



DEPARTMENT OF THE NAVY  
BUREAU OF MEDICINE AND SURGERY  
WASHINGTON, D.C. 20372

IN REPLY REFER TO  
BUMEDINST 6120.20B CH-1  
BUMED-00C7  
3 February 1982

BUMED INSTRUCTION 6120.20B CHANGE TRANSMITTAL 1

From: Chief, Bureau of Medicine and Surgery  
To: Ships and Stations Having Medical Personnel

Subj: Competence for duty examinations, evaluations of sobriety,  
and other bodily views and intrusions performed by medical  
personnel

Encl: (1) Revised enclosure (1) to basic instruction

1. Purpose. To promulgate revised enclosure (1), Competence for Duty Examination (NAVMED 6120/1, rev. 1-82). This change removes the requirement for Article 31, UCMJ warnings to be given in connection with competence for duty examinations.

2. Action. Remove present enclosure (1) to basic instruction and insert revised enclosure (1). Destroy existing stocks of NAVMED 6120/1 (rev. 3-81).

3. Form. NAVMED 6120/1 (rev. 1-82), Competence for Duty Examination (encl (1)), may be reproduced locally until available through Cog 1I stock points of the Navy Supply System.

4. Cancellation. This change transmittal is canceled upon completion of the required action.

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BUMEDINST 6120.20B  
BUMED-00C7  
28 September 1981

BUMED INSTRUCTION 6120.20B

From: Chief, Bureau of Medicine and Surgery  
To: Ships and Stations Having Medical Personnel

Subj: Competence for duty examinations, evaluations of sobriety,  
and other bodily views and intrusions performed by medical  
personnel

Ref: (a) SECNAVINST 5820.7  
(b) OPNAVINST 11200.5B

(A)  
(A)

Encl: (1) (Sample) NAVMED 6120/1 (Rev. 3-81), Competence for  
duty examination

(R)

1. Purpose. To provide revised instructions concerning the use  
of NAVMED 6120/1, Competence for Duty Examination, and to provide  
guidance concerning evaluations of sobriety and bodily views and  
intrusions.

(R)

2. Cancellation. BUMEDINST 6120.20A.

3. Background. In instances of possible intoxication, drug  
abuse, or adverse reactions to medications, there may be a need  
to evaluate a person's sobriety to determine whether the person  
is competent to perform duty, to operate a motor vehicle, or to  
perform other functions. NAVMED 6120/1 is designed to assist in  
such instances, since medical personnel often assist commanding  
officers, officers in charge, civilian employees' supervisors,  
and other proper authority in ascertaining the degree of sobriety.  
Medical personnel are also requested to assist in accomplishing  
views of the human body or bodily intrusions for reasons of  
military justice.

(R)

4. Policy

(A)

a. An evaluation of sobriety can have many legal and adminis-  
trative ramifications. It must be carefully made. The admissi-  
bility of evidence gained from such an evaluation is not a matter  
for Medical Department personnel to decide. No evidentiary privi-  
lege attaches to the information. Medical personnel can legally  
be required to provide a complete report of their findings to the  
requesting authority without the consent of the patient. Subject  
to the requirements of this instruction, medical personnel shall  
cooperate with law enforcement personnel and other proper  
authorities in evaluating sobriety, determining competence for  
duty, making bodily views, and accomplishing bodily intrusions  
without regard to the legal competence of the evidence to be  
obtained.

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b. In instances of need for samples of body fluids for therapeutic purposes, such samples may be drawn and may be used both for medical purposes and appropriate evidentiary purposes.

c. For most competence for duty examinations, clinical observation alone is sufficient. Drawing samples of body fluids for such purposes is discouraged.

d. If samples of body fluids are requested by law enforcement personnel or other authority and there is no medical necessity for them, medical personnel may assist in drawing the samples, subject to the following restrictions:

(1) Except when a valid search warrant or command authorization has been issued, or when law enforcement officials indicate that a warrant or command authorization is not required (such as when delay to obtain a warrant could result in destruction of evidence that it is reasonably anticipated will be found), medical personnel shall not assist in the taking of samples of body fluids against a person's will.

(2) Military medical personnel shall not assist in acquiring evidence (whether by clinical observation or the taking of samples) solely for the purpose of enforcing or executing local, State, or Federal civil laws. Doing so would contravene the posse comitatus policy expressed in reference (a). However, the traffic safety program contained in reference (b) provides a legitimate military purpose for drawing samples of body fluids to determine the sobriety of an individual when the request for such determination has arisen from such individual's control of a motor vehicle on a military installation, or off the installation if the individual is a service member or resident of the military installation. Therefore, medical assistance does not generally violate the posse comitatus policy.

(3) Samples of body fluids shall not be taken if, in the opinion of the physician, doing so would endanger the life of the patient.

e. All views of or intrusions into the body performed by Medical Department personnel pursuant to this instruction shall be accomplished with due regard for the individual's privacy and, wherever possible, by a medical officer.

R) 5. Action

a. Medical Department personnel shall assist in executing views of or intrusions into the body in conformance with the policies set forth above when so requested by competent authority.

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b. Addressees shall use NAVMED 6120/1 in accordance with the instructions on the form and the requirements of this instruction to record the results of competence for duty examinations and evaluations of sobriety when requested by proper authority. (A sample of NAVMED 6120/1 is provided as enclosure (1)). Previous editions of NAVMED 6120/1 are obsolete.

c. Addressees shall consult with the nearest staff judge advocate or Naval Legal Service Office regarding questions of a legal nature arising out of the implementation of this instruction.

6. Form. NAVMED 6120/1, Competence for Duty Examination, is available from the Cog 1I stock points of the Navy Supply System.

  
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**COMPETENCE FOR DUTY EXAMINATION**  
**NAVMED 6120/1 (REV. 1-82)**

INSTRUCTIONS FOR THE USE AND PURPOSE OF THIS FORM ARE CONTAINED IN BUMEDINST 6120.20 SERIES.  
 THIS FORM SHALL NOT BE USED FOR PROCEDURES PERFORMED FOR CLINICAL OR THERAPY PURPOSES.

**DEFINITION OF COMPETENCE FOR DUTY**

**FOR PERSONS IN THE NAVAL SERVICE:** The ability to perform fully the naval duties to which the individual normally would be assigned. (Note: A person who has indulged in intoxicating beverages, narcotics or dangerous drugs to such an extent as to impair sensibly the rational and full exercise of his mental and physical faculties cannot be entrusted with the duties incident to naval service. The fact that the person is in a patient, leave, or liberty status is immaterial to the determination of his competence to perform his naval duties.)

**FOR ALL OTHERS:** The mental and physical ability to perform fully any task or service which the individual may normally be expected to perform.

**INSTRUCTIONS**

1. Items 1-12 shall be completed in duplicate by the commanding officer or other proper authority requesting examination.
2. Items 13-48 shall be completed by medical officer conducting examination. Under item 13, History, include information provided by examinee as to ingestion and quantity of alcoholic beverage, narcotic, drug substance, or food, and time taken. Note any evidence of disease or injury (other than the condition promoting this examination) in item 16.
3. When conducting an examination for competence for duty and individual is accused or suspected of an offense, comply with BuMedInst 6120.20 series.
4. All treatment provided at the time of examination shall be entered on form NAVMED 6150/3, Sick Call Treatment Record.

**A. REQUEST FOR EXAMINATION**

1. TO:	2. DATE	3. TIME (Hours)
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It is requested that a physical examination be given the following individual to determine competence for duty.

4. NAME (Last, first, middle)	5. GRADE OR RATE	6. DUTY STATION
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7. REASON FOR REFERRAL

Check here if laboratory analysis is desired.

8. SIGNATURE (Requester)	9. GRADE OR RATE	10. TITLE
11. NAME OF REQUESTER (Type or print in ink)		12. DUTY STATION

**d. CLINICAL EXAMINATION**

13. HISTORY

14. GENERAL APPEARANCE (Include appearance of clothing)	15. MENTAL STATE
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16. DISEASES OR INJURIES (Other than the condition prompting this examination, per inst. 2 above)

17. TEMPERATURE	18. PULSE (Rate and character)
19. BLOOD PRESSURE	
20. FACE (Flushed, pallid, cyanotic)	21. TONGUE
23. SKIN (Warm, cool, moist, dry, pale)	22. BREATH
25. EYES (Size of pupils, reaction to light, conjunctivae, etc.)	24. SPEECH (Thick, slurred, ability to repeat words such as Merciful, Pedestrian, Peter Piper)

26. OTHER CONDITIONS		27. SAMPLE OF HANDWRITING
VOMITING		
INCONTINENCE OF URINE		
INCONTINENCE OF FECES		

C. NEUROLOGICAL EXAMINATION		
28. REFLEXES		29. COORDINATION
HYPERACTIVE	FINGER TO NOSE	ROMBERG TEST
HYPOACTIVE	HEEL TO KNEE	
TREMOR	ABILITY TO APPROACH AND PICK UP OBJECT FROM THE FLOOR	GAIT

D. LABORATORY EXAMINATIONS <i>(If requested in Part A):</i>			
30. BLOOD ANALYSIS <i>(Name of test and results expressed as mgm per ml or in other standard units)</i>	31. TIME TAKEN (HOUR)	33. OTHER TESTS <i>(Gastric contents, urine, etc.)</i>	34. TIME TAKEN (HOUR)
	32. DATE		35. DATE
36. SPECIMEN OBTAINED BY <i>(Name of person)</i>		37. RESULTS VERIFIED BY <i>(Name of person)</i>	

E. CONCLUSIONS AS TO COMPETENCE FOR DUTY			
Check the applicable "YES" or "NO" box to indicate answer.		YES	NO
38. Is examinee competent to perform duty?			
39. Is examinee's condition due to disease or injury?			
40. Is examinee's condition due to the use of drugs or alcohol?			
41. DISPOSITION:			
<input type="checkbox"/> RETURNED TO FULL DUTY		<input type="checkbox"/> ADMITTED TO SICKLIST	
		<input type="checkbox"/> RELEASE TO CUSTODY OF <i>(Specify to whom)</i>	

42. REMARKS *(All answers should be as brief as possible. Items requiring more space should be continued in this "Remarks" block. Specify item continued.)*

F. RESPONSE TO REQUESTER

In accordance with the request in Section A, the individual has been examined as set forth above to determine competence for duty.

A signed copy of this report is being inserted in the Health Record of the individual.

43. THE INDIVIDUAL  HAS  HAS NOT RECEIVED A COPY OF THIS REPORT.

44. SIGNATURE <i>(Examiner)</i>	45. GRADE OR RATE	46. DUTY STATION	47. TIME _____
48. NAME <i>(Typewrite)</i>			DATE _____