



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

IN REPLY REFER TO  
BUMEDINST 6200.15A  
BUMED M9  
28 Jul 2016

BUMED INSTRUCTION 6200.15A

From: Chief, Bureau of Medicine and Surgery

Subj: SUSPENSION OF DIVING DUTY DURING PREGNANCY

Ref: (a) OPNAVINST 6000.1C  
(b) Manual of the Medical Department

1. Purpose. To provide guidance on suspension of diving duty for pregnant divers.
2. Cancellation. BUMEDINST 6200.15.
3. Scope. This instruction applies to all Navy and Marine Corps activities, ashore or afloat, who employ military and civilian divers and to all Ships and Stations having Medical Department personnel.
4. Background. Reference (a) prohibits diving by pregnant servicewomen. Medical and scientific evidence demonstrate that the hyperbaric environment may be hazardous to a fetus, potentially resulting in developmental anomalies or fetal death. These untoward fetal events may occur despite the absence of discernible maternal effects. Safe diving profiles that protect the fetus have not been developed. Factors related to the normal maternal-fetal circulation place the fetus at increased risk of injury, even if exposed to routine, "low risk" dive profiles performed by the mother. Therefore, pregnant divers should not dive or be occupationally exposed to a hyperbaric environment.
5. Action
  - a. During the initial Diving Medical Examination (DME), and upon periodic reexamination thereafter as required by reference (b), using DD Form 2807-1, Record of Medical History, and DD Form 2808, Record of Medical Examination, female divers must be counseled on the potential hazards to the fetus inherent in diving. This counseling must be documented on the DD Form 2808, block 73.
  - b. Female divers must be counseled regarding the risks to the fetus associated with diving while pregnant during each annual Periodic Health Assessment (PHA) in addition to the periodic Diving Medical Examination.
  - c. At the first presumptive sign of pregnancy (e.g., missed menstrual period), the female diver must present herself to a diving medicine representative or her diving supervisor. She must be temporarily suspended from diving until pregnancy is confirmed or an alternative diagnosis is

established. If pregnancy is confirmed, she must be medically suspended from diving duty until the pregnancy ends and she has been cleared by an Undersea Medical Officer (UMO) for return to diving duty post-partum.


d. Diving duty is strenuous, requiring strength and stamina. Pregnancy induces physiologic changes which persist for some time after the conclusion of pregnancy. Adequate reconditioning is essential before resuming diving duty after pregnancy. After conclusion of pregnancy, the diver must be screened by an UMO per reference (b), Chapter 15, article 15-102, who must document, in the health record, the diver's fitness to resume diving duty.

e. Assessment for return to diving duty after a pregnancy that terminates without a live birth (i.e., spontaneous abortion, miscarriage, etc.) must be performed by an UMO after appropriate laboratory testing and/or Obstetrics specialty evaluation to confirm pregnancy termination.

6. Records. Records created as a result of this instruction, regardless of media and format, must be managed per SECNAV M-5210.1 of January 2012.

7. Forms. The following forms are available for download from the DoD Forms Management Program Web site (<http://www.dtic.mil/whs/directives/forms/dd/ddforms2500-2999.htm>).

- a. DD Form 2807-1, Report of Medical History.
- b. DD Form 2808, Report of Medical Examination.

  
C. FORREST FAISON III

Releasability and distribution:

This instruction is cleared for public release and is available electronic only via the Navy Medicine Web site at: <http://www.med.navy.mil/Pages/default.aspx>