

be amended per article 15-10 at the discretion of the responsible medical officer. If a previous medical examination is accepted the date of the required reexamination will be based on the original date (month and year) of the accepted examination.

(j) Results of bioassay, internal monitoring, etc., which document monitoring for internally deposited radioactivity, will be documented as required in NAVMED P-5055.

(9) **Reporting Requirements.** The following Health Records must be submitted to BUMED (MED-21) for review. The transmittal letter must include the reason for submittal, total lifetime exposure of the individual, summary of the individual's duties, and, if appropriate, the current or disqualifying diagnosis.

(a) Findings on a radiation medical examination which disqualify an individual from receiving occupational exposure to ionizing radiation.

(b) Findings on a medical history or medical examination of:

(1) History of occupational radiation exposure or internal deposition in excess of that allowed by NAVMED P-5055.

(2) History of radiation therapy

(3) An excess of 10 percent MPBB of radioactive material not intentionally administered for medical diagnosis or treatment. A description of the analysis technique must be included with the submission.

(4) Abnormal personal or family history of cancer, if family history then the submission must include the family pedigree using standard genetic symbols.

(c) Results of medical examination for which the requirements are not explicit.

(d) Any medical examination or condition which the responsible medical officer or commanding officer recommends for BUMED review. Such request for review will not be denied by any member of the chain of command.

(e) All situational radiation medical examinations.

(f) Allegations or claim by a service member or employee that their physical condition was caused by exposure to ionizing radiation.

15-69

Submarine Duty



(1) **Purpose.** The purpose of the standard is to maximize the mission capabilities and to reduce the morbidity of the submarine force. The risk of medical morbidity, including the concomitant hazard of medical evacuation, is considered. Requirements for embarking nonsubmarine personnel, military, civilian government, or contractor are specified in SECNAVINST 6420.1 series.

(a) **Entrance.** Submarine candidates must meet the physical standards for submarine duty. Medical examinations should be performed by a medical officer, preferably a UMO. The member's unit medical officer, i.e., the squadron or group medical officer, should perform the examinations of personnel attached to their unit and subordinate units. Only those individuals not physically qualified for submarine duty, but for whom waivers to the standards appears justified, need BUMED review per section V.

(b) **Continuation of Submarine Duty.** The standards for continuation of submarine duty will be the same as for first acceptance for submarine duty. Waivers may be applied for per section V.

(1) Submarine personnel reporting for duty following absence of greater than 90 days due to serious illness or injury; hospitalized for any reason; reported on by a medical board (see article 18-27(3)); or when returning to submarine duty after other duty of more than 2 years, will, at the earliest practicable date, have a Health Record review and such medical examination as may be required by an UMO to determine their physical qualification to resume submarine duty. This examination will be completed prior to the transfer of the member (see article 15-30). If a UMO is not available at the parent command, the nearest available UMO should perform this examination to ensure personnel arrive at their permanent duty station physically qualified for submarine duty.

(2) Submarine personnel who have developed or are found to have disqualifying defects which preclude their ability to reasonably perform the duties of their grade or rate in submarines, or whose duty in submarines would be detrimental to their health, other members of the crew, or to the mission of the submarine, should be processed for submarine disqualification. The proximate UMO will make a recommendation on the SF-88 or SF-600 for all persons being processed for submarine physical disqualification.

(2) **Additional Standards.** Some items from section III may be duplicated here for emphasis. In addition to the

standards listed in section III, the following are causes for rejection:

(a) **Ears**

(1) History of chronic inability to equalize pressure manifested by repeated aural barotrauma or persistent ear pain secondary to minor pressure variations (e.g., in aircraft, air lock, or elevator). In instances where a clinical determination cannot be made, the candidate must be subjected to a 27 PSIG (60 FSW) pressure test in a recompression chamber, per article 15-66(3)(a).

(2) Inability to satisfactorily pass the pressure test noted above.

(3) Hearing. As for initial acceptance except:

(a) Qualified personnel must demonstrate ability to communicate and perform their duty.

(b) All personnel (applicants or qualified) must have bilateral hearing and be able to understand the spoken word with either ear.

(b) **Eyes**

(1) The minimum visual acuity for unrestricted line officers (URL), quartermasters (QM), quartermaster strikers, and contact coordinators is any level of uncorrected visual acuity as long as it meets general entrance standards (see section III) and at least one eye is correctable to 20/20. Additionally, if more than 3 diopters of sphere or 1 diopter of cylinder is present in the refraction, the individual must wear contact lenses and demonstrate, with the lenses in place, an ability to achieve 20/25 vision in at least one eye or be able to achieve 20/25 with a spherical correction of 3 diopters or less.

(2) Defective color vision except for supply corps officer, medical corps officer, storekeeper (SK), yeoman (YN), messmanagement specialist (MS), hospital corpsman (HM), and personnelman (PN) ratings. Testing will be conducted with the Farnsworth Lantern (FALANT). Waiver will be considered for submarine qualified personnel who can demonstrate a functional ability to discern color associated with their work environment; such requests must include the results of the FALANT test and a statement from the individual's supervisor attending to his or her ability to meet the color vision requirements of the position.

(c) **Lungs and Chest Wall**

(1) History of bronchial asthma (reactive airway disease) after age 12 (waivers will not be considered).

(2) Chronic obstructive pulmonary disease.

(3) History of spontaneous pneumothorax.

(d) **Abdominal Organs and Gastrointestinal System.** History of disease such as severe colitis or irritable bowel syndrome, peptic ulcer disease, duodenal ulcer disease, recurrent or chronic pancreatitis, or chronic diarrhea, gastrointestinal tract perforation, or hemorrhage. Waivers will not be considered unless they have been asymptomatic on an unrestricted diet without medication during the past 2

years and currently have no radiographic or endoscopic evidence of active disease or of severe scarring or deformity. Waivers will be considered for ulcerative proctitis.

(e) **Urinary System.** History of urinary tract calculus.

(f) **Extremities**

(1) Conditions which result in decreased strength or range of motion or presents with symptoms of inhibiting pain of such nature to interfere with ready movement about a submarine or performance of duties.

(2) Conditions causing a person to be excessively prone to injury.

(g) **Spine, Scapula, Ribs, and Sacroiliac Joints.**

Any conditions which preclude ready movement in confined spaces, inability to stand or sit for prolonged periods.

(h) **Skin and Cellular Tissues**

(1) Any condition which may be aggravated by the submarine environment.

(2) Acne vulgaris, moderate or severe.

(3) History of psoriasis or eczema.

(4) Unexplained or recurrent rashes.

(5) Atopic dermatitis.

(i) **Psychiatric.** Because of the nature of the duties and responsibilities of each person in a submarine, the psychological fitness of applicants for submarine training must be carefully appraised. The objective is to elicit evidence of tendencies which might prevent satisfactory adjustment to submarine life. Among these are below average intelligence, claustrophobic tendencies, lack of motivation, unhealthy motivation, history of personal ineffectiveness, difficulties in interpersonal relations, lack of adaptability, or personality disorders.

(1) Any examinee diagnosed by a psychiatrist, clinical psychologist, or UMO as suffering from depression, psychosis, manic-depression, paranoia, severe neurosis, severe borderline personality, or schizophrenia will be recommended for submarine disqualification at the time of initial diagnosis. Waiver request may be submitted per section V.

(2) Those personnel with diagnosed suicidal ideation will have their cases reviewed, as a minimum, by the type commander (TYCOM) medical officer, if a UMO, for fleet personnel, or MED-21 if at a shore establishment, to determine the necessity for disqualification or return to duty. Personnel with suicidal gestures or attempts will be recommended for submarine disqualification. Waivers will be considered on an individual basis per section V.

(3) Those personnel with minor psychiatric disorders such as acute situational stress reactions will be evaluated by the local group or squadron UMO in conjunction with a formal psychiatric evaluation when necessary. Those cases which resolve completely, quickly, and without significant psychotherapy can be found fit for submarine duty by the responsible local UMO, if deemed appropriate. Those cases in which confusion exists must be reviewed by the TYCOM

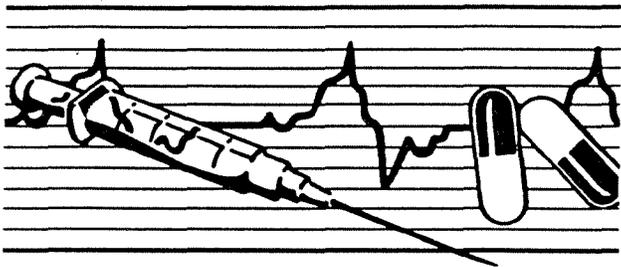
medical officer, if a UMO, for fleet personnel, or MED-21 for shore-based personnel. It must be stressed that any consideration for return to duty in these cases must address the issue of whether the service member, in the written opinions of the UMO and the member's commanding officer, can successfully return to the specific stresses and environment of submarine duty.

(j) **Dental.** All dental treatment should be completed prior to transfer of the member for training or sea duty (see article 15-30).

(1) Indications of, or currently under treatment for, any acute infection disease of the soft tissues of the oral cavity.

(2) Candidates for basic submarine school must be classified by a dental officer as Class I or II (see article 6-101) prior to executing such orders.

(3) Medically indicated conditions requiring exten-



sive or prolonged followup which could not be completed due to the training or operational requirements of member's assignment, e.g., orthodontics.

(k) **Systemic Diseases and Miscellaneous Conditions**

(1) Allergic or atopic manifestations which require allergy immunotherapy.

(2) A member, on submarine duty, who develops allergies which require immunotherapy will be considered for waiver if:

(a) Therapy is not for stinging venomous insects.

(b) AIT injections may be discontinued while the ship is underway.

(c) The member's AIT kit is kept at the squadron or group medical department and used under the supervision of a medical officer in a facility where emergency care can be provided for anaphylaxis.

(3) History of migraine headaches that are recurrent, incapacitating, or require the chronic use of medications for control.

(3) **Special Studies.** In addition to the special studies required in article 15-9, also perform a standard chest x-ray

within preceding 6 months, on initial application and when clinically indicated.

(4) Periodicity. Medical examinations will be conducted per article 15-11.

15-70 Nuclear Field Duty (Nuclear Power/ Nuclear Weapons)

(1) **Purpose.** To ensure personnel assigned to nuclear field duty and candidates for training leading to such assignment are physically qualified.

(2) **Additional Standards.** Must meet the general duty standards and those listed in article 15-68. Additionally, the following are cause for rejection:

(a) **Ears**

(1) Demonstrated inability to communicate and perform duty.

(2) Must have bilateral hearing.

(b) **Eyes.** Defective color vision. Screening will be conducted with the FALANT. Waivers will be considered for personnel who can demonstrate a functional ability to discern color associated with their work environment, such request will include a statement from the operational supervisor or superior and the results of the FALANT.

(c) **Psychiatric.** Because of the potential for misuse of devices and sources emitting ionizing radiation, the psychological fitness of applicants must be carefully appraised by the examining physician. The objective is to elicit evidence of tendencies which militate against assignment to these critical duties. Among these are below average intelligence, lack of motivation, unhealthy motivation, history of personal ineffectiveness, difficulties in interpersonal relations, a history of irrational behavior or irresponsibility, lack of adaptability, or documented personality disorders.

(1) Any examinee diagnosed by a psychiatrist, clinical psychologist, or UMO as suffering from depression, psychosis, manic-depression, paranoia, severe neurosis, severe borderline personality, or schizophrenia will be recommended for disqualification at the time of initial diagnosis. Waiver request may be submitted per section V.

(2) Those personnel with diagnosed suicidal ideation must have their cases reviewed, as a minimum, by the TYCOM medical officer for fleet personnel, or MED-21 for shore based personnel, to determine the necessity for disqualification or return to duty. Personnel with suicidal gestures or attempts will be recommended for nuclear field