



DEPARTMENT OF THE NAVY
NAVY MEDICINE OPERATIONAL TRAINING CENTER
220 HOVEY ROAD
PENSACOLA, FLORIDA 32508-1047

IN REPLY REFER TO
NMOTCINST 6410.2
NAMI
26 Apr 2019

NAVMEDOPTRACTR INSTRUCTION 6410.2

Subj: SPECIAL BOARD OF FLIGHT SURGEONS

Ref: (a) MANMED Article 15-81, Change 126, of 12 Aug 2005

Encl: (1) Standard Special Board of Flight Surgeons Request Letter
(2) Summarization, Deliberation and Decision Letter of Special Board
(3) Minority Report Letter

1. Purpose. To publish guidelines and procedures for the conduct of the Special Board of Flight Surgeons and for the method of deliberation by the board.
2. Cancellation. NMOTCINST 1301.1K
3. Applicability. This instruction applies to the Naval Aerospace Medical Institute (NAMI), its components and activities.
4. Background. Reference (a) authorizes the Officer in Charge (OIC), Naval Aerospace Medical Institute (NAMI), to convene a Special Board of Flight Surgeons (SBFS). The purpose of the board is to provide special consultative services to assist the Chief, Bureau of Medicine and Surgery (BUMED) in evaluating naval aviation personnel as to their suitability to continue duty involving flying or other aviation related duties and in making a recommendation to Commander, Navy Personnel Command (CNPC) or the Commandant of the Marine Corps. Due to the significance of the board's findings to both the service and the member, the board process will consider all aspects of the patient's history and take into account such non-medical factors as military experience, proven accomplishments and ability, and the individual's best interest.
5. Convening of Special Board of Flight Surgeons
 - a. Requests for SBFS. All requests for SBFS will be received by the OIC and once reviewed will be routed as follows: clinical department, physical exams coordinator (Code 53PX); human performance department head (Code 53HN); the applicable clinical specialist; then returned to the human performance department head (Code 53HN). The format for the SBFS request can be found in enclosure (1). Prior to considering a SBFS, for any member, it is critical to ensure the member is fit for full naval service and is worldwide deployable. A copy of the member's physical evaluation board (PEB) results are required. The request will include member's name, rank, last four digits of social security number, unit or squadron address, flight surgeon contact, and all available clinical information to include the PEB results. In addition, requests will be accompanied by an endorsement from the requestor's commanding officer and any other components of the chain of command deemed appropriate.

b. Code 53HN will provide the NAMI OIC with a recommendation as to the appropriateness of convening the SBFS and, if indicated, a preferred convening date.

c. The NAMI OIC will approve or deny the convening of the SBFS and will notify appropriate codes and the clinical director of the NAMI OIC's decision regarding the SBFS request.

d. The clinical director will notify the SBFS coordinator within the Physical Evaluations Department of the SBFS for appropriate message preparation.

6. Composition of the Board. Membership on the SBFS will be by a published notice from the NAMI OIC and will consist of the following:

a. Voting Members

(1) Designated flight surgeons assigned to NAMI.

(2) Designated flight surgeons assigned to the immediate area may request, in writing, to become voting members of the board. Senior designated U.S. Navy Flight Surgeons assigned to commands not in the immediate area may request to become voting members of the board, provided video and audio telecommunication capability exists, sufficient to allow full visibility of the proceedings. The NAMI OIC will approve or disapprove the requests based on a review of the individual flight surgeon's credentials submitted as part of the original request.

b. Non-voting Members. Those Medical, Dental and Medical Service Corps officers appointed in writing as clinical consultants to the board from the staffs of NAMI and Naval Hospital Pensacola, or other appropriate commands. A designated naval aviator, naval flight officer, or naval aircrewman of equal or higher rank and experience as the individual being evaluated, and preferably from the same aviation community, will serve as an advisor to the SBFS for matters requiring airframe specific advice or comment.

c. Recording Secretary. A staff officer will be assigned as the recording secretary to the board to maintain all records and proceedings of the board.

7. Medical Advisors

a. Functions of Medical Advisors

(1) A flight surgeon will be appointed as the member's medical advisor for the period of time the member remains at NAMI.

(2) The medical advisor will interpret medical data, make comments and suggestions regarding the significance of the data, and provide moral support.

(3) The medical advisor will be present with the member during the case presentation and board deliberations. The medical advisor may participate in the voting phase if designated as a voting member.

b. Appointment Procedures

(1) Medical advisors will be assigned in coordination with the Residency in Aerospace Medicine (RAM) program director. Typically an aerospace resident will be assigned as the special board medical advisor unless no resident is available due to distant training obligations. The medical advisor nominated by the RAM program director will be appointed in writing by the NAMI OIC.

(2) Appointment of medical advisors will be on a rotational basis as determined by the RAM program director.

(3) Except for senior members of the board, all flight surgeon members of the board are eligible to be medical advisors.

(4) Advisors will normally be equal to or senior in rank to the member.

8. Board Proceedings. The following procedures and guidelines govern the conduct of the board during formal proceedings.

a. All cases appearing before the board will be prepared by the appropriate specialty department with the assistance of a RAM. Whenever possible, to develop presentation skills and leadership, the assigned RAM will present the case while under the direct supervision of the NAMI specialty department provider.

b. The assigned presenter will prepare a written resume of the case being presented to the board in a manner prescribed by the clinical director. The briefs will be prepared in such a manner to protect patient privacy and Health Insurance Portability and Accountability Act (HIPAA) rules.

c. Student flight surgeons attending the board proceedings may observe without comment during the periods in which the member is present. They will not participate in the deliberations of the board but may be allowed to ask questions only after the completion of all cases for the day.

d. Those present during the conduct of the special board proceedings will be only those qualified to be present and those granted special permission by the NAMI OIC. At all times, the requirements of security and confidentiality of information concerning the subject of the board must be maintained. Visitors to the board, who are neither flight surgeons, physicians nor other certified health professionals, are prohibited without the specific consent of the president of the board. No one will be admitted to the boardroom after the case presentation begins. The physical exams coordinator will ensure appropriate security is provided.

e. The board will convene in the auditorium of NAMI, Building 1954. The NAMI OIC will act as the presiding officer and president of the board. In the event of the OIC's absence, the OIC will designate in writing a senior flight surgeon who will act as the presiding officer. He will be joined at the central table by department heads of mental health, otorhinolaryngology, ophthalmology, internal medicine, physical evaluations, neurology, physical qualifications and special programs. The first row of the designated seating is reserved for the member, medical advisor, the recording secretary, the presenters of the case and visiting guests, i.e. squadron commanding officers. Other board members will occupy the second, third and fourth rows as required.

f. Following completion of the presentation, the subject of the SBFS will be provided an opportunity to make a statement. The nature of the statement will address motivation and career intentions, but will not serve as a rebuttal to medical findings. If present, the subject's commanding officer or designated representative will also be provided an opportunity to make a statement, which is intended to provide information related to the subject's performance to date, motivation and potential for future service within naval aviation.

g. Following any statements from the subject or command representative, both the subject and command representative will be escorted from the auditorium. The medical advisor will be permitted to remain and may engage in the discussion and deliberation phase. The medical advisor may participate in the voting phase if so designated.

h. Following the deliberation phase, a vote by ballot will be completed. Due to the variances in aerospace medicine experience within the voting membership, a weighted voting process is utilized. All members of the NAMI department head table will be given three (3) points voting weight; all NAMI staff and aerospace medicine board certified and eligible voting members will be given two (2) points voting weight; and all other qualified voting members will be given one (1) point voting weight. The designated recorder will tabulate the votes and present them to the presiding officer. The subject and the command representative will return to the auditorium, where the presiding officer will advise the parties of the recommendation. Comments or statements from the subject or command representative will be permitted, but will not constitute an opportunity for reconsideration of the recommendations. The presiding officer will make it clear to the member that the SBFS is only a recommendation to the fleet and up the chain of command. The final determination will be provided in writing at a later time.

9. Summarization of Case Presentation

a. Enclosure (2) will be used to summarize all case presentations and SBFS's deliberations and decisions.

b. Enclosure (2) will include a precise history, adequate to give a clear picture of the member's situation. The diagnostic evaluation section may be abbreviated, but will contain a summary from each specialty of the pertinent findings bearing on the case. Finally, recommendations of the board will be presented in a manner sufficiently clear to allow subsequent reviewers to understand the deliberation leading to the special board's findings and recommendations in the case.

c. The completed specialty consults provide more detailed information if the reviewer desires it. More detailed discussion, with appropriate references to the literature or to precedent, may be included in the individual specialty consultation write-ups if the examining specialist deems it advisable.

d. When directed by the NAMI OIC, a minority report, enclosure (3), will be prepared and submitted with the majority report to higher authority for consideration when there is greater than a 25 percent disparity in the voting board members results. The submission of a minority report will generally be required when there is sufficient debate over the proper disposition of the case, requiring further assessment from a non-aeromedical perspective by BUMED or Bureau of Naval Personnel (BUPERS).

e. Upon completion of the SBFS proceedings, NAMI will advise the Commanding Officer (CO), Navy Medicine Operational Training Center (NMOTC), BUMED, CNPC, Commandant of the Marine Corps (if member is a United States Marine), and the CO of the requesting command of its recommendations. The communication will clearly indicate that the board's recommendations will require endorsement and approval.

f. Within 10 working days of completion of the SBFS, an official copy of the proceedings, enclosure (2), including all pertinent data, will be forwarded from the NAMI OIC, to the appropriate waiver authority for final action with a copy to CO NMOTC and BUMED (AEROMED).

g. If the NAMI OIC determines through his or her knowledge, timing, and expertise that the SBFS did not adequately take into consideration all operational aspects of the case, the OIC may negatively endorse the proceedings and elect to add applicable endorsees (e.g., Commander, Naval Air Forces) for their recommendations and concurrence or non-concurrence with the SBFS recommendations. This endorsement would be in addition to the submission of a minority report.

10. Action. The physical exams coordinator is responsible for administrative support for the SBFS. This includes:

a. Preparation of necessary messages notifying command and member of reporting and convening date of SBFS.

b. Reserving the auditorium in building 1954, and ensuring maintenance of equipment and cleanliness of the spaces.

c. Receipt and custody of medical records.

d. Scheduling and coordination of all appointments.

e. Preparing appointment letters for the medical advisors.

f. Typing and distribution of the report of the board.

- g. Preparation of necessary messages relative to the findings of the board.

11. Records Management

a. Records created as a result of this instruction, regardless of media and format, must be maintained and dispositioned according to the records disposition schedules found on the Directives and Records Management Division (DRMD) portal page:
<https://portal.secnav.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 your local Records Manager or the DRMD program office.

12. Review and Effective Date. Per OPNAVINST 5215.17A, NMOTC will review this instruction annually on the anniversary of its effective date to ensure applicability, currency, and consistency with Federal, DoD, SECNAV and Navy policy and statutory authority using OPNAV 5215/40, Review of Instruction. This instruction will automatically expire 5 years after effective date unless reissued or cancelled prior to the 5-year anniversary date, or an extension has been granted.



T. C. TOOLE

Releasability and distribution:

This instruction is cleared for public release and is available electronically only via NMOTC Web site, <https://esportal.med.navy.mil/sites/NMOTC/dfa/ADMINVER1/instructions/Shared%20Documents/Forms/Listing%20of%20instructions.aspx>

NMOTCINST 6410.2
26 Apr 2019

1301
DATE

From: Local Flight Surgeon, Sailor, I. M., Rank, MC, USN
To: Officer in Charge, Naval Aerospace Medical Institute, 340 Hulse Road, Pensacola, FL
32508-1092
Via: Department Head, Human Performance (Code 53HN), Naval Aerospace Medical
Institute, 340 Hulse Road, Pensacola, FL 32508-1092
Subj: SPECIAL BOARD OF FLIGHT SURGEONS REQUEST REGARDING (SNM),
SERVICE, DESIGNATOR

1. Demographic information including the member's name, rank, SSN, unit or squadron address and flight surgeon's point of contact information to include military email.
2. Copy of member's Physical Evaluation Board (PEB) results, which qualify the member at fit for full Naval service and as worldwide deployable.
3. Document a narrative summary conveying why the member was aeromedically grounded and a specific appeal of why the case warrants consideration by a special board.
4. With member's written consent, the request will include copies of all relevant clinic visits, specialty consultations, laboratory reports, imaging reports, and other special studies that related to the SBFS candidate's history that have not been include in any previous waiver request.

I. M. SAILOR

Enclosure (1)

1301
DATE

From: Special Board of Flight Surgeon Convening Authority
To: Commander, Navy Personnel Command or Commandant of the Marine Corps (as appropriate)

Subj: SUMMARIZATION OF CASE PRESENTATION AND SPECIAL BOARD OF FLIGHT SURGEONS' DELIBERATION AND DECISION REGARDING (SNM), SERVICE, DESIGNATOR

Encl: (1) Minority Report (if required)

1. Purpose: The purpose of the Special Board of Flight Surgeons was to determine the flight status of this _____, referred for evaluation of _____.
2. History of Complaint(s):
3. Diagnostic Evaluation (include PQ or NPQ, AA or NAA)
4. Internal Medicine Findings:
5. Psychiatry Findings:
6. Ophthalmology Findings:
7. Otorhinolaryngology Findings:
8. Other Specialty Findings (as required):
9. Summary of Deliberation and Discussion:
10. Recommendations:

I. M. SAILOR

Copy to:
CO NMOTC
BUMED (AEROMED)

1301
DATE

From: Special Board of Flight Surgeon Convening Authority
To: Commander, Navy Personnel Command or Commandant of the Marine Corps (as appropriate)

Subj: MINORITY REPORT FROM SPECIAL BOARD OF FLIGHT SURGEONS
REGARDING (SNM), SERVICE, DESIGNATOR

1. The following minority report outlines the discussion and deliberation of the Special Board of Flight Surgeon considering SNM and reflects the position of a significant minority. Significant minority is defined as greater than twenty-five per cent of the voting members of the board.

2. Discussion and Deliberation:

3. Recommendations:

I. M. SAILOR