



DEPARTMENT OF THE NAVY

BUREAU OF MEDICINE AND SURGERY
WASHINGTON, D.C. 20372-5120

IN REPLY REFER TO
BUMEDINST 5353.2
BUMED-34
21 Feb 90

BUMED INSTRUCTION 5353.2

From: Chief, Bureau of Medicine and Surgery

Subj: ACTIVITY PROFILE REPORT FOR NAVY ALCOHOL REHABILITATION
DEPARTMENTS

Ref: (a) OPNAVINST 5350.4A

Encl: (1) Sample of NAVMED 5353/1, Activity Profile
(2) Instructions for preparing NAVMED 5353/1

1. Purpose. To implement a system of monitoring specific operational and treatment aspects of the Navy's alcohol rehabilitation departments (ARDs) that will ensure compliance with the requirements prescribed in reference (a). This revision updates the reporting procedure and modifies the form.

2. Cancellation. NAVMEDCOMINST 5353.1A

3. Scope. Applies to all addressees providing Level III alcoholism rehabilitation services at ARDs, as defined in reference (a), to active duty, dependents, or other eligible beneficiaries.

4. Background. The Chief, Bureau of Medicine and Surgery (BUMED) has been tasked by reference (a) to develop, implement, and monitor specific aspects of the Navy's Alcohol Abuse Program. BUMED must maintain an accurate data base on specific operational and medical aspects of Navy ARDs. For example, manpower requirements and patient capabilities must be periodically monitored to ensure reports to higher authority are as factual as possible. This feeder report will be the prime source document in the preparation of such reports. BUMED has standardized the reporting procedure and the data elements required to ensure an accurate and timely submission of subject report, enclosure (1). Enclosure (2) provides instructions for preparing NAVMED 5353/1.

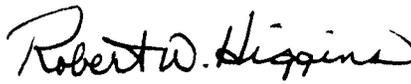
5. Action. Addressees will submit the Activity Profile Report directly to MED-342, Navy Department, Washington, DC 20372-5120, by the fifteenth working day following the end of each fiscal quarter. When an activity is decommissioned or for any reason discontinues the provision of alcoholism rehabilitation, the report submitted for the last operating period will be marked FINAL REPORT. This new report form is to be first submitted at the end of the second quarter for FY 90, which ends 31 March 1990, and then quarterly thereafter.



0510LD0548840

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6. Report and Form. Report control symbol MED 5353-4, Activity Profile Report, has been assigned to the requirement in paragraph 5. This report has been approved by the Chief, Bureau of Medicine and Surgery for 3 years only from the date of this instruction. NAVMED 5353/1 (Rev. 12-89), Activity Profile, is available from MED-342.


ROBERT W. HIGGINS
Acting

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SAMPLE OF NAVMED 5353/1, ACTIVITY PROFILE

ACTIVITY PROFILE		BUMEDINST 5353.2 Report Symbol MED 5353-4	
UNIT NAME	<u>ARD Anywhere</u>	3rd	QUARTER FY <u>90</u>
ADDRESS	<u>CO, NAVHOSP Kalamazoo, MI 26301</u>		
TELEPHONE - AUTOVON	<u>632-4343</u>	COMMERCIAL (721)	<u>892-4343</u>
UIC NO	<u>68013</u>	ADMITS NO	_____

BLOCK I		AUTHORIZED STAFFING				
MILITARY:						
BSC	BILLET TITLE	NOBC PRI	NEC SEC	DS RATE GS	FY	
A45020	ADMIN MED SVC/CH OF SVC	0800		2300I	1	
A45040	CHARGE NURSE ARS/ARD	0940		2900J	1	
A45110	ALCOHOL TREATMENT SPECIALIST		9519	FTGC	1	
A45130	ALCOHOL TREATMENT SPECIALIST		9519	EM1	1	
A45150	ALCOHOL TREATMENT SPECIALIST		9519	STS2	1	
CIVILIAN:						
A45103	COUNSELOR ALCOHOL			GS-00185-09	1	
A45113	COUNSELOR FAMILY			GS-00185-07	1	
A45123	SECRETARY/TYPING			GS-00318-05	1	

BLOCK II		ONBOARD STAFFING					
MILITARY:							
BSC	BILLET TITLE	NOBC/NEC PRI/SEC	DS RATE GS	NAME	PRD	PROJECTED RELIEF (NAME AND DATE)	
A45110	ALCOHOL TREATMENT SPEC	9519	FTGC	JOHN DOE	1286	0187	
A45020	ADMIN MED SVCS/CH OF SVC	0800	2300J	JOHN DOE II	0186	0286	
CIVILIAN:							
A45113	COUNSELOR ALCOHOL		GS-00185-07	JOHN DOE III			
A45123	SECRETARY/TYPING		GS-00318-05	JOHN DOE IV			

INSTRUCTIONS FOR PREPARING NAVMED 5353/1

1. Submit the Activity Profile Report quarterly to BUMED MED-342, Navy Department, Washington, DC 20372-5120. Activities are to type all entries on the report.

a. The first block (unnumbered) is self-explanatory.

b. Block I. - Authorized Staffing. To ensure accuracy, obtain information for this block from your manpower department. (See example on enclosure (1).) Fill in this block on each report.

c. Block II. - Onboard Staffing. Provide information on personnel currently onboard. (See example on enclosure (1).) Fill in this block on each report.

d. Block III. - Patient Capabilities. This block is self-explanatory. (See example on enclosure (1).) Fill in this block on each report. Be sure the number of patients at the beginning of the quarter plus the number of patients entered during the quarter minus total patients discharged equals number of patients in treatment at the end of the quarter.

e. Block IV. - Alcohol Patient Demographics. Provide requested information on all patients discharged during the quarter (both those completing treatment and those discharged early) who were being treated for alcoholism. Make sure the total number of patients reported in this block plus those in block V equal the total discharged in block III.

f. Block V. - Obesity Patient Demographics. Provide requested information on all patients discharged during the quarter (both those completing treatment and those discharged early) who were being treated for obesity.

g. Block VI. - Transportation. Provide requested information on all authorized vehicles assigned to the ARD.

h. Block VII. - Comments. This block is provided for your use in communicating any questions or concerns directly to BUMED regarding the ARD.