain behavior and unsafe health procedures must be proscribed for members who are diagnosed as positive for bloodborne pathogen infections (Human Immunodeficiency Virus (HIV), chronic Hepatitis B Virus (HBV), or chronic Hepatitis C Virus (HCV)).
2. As a military member who has been diagnosed as positive for HIV, chronic HBV or HCV infection, you are hereby ordered to:
  - a. Verbally inform sexual partners that you are HIV, HBV, and/or HCV positive prior to engaging in sexual relations. This order extends to sexual relations with other military members, military dependents, civilian employees of Department of Defense components or any other persons;
  - b. Use proper methods according to medical counseling to prevent the transfer of body fluids during sexual relations, including the use of condoms, providing an adequate barrier (e.g., latex);
  - c. In the event that you require emergency care, inform personnel responding to your emergency that you are HIV, HBV, and/or HCV positive as soon as you are physically able to do so;
  - d. When seeking medical care, you may wish to inform the provider that you have HIV, HBV, and/or HCV so that the provider can use that information to optimize your evaluation and treatment;
  - e. Not donate blood, tissues, sperm, or other organs.
3. Violating the terms of this order may result in adverse administrative action or punishment under the Uniform Code of Military Justice for violation of a lawful order.

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Commanding Officer's Signature

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Date

**5.2 Appendix D: SECNAVINST 5300.30F**

27 Dec 2018

**ACKNOWLEDGEMENT**

I have read and understand the terms of this order and acknowledge that I have a duty to obey this order. I understand that I must inform sexual partners, including other military members, military dependents, civilian employees of Department of Defense components, or any other persons, that I am Human Immunodeficiency Virus (HIV), chronic Hepatitis B Virus (HBV) and/or Hepatitis C Virus (HCV) positive prior to sexual relations; that I must use proper methods to prevent the transfer of body fluids while engaging in sexual relations, including the use of condoms providing an adequate barrier; that if I need emergency care I shall inform personnel responding to my emergency that I am HIV, Hep B and/or Hep C positive as soon as I am physically able to do so; that when I seek medical or dental care I may wish to inform the provider that I have HIV, chronic HBV and/or HCV in order to optimize my evaluation and treatment; and that I must not donate blood, sperm, tissues, or other organs. I understand that violations of this order may result in adverse administrative actions or punishment under the Uniform Code of Military Justice for violation of a lawful order.

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date