

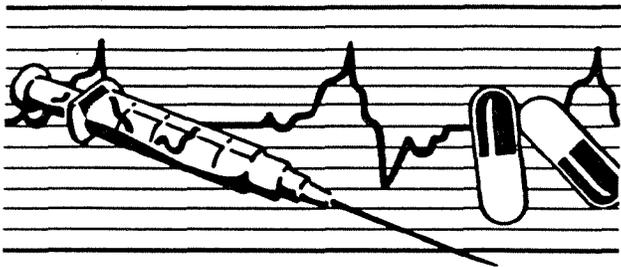
medical officer, if a UMO, for fleet personnel, or MED-21 for shore-based personnel. It must be stressed that any consideration for return to duty in these cases must address the issue of whether the service member, in the written opinions of the UMO and the member's commanding officer, can successfully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

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 must be evaluated by the local group or squadron medical officer in conjunction with a formal psychiatric evaluation when necessary. Those cases which resolve completely, quickly, and without significant psychotherapy can be found fit for nuclear field duty by the responsible medical officer, if deemed appropriate. Those cases in which confusion exists, require review by the TYCOM medical officer for fleet personnel, or MED-21 for shore-based personnel. Any consideration for return to duty in these cases must address the issue of whether the service member, in the opinion of the medical officer and the member's commanding officer, can successfully return to the specific stresses and environment of nuclear field duty.

(4) Personnel entering the Nuclear Weapons Program must also meet the requirements for the Nuclear Weapon Personnel Reliability Program, SECNAVINST 5510.35 series.

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

15-71

Naval Aviation Water Survival and Rescue Swimmer School Training Programs

(1) **Purpose.** To ensure all personnel assigned duties as students, instructors, or designated rescue swimmers are physically qualified for such assignment.

(2) **Additional Standards.** Standards in section III apply with the following modifications as cause for rejection:

(a) **Vision**

(1) **Surface Rescue Swimmer Candidates.** Uncorrected vision, near and distant, worse than 20/100 in either eye. Must correct to 20/20 in each eye.

(2) **Designated Surface Rescue Swimmer.** Uncorrected vision, near and distant, worse than 20/200 in either eye. Must correct to 20/20 in each eye.

(3) **Naval Aviation Water Survival Training Program Instructor (NAWSTPI).** An uncorrected vision is acceptable, but must correct to 20/20 in the better eye and 20/40 in the worse eye.

(b) **Psychiatric.** Because of the rigors of the high risk training and duties they will be performing, 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 or clinical psychologist 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.

(2) Those personnel with minor psychiatric disorders such as acute situational stress reactions must be evaluated by the local medical officer in conjunction with a formal psychiatric evaluation when necessary. Those cases which resolve completely, quickly, and without significant psychotherapy can be found fit for continued duty. Those cases in which confusion exists, require review by the TYCOM medical officer 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 opinion of the medical officer and the member's commanding officer, can successfully return to the specific stresses and environment of surface rescue swimmer duty.

(3) **Special Requirements**

(a) Surface designated rescue swimmer school training program instructors (RSSTPI), surface rescue swimmers, candidate and designated, will have their physical examination conducted by any privileged provider under the guidance and periodicity provided in section I.

(b) Naval aviation water survival training program instructor (NAWSTPI) and aviation designated RSSTPI will have their physical examinations performed by a FS or AMO, and will be examined following article 15-65.

(c) Waiver request will be forwarded to BUMED (MED-21) following section V.