BUMED INSTRUCTION 5450.183

From: Chief, Bureau of Medicine and Surgery

Subj: MISSION, FUNCTIONS, AND TASKS OF NAVAL MEDICAL FORCES PACIFIC SAN DIEGO, CALIFORNIA

Ref: (a) SECNAV WASHINGTON DC 131451Z Jul 05 (ALNAV 055/05)
(b) OPNAVINST 1000.16L
(c) BUMEDINST 5450.165C
(d) BUMEDINST 5450.174

Encl: (1) Functions and Tasks of Naval Medical Forces Pacific

1. Purpose. To publish the functions and tasks of Naval Medical Forces Pacific (NAVMEDFORPAC) San Diego, California (CA) under the mission established by references (a) through (c).

2. Mission. NAVMEDFORPAC San Diego, CA provides command and control of Navy Medicine Readiness and Training Commands, subordinate Navy Medicine Readiness and Training Units, and assigned operational platforms to be forward deployable, fully trained, properly manned, and capably equipped to execute operational medicine responsibilities in support of warfighter requirements. Provides command and control of all Navy Medicine Research and Development Commands in alignment with Navy Medicine priorities.

3. Status and Command Relationships. NAVMEDFORPAC San Diego, CA is an echelon 3 shore-based activity in an active (fully operational) status under a commander.

   a. Command

      Commander
      Naval Medical Forces Pacific
      4170 Norman Scott Road
      San Diego, CA 92135

      (SNDL: FH3 (UIC: 68906))
      (PLA: NAVMEDFORPAC SAN DIEGO CA)
      (Activity Code: 4165-100)
Echelon

1 Chief of Naval Operations (CNO)
2 Chief, Bureau of Medicine and Surgery (BUMED)
3 Commander, NAVMEDFORPAC San Diego, CA

b. Area Coordination

(1) Commander, Navy Region Southwest

(2) Commander, Naval Forces Marianas

(3) Commander, Fleet Activities Yokosuka, Japan

(4) Commander, Fleet Activities Okinawa, Japan

(5) Commanding Officer, Naval Base San Diego, CA

4. Commanded Activities

Echelon Chain of Command

4 Commander, Navy Medicine Readiness and Training Command San Diego, CA
5 Commanding Officer, Expeditionary Medical Facility 150 Bravo San Diego, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Naval Base San Diego, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit North Island, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Marine Corps Recruit Depot San Diego, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Point Loma, CA
4 Commander, Navy Medicine Readiness and Training Command Camp Pendleton, CA
5 Commanding Officer, Expeditionary Medical Facility 150 Alpha Camp Pendleton, CA
5 Commanding Officer, Expeditionary Medical Facility Camp Pendleton, CA Reserve Component
5 Officer in Charge, Navy Medicine Readiness and Training Unit Port Hueneme, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Yuma, AZ
4 Commanding Officer, Navy Medicine Readiness and Training Command Twenty-Nine Palms, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit China Lake, CA
4 Commanding Officer, Navy Medicine Readiness and Training Command Pearl Harbor, HI
4 Commanding Officer, Navy Medicine Readiness and Training Command Bremerton, WA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Bangor, WA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Everett, WA
4 Commanding Officer, Navy Medicine Readiness and Training Command Oak Harbor, WA
4 Commanding Officer, Navy Medicine Readiness and Training Command Lemoore, CA
5 Officer in Charge, Navy Medicine Administrative Unit Monterey, CA
5 Officer in Charge, Navy Medicine Readiness and Training Unit Fallon, NV
4 Commanding Officer, United States Navy Medicine Readiness and Training Command Guam
4 Commanding Officer, United States Navy Medicine Readiness and Training Command Yokosuka, Japan
5 Officer in Charge, United States Navy Medicine Readiness and Training Unit Iwakuni, Japan
5 Officer in Charge, United States Navy Medicine Readiness and Training Unit Atsugi, Japan
5 Officer in Charge, United States Navy Medicine Readiness and Training Unit Sasebo, Japan
5 Officer in Charge, United States Navy Medicine Readiness and Training Unit Diego Garcia
4 Commanding Officer, United States Navy Medicine Readiness and Training Command Okinawa, Japan
4 Commander, Naval Medical Research Center Silver Spring, MD
5 Commanding Officer, Naval Medical Research Unit San Antonio, TX
5 Commanding Officer, Naval Submarine Medical Research Laboratory New London, CT
5 Commanding Officer, Naval Medical Research Unit Dayton, Wright-Patterson Air Force Base, OH
5 Commanding Officer, United States Naval Medical Research Unit 2, United States Naval Medical Research Center Asia, Republic of Singapore
5 Commanding Officer, United States Naval Medical Research Unit 3 Sigonella, Italy
5 Commanding Officer, United States Naval Medical Research Unit 6 Lima, Peru
5 Commanding Officer, Naval Health Research Center San Diego, CA

5. **Action.** In accomplishing the assigned mission, Commander, NAVMEDFORPAC must ensure performance of the functions in enclosure (1). Send recommended changes via the chain of command to Chief, BUMED per reference (d).

6. **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 Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records
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 Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division program office.

7. Review and Effective Date. Per OPNAVINST 5215.17A, Assistant Deputy Chief, Manpower and Personnel (BUMED-M1B) will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense (DoD), Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will be in effect for 10 years, unless revised or cancelled in the interim, and will be reissued by the 10-year anniversary date if it is still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

8. Information Management Control. The reports required in enclosure (1), subparagraphs 1u and 1y of this instruction are exempt from reports control per Secretary of the Navy Manual 5214.1 of December 2005, part IV, subparagraph 7j.

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site, http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx
FUNCTIONS AND TASKS OF NAVAL MEDICAL FORCES PACIFIC

1. As directed by the Chief, BUMED, generates naval medical (NAVMED) forces ready to execute service and operational missions in response to warfighter requirements.

   a. Executes and monitors operational medical and dental force generation.

   b. Manages and monitors total force policies and programs affecting Active, Reserve, and civilian personnel in support of medical and dental fleet readiness.

   c. Supports U. S. Fleet Forces (COMUSFLTFORCOM); Commander, Pacific Fleet (COMPACFLT); Marine Forces Command (MARFORCOM); and Marine Corps Forces Pacific (MARFORPAC) training policies, requirements, processes, programs, and alignments as they pertain to fleet medical readiness.

   d. Assesses and ensures the readiness, capability effectiveness, and mission performance of subordinate commands.

   e. Executes funds for assigned mission, functions, and tasks of all subordinate commands.

   f. Manages and monitors operational medical requirements in support of COMUSFLTFORCOM, COMPACFLT, MARFORCOM, and MARFORPAC, medical partnerships, collaborative bodies, and any applicable warfighting development centers.

   g. Assists in development of all NAVMED platform, system, personnel, training, and capability requirements in support of COMUSFLTFORCOM, COMPACFLT, MARFORCOM, MARFORPAC planning, programming, budgeting, and execution process.

   h. Assesses and manages execution of readiness and training costs and identifies associated risks for sustained operationally-ready medical forces.

   i. Employs models and management metrics for monitoring efficiency, process improvements, and cost reduction objectives.

   j. Monitors medical force operational effectiveness measures and conducts analyses of doctrine-driven unit-level proficiency and training.

   k. Supports development of concept of operations, doctrine, and transformation concepts for employment of NAVMED forces and mission-essential, task-based capabilities.

   l. Exercises administrative control of Navy personnel assigned to a position on the NAVMEDFORPAC manpower document, ensuring the proper assignment of uniformed personnel, in coordination with Bureau of Naval Personnel.
m. Provides oversight and management of personnel aligned to Navy Medicine Readiness and Training Commands or Navy Medicine Readiness and Training Units subordinate commands and platform assignments using enterprise-directed systems.

n. Coordinates mobilizations and demobilizations in connection with operational deployment of NAVMED and dental personnel.

o. Responsible for authority, direction, and control over the Navy Medicine Readiness and Training Service commanders, and after consultation with the Director, Defense Health Agency (DHA), may remove a Service commander from that position.

p. Supports the Navy’s budget submitting office 18, planning and allocation of funding to accomplish force provider, Service-support provider, education and training, and capabilities development functions aligned to NAVMEDFORPAC.

(1) Oversees financial and business operations of the Navy Medicine Readiness and Training Command. Advises the commander on issues pertaining to financial management, business operations, and financial data.

(2) Maintains accounting systems including appropriation, civilian payroll preparation, and travel processing.

(3) Maintains the official appropriation accounting records for the region ensuring general ledger accounting is performed within the guidelines of the DoD financial management regulations.

(4) Formulates and executes the command’s expense operating budget.

q. Ensures the effective and efficient execution of subordinate commands functions and tasks.

r. Plans and executes operational readiness exercises and makes certification recommendations to BUMED for deployable medical teams and units.

s. Serves as liaison between Navy Medicine and COMUSFLTFORCOM, COMPACFLT, MARFORCOM, MARFORPAC, and combatant commanders.

t. Serves as liaison with CNO, Commander, Navy Installations Command, Naval Facilities Engineering Command, Marine Corps Installations Command, and Army Corps of Engineers for facility management efforts by coordinating the special projects, leasing, military construction development, service contracts, engineering studies, real property, environmental readiness, and public works management programs pertaining to the Navy.
u. Monitors and reports key metrics to enable assessment of Navy Medicine mission performance and inform strategic planning and assessment processes through the Defense Readiness Reporting System (DRRS).

v. Coordinates logistical and facilities support for operational deployment of NAVMED forces.

w. Monitors and enables medical training and clinical practice opportunities to ensure currency and proficiency levels required to meet operational force medical requirements of combatant commands.

x. Coordinates with COMUSFLTFORCOM, COMPACFLT, MARFORCOM, and MARFORPAC to support medical training requirements, plans, and policy recommendations to generate ready medical forces at the team, unit, and group level in alignment with the fleet training continuum.

y. Monitors and reports to higher headquarters as to employability, deployability, dwell, and home tempo of NAVMED forces to meet operational requirements through the Expeditionary Medicine Platform Augmentation Readiness Training System (EMPARTS).

z. Supports process improvement initiatives through the assessment and evaluation of operations and programs.

aa. Promotes and maintains ethical standards of conduct for health care and research of all disciplines in compliance with standards of Joint Ethics Regulation, Code of Federal Regulations, agency-specific directives, and other required accreditation.

2. As directed by the Chief, BUMED, monitors integrated medical platform, readiness and personnel capability requirements.

a. Supports and monitors professional and technical guidance for design, construction, manning, and equipping deployable medical capabilities, ashore and afloat.

b. Supports and monitors the development and implementation of lifecycle maintenance policies within new medical capabilities with associated acquisition authority.

c. Supports and monitors information technology (IT) services provided by DHA and Navy and Marine Corps Intranet to ensure readiness mission IT requirements (Secret Internet Protocol Router (SIPR) and Non-classified Internet Protocol Router (NIPR)) are captured, clearly communicated, and service-levels are maintained.
d. Provides consultation and insight on cybersecurity and emerging IT solutions in support of operational medical forces and mission support.

e. Acts as liaison between Navy Medicine Readiness and Training Commands and Navy Medicine Readiness and Training Units, Operational Medical Forces within area of responsibility, and Reserve forces DHA IT service provider (J6).

f. Implements and maintains health care, directives, and publications in operational and installation-specific NAVMED activities separate from medical treatment facility (MTF) clinical and healthcare services and business operations.

3. As directed by the Chief, BUMED, executes higher level healthcare policy, directives, and publications to facilitate the provision of medical and dental services in support of fleet, combatant commanders, and naval installation medical functions.

a. Supports humanitarian assistance in disasters, security incidents, emergencies, and associated exercises, as directed by higher authority.

b. Exercises authority, direction, and control over all regionally-assigned Navy Medicine Readiness and Training Commands and Navy Medicine Readiness and Training Units shore-based activities separate from MTF clinical and healthcare services and business operations as assigned by the CNO.

c. Performs operational and installation-specific medical support functions that are separate from MTF healthcare delivery and operations and business operations as assigned by the CNO.

d. Operationalizes and monitors healthcare policy regarding provision of medical and dental services for the Fleet, combatant commanders, and naval installation medical functions separate from MTF clinical and healthcare services and business operations for Navy and Marine Corps personnel, and other uniformed Services personnel.

e. Implements policies and directives to support safety, occupational, environmental health, emergency management, and industrial hygiene programs in operational and installation-specific NAVMED activities.

f. Conducts and supports inspections of operational and installation-specific NAVMED activities separate from MTF clinical and healthcare services and business operations; and provides medical inspection assistance to commanders within the Navy and Marine Corps upon request.

g. Coordinates with civil authorities, the DHA, and the Services in matters pertaining to public health, disasters, and other emergencies.
h. Supports the Navy’s global health engagement activities and requirements to support DoD’s security cooperation strategies to build capabilities and cooperative relationships with allies and other international partners.

i. Oversees programmatic compliance of Navy-specific medical readiness programs pertaining to disability and readiness evaluations that directly impact operational assignments.

4. As directed by the Chief, BUMED, monitors the technical readiness of assigned medical force personnel.
   a. Provides oversight of professional certifications and credentials.
   b. Provides oversight and management of education and training in support of operational medicine and readiness.
   c. Provides oversight and management of Navy-specific professional development programs such as Independent Duty Corpsmen.

5. As directed by the Chief, BUMED, monitors Navy Medicine research, development, testing and evaluation programs that enhance the health, safety and readiness to Navy and Marine Corps personnel.
   a. Provides oversight of basic and applied research competence in operational and undersea medicine, infectious diseases, bone marrow research, and biological defense research directly related to military requirements and operational needs.
   b. Provides oversight to basic biomedical research in areas of military importance to develop knowledge in anticipation of future requirements.

6. As directed by the Chief, BUMED, assist the commander in Reserve matters and provides administrative support to Reserve Component personnel assigned to the NAVMEDFORPAC area of responsibility.
   a. Coordinates and forwards all requests for contributory support to BUMED for validation and advertisement to the Reserve medical community.
   b. Facilitates supported command and Reserve interaction for planning mission support and assists with the command plans operations medical intelligence responsibilities, as required.
   c. Coordinates the credentialing of Reserve augmentation personnel.
   d. Coordinates and consolidates command submissions of the annual Reserve Operational Support Plan via the Navy Reserve Order Writing System Planning Module to include active
duty training, active duty training-continuing medical education, inactive duty training travel, annual training, active duty for special work, and additional drill funding requirements.

e. Participates in the unit deployment center operations as directed. In addition, provides the commander with adaptive medical capability, to include medical and dental readiness support for Active and personnel as directed, without additional lead-time where appropriate Reserve personnel, Navy funding is available.