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Civilian Personnel

CIVILIAN PERSONNEL MOBILIZATION
PLANNING AND MANAGEMENT

Supplementation. Local supplementation of this regulation is prohibited unless prior approval is obtained from the proponent.

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CHAPTER 1
INTRODUCTION

1-1. **PURPOSE.** This regulation establishes policies, procedures and responsibilities for the deployment, sustainment and redeployment of civilian personnel. This regulation provides specific policy guidance for the deployment, sustainment and redeployment of civilian personnel volunteers and civilians assigned to the Logistics Support Element (LSE).

1-2. **SCOPE.** This regulation applies to Headquarters (HQ), U.S. Army Material Command (AMC), its major subordinate commands (MSC), and separate reporting activities (SRA). Contractor personnel are excluded from the provisions of this regulation.

1-3. **RESPONSIBILITIES.** a. The HQ AMC Deputy Chief of Staff for Personnel (HQ/AMC DCSPER) is responsible for establishing policy and guidance for processing and deployment of personnel in support of military contingency operations. Specific responsibilities of HQ AMC DCSPER are--

(1) Establishing policy and guidance for processing and deployment of personnel in support of military contingency operations.

(2) Tasking AMC elements to identify personnel to fill positions of the AMC Logistics Support Element (LSE) Table of Distribution and Allowances (TDA) on a long-term basis.

(3) Tasking AMC elements to identify personnel to fill other positions of the AMC LSE TDA, as required in support of deployments.

(4) Establish and publish Soldier Readiness Processing (SRP) requirements to all AMC commands/personnel involved in the SRP Process.

(5) Issue call forward notification of deploying personnel as requested by the LSE Commander.

b. The Executive Director, AMC Logistics Support Activity (LOGSA) is responsible for--

(1) Establishing and maintaining the LSE Contingency TDA (TDA Document Number X3W46EAA).

(2) Establishing strategic and operational policy and guidance for the Logistics Support Element (LSE).

(3) Identifying personnel to fill those LSE positions which LOGSA is tasked to support.

(4) Ensuring preparation for SRP actions of LOGSA personnel identified for deployment are completed to maximum extent possible prior to movement to the continental United States (CONUS) Replacement Center (CRC).

(5) Validating call forward requests received from deployed LSE commanders to ensure that the personnel request is supported by the assigned mission. Valid requirements are passed to HQ AMC DCSPER for action.

c. Commanders of AMC MSCs, installations and activities are responsible for--

(1) Identifying personnel to fill those LSE positions which their command is tasked to support.

(2) Ensuring preparation for overseas movement (POM) actions of assigned personnel identified for deployment are completed to maximum extent possible prior to movement to the CRC.

d. Commander, AMC Logistics Support Element (LSE), is responsible for--

(1) Identifying those specific LSE TDA authorized functions required to execute the mission and requesting LOGSA/HQ AMC DCSPER to call forward personnel into the area of operation (AO).

(2) Receiving and supporting civilian personnel deployed to his/her command.

(3) Exercising operational control over all AMC personnel and contractors deployed to the AOs.

(4) Coordinating redeployment and replacement of LSE personnel with HQ AMC DCSPER.

e. The AMC Logistics Support Element (LSE) is task organized to support military operations. The LSE has a flexible TDA that can support humanitarian relief operations other than war (OOTW) and war. The TDA is modular with a command and control (C2) section and capability to perform contracting, supply, ammunition, maintenance, test, measurement, and diagnostic equipment (TMDE), Army Oil Analysis (AOAP), and Log Assistance. It can be task organized to fit the needs of the contingency. The majority of the organization does not have permanent staffing and is filled by personnel with equivalent skills from within AMC or contractors.

f. The LSE mission is to augment, not replace, military combat support/combat service support (CS/CSS) capabilities. The LSE is usually attached to the senior logistics commander in the AO and is an integral part of the logistics capability. The LSE presence adjusts as the military CS/CSS units become established in the AO. The LSE is inserted into an AO in a phased manner. A small contingent of LSE personnel form the "Jump Tactical Operations Center (TOC)" and establishes the LSE presence. Additional LSE capabilities are called forward and redeployed, as necessary.

g. The three "foundation" LSE commanders are located in CONUS, Europe, and the Far East. These LSE commanders have assigned responsibility for specific areas of the world. A Logistics Assistance Officer (LAO) from the LSE commander's AO often serves as the interim LSE commander when the Jump TOC

initially deploys into the AO. The Jump TOC includes personnel who establish communications capability, locate and contract billeting and office space, coordinate with supported units and determine what skills/capabilities are required and when they are needed. The Jump TOC usually deploys with the staff of the supported logistics unit.

h. Maintaining pre-POM status for personnel on LSE "core" TDA. HQ AMC DCSPER and LOGSA will identify those positions on the LSE TDA which constitute the "core" or "cadre" of the LSE for deployment. Personnel identified to fill these positions must be prepared to deploy on short notice. AMC MSCs, installations and activities will ensure all personnel identified to fill these LSE "core" TDA positions maintain their pre-SRP status. If the personnel identified can no longer meet POM requirements, the AMC MSC, installation and activity must immediately advise HQ AMC DCSPER.

1-4. **AMC AUTHORITY TO DEPLOY CIVILIAN PERSONNEL.** a. The AMC Commander's policy is to minimize the number of employees who must be involuntarily deployed. When the need for a particular skill arises, and before a civilian employee is sent involuntarily, a search will be conducted first to determine if military personnel are available to satisfy the requirement, and then for civilian volunteers.

b. In those cases where the actions in paragraph 1-4a fail to fill a requirement for a particular skill, management has the authority under existing Department of Defense (DOD) policies and procedures to direct and assign civilian employees on an involuntary or unexpected basis to accomplish the DOD mission.

c.

Management may take appropriate administrative action, including separation from the federal service, if civilian employees refuse to perform such functions until relieved by appropriate authority. Management may direct an employee to perform these functions regardless if they have refused to sign the emergency essential agreement, or had previously agreed to perform such functions. Management has this authority whether or not the position

held by the employee has been preidentified by management as an emergency essential position or the designation of this position has been necessitated due to a crisis situation.

d. The AMC is committed to providing all deployed personnel with proper training, equipment, and protection.

CHAPTER 2
DESIGNATION OF EMERGENCY ESSENTIAL POSITIONS

DESIGNATION OF EMERGENCY ESSENTIAL (EE) CIVILIAN POSITIONS AND ASSIGNMENT OF PERSONNEL TO EE CIVILIAN POSITIONS.

a. All positions of the LSE TDA are designated as EE positions. Incumbents of these positions are considered EE personnel. The emergency essential (EE) civilian designation is used to identify civilian positions located overseas or that would be transferred overseas during a crisis situation. The EE civilian position is required to ensure the success of combat operations or to support combat essential systems subsequent to mobilization or an evacuation order or other type of military crisis. The position cannot be converted to a military position because it requires uninterrupted performance to provide immediate and continuing support for combat operations or support maintenance and repair of combat essential systems.

b. Due to unforeseen circumstances or the exigencies of a particular crisis, it may become necessary to identify civilian positions as EE that had not been previously identified as such. These positions may be located in the overseas area or they may be positions to which an employee in the United States would be sent on temporary duty (TDY) or reassignment to the location of the crisis or other such emergency.

c. The deploying civilian employee will be requested to execute an EE agreement. If the employee declines to sign the agreement, but possesses special skills and expertise, which in management's view renders it necessary to send that employee on the assignment without signing the agreement, the employee may be directed on involuntary temporary duty to the location where the employee's skills are required.

d. All civilian employees deploying to combat operations/crisis situations are considered EE regardless of volunteer status or the signing of the EE agreement. The employee will be in an EE status for the duration of the assignment.

e. If a EE position becomes vacant, anyone filling that vacancy will be required to sign a EE agreement as a condition of employment, to include passing a physical.

f. Policy regarding designation of current incumbents as EE should be coordinated with local and national unions. Recommend designation of position as EE upon turnover of personnel.

CHAPTER 3
ROLE OF CONUS REPLACEMENT CENTER

3-1. **GENERAL.** a. The Department of the Army (DA) has designated CONUS Replacement Centers (CRC) for the processing and deployment of personnel (civilian, military, and contractor), deploying from CONUS in support of military operations.

b. The CRC is designed to receive and certify individuals from installations for deployment. Individuals identified for deployment are called nonunit related personnel (NRP) and consist of five categories: Active Component soldiers (to include Reserve soldiers accessed onto active duty), Department of the Army Civilians (DAC), Contract civilians, Red Cross workers, and other civilians. NRPs that are identified for deployment will arrive at the CRC site from other installations as well as the installation where a CRC is located. It is the CRC's responsibility to prescreen soldier and civilian personnel records, conduct theater specific briefings and training, coordinate transportation and the issue of theater clothing and equipment, coordinate medical requirements such as immunizations, DNA screening, and dental examinations for deployment and coordinate movement of the NRP to the Aerial Port of Embarkation.

3-2. **TIME REQUIREMENTS.** AR 600-8-101 specifies that the replacement center will be the final authority for declaring an individual deployable. A minimum of 3 full days will be required to either validate those SRP actions performed at the individual home station and/or complete those actions that were beyond the capability of the home station to perform. This time may be increased depending upon whether any specialty training, e.g., weapons familiarization, must be provided to the deployees.

CHAPTER 4
ROLE OF HOME STATION

4-1. **PHILOSOPHY.** The home station or sponsoring activity is responsible for the Preparation for Overseas Replacement (POR) processing of its proponents per the checklist and provisions of AR 600-8-101, Soldier Readiness Processing (SRP). However, the home station may not be able to accomplish all the actions required by the deploying individuals and in-theater commander. Items beyond the capability of the home station will be completed at the CRC.

4-2. **PREDEPLOYMENT ACTIONS.** The employee's normal duty station is the home station for that employee. AMC will identify SRP processing requirements by message, Memorandum of Instruction or Operations Plan. Management will ensure that the employee's attempt to complete POM processing requirements to the maximum extent possible at home station before official call forward are received (i.e., physical, eyewear prescriptions, government credit card) prior to movement to the CRC. Personnel in the Logistics Assistance Office (LAO) and TMDE usually deploy with unit personnel from their home station. These personnel will complete all required POM processing at their home station prior to deployment.

4-3. **TRANSPORTATION AND LODGING.** Home stations are responsible for the movement of their personnel from their home station(s) to the CRC. Billeting will be provided by the CRC. Personnel should secure a rental car for transportation to the CRC. Deployee's orders should contain the necessary funding authorization to cover the rental car expense. The CRC will provide transportation from the CRC to the Port of Embarkation and return.

4-4. **DEPLOYMENT PACKET.** Each activity will maintain a Deployment Packet on each deployee. A copy will be maintained in the Civilian Personnel Office or other appropriate location within the activity and a copy will be hand carried by the employee to the designated CRC. The Deployment Packet will consist of those items listed in [appendix B](#). A sample Deployment Checklist is at [appendix C](#).

CHAPTER 5
PASSPORTS AND VISAS

5-1. **REQUIREMENTS.** a. Employees deployed overseas in support of military operations will be required to carry a passport at all times when traveling. In addition to the "No Fee" passport, civilians may be authorized reimbursement for the standard passport for use in passing through countries not friendly to the United States. This determination will be made on a case-by-case basis and is contingent on the area and circumstances of deployment. EE personnel will maintain a "No Fee" and standard passport at all times. Personnel will not depart the home station without being in receipt of a valid passport and visa, if appropriate. Employees identified for deployment will apply at their home station for a "No Fee" passport and necessary visa by filing DD Form 1056, Authorization to Apply for a "No Fee" Passport and/or Request for Visa.

b. Requirements for visas will be determined by the country of deployment/travel and obtained from the embassy prior to deployment.

5-2. **REIMBURSEMENT.** Normally, charges for passports/visas are reimbursed, however, reimbursement of fees or charges for legal services required by local laws may not be reimbursable. Reimbursement of authorized costs in obtaining the standard passport are made by filing SF 1034, Public Voucher For Purchases and Services Other Than Personal. Coordination with local resource management personnel is recommended.

CHAPTER 6
MEDICAL REQUIREMENTS

6-1. **GENERAL.** a. Terminology. In this chapter, five terms will be used frequently and are defined here:

(1) Emergency Essential Personnel (EEP) - DA civilians who, as a precondition of employment, agree to meet strict standards (administrative, physical, and other) and deploy worldwide to operational theaters, as needed. EEP include Logistics Assistance Representatives (LAR), Logistic Support Element (LSE) "core" personnel, etc. EEP requirements pertain to those in, as well as those applying to, any EEP position or program.

(2) Volunteer - A non-EEP DA civilian who volunteers to deploy to an operational theater for a specific operation on a one-time basis. These personnel must meet all medical requirements before deploying.

(3) Deployable Civilian (DC) - A DA civilian who is preparing to deploy to an operational theater, either on an ongoing or one-time basis. This comprehensive term includes both EEP and volunteers.

(4) Installation Medical Authority (IMA) - The senior medical officer on the installation. Normally, this is the Medical Activity (MEDDAC or hospital) or clinic commander.

(5) Physical Evaluation (PE) - An evaluation of one's health, based on various inputs such as medical and occupational history, objective tests (EKG, lab, X-ray, etc.), and physical examination.

b. This chapter describes the physical standards and medical/administrative requirements of AMC DCs. The chapter is intended to help DCs attain and (for EEP) maintain medical readiness. Where different standards apply--to EEP vs. volunteers--these differences will be explained. Whenever deployment-specific guidance is issued (by AMC or higher HQ) that conflicts with this regulation, the deployment-specific guidance will take precedence.

c. The medical requirements of Logistics Assistance Representatives, outlined in AMC Regulation 700-19 (Mobility Program For Logistics Assistance Program Personnel), are essentially identical to the requirements of this regulation, except that this regulation is more streamlined. No particular distinction should be made between the medical requirements of these documents. The medical requirements of this regulation will satisfy those of LARs.

d. The proponent of this chapter is the Command Surgeon, AMC. Questions are directed to the AMC Surgeon or Chief of Occupational Medicine at DSN 767-9470 or (Commercial 703-617-9470).

6-2. **PHILOSOPHY.** a. During deployment to operational theaters, austere or no medical support is anticipated and should be assumed. Therefore, it is essential that DCs meet stringent medical qualifications and physical requirements in order to safely and efficiently perform their duties and responsibilities without jeopardizing themselves or others. In general, soldier retention standards (found in AR 40-501, Standards of Medical Fitness) will be used in determining fitness for DCs.

b. The examining physician or physician assistant (PA) has full authority in determining DC fitness. In making this determination he/she should consider: the specified standards of the DC position (described on SF 78, Certificate of Medical Examination; see **appendix E**), the physical and medical condition of the DC, the potential environment to which the DC may deploy (for EEP, assume combat zone in the 3d world; for volunteers, consider the environment to which the volunteer is deploying), and the (austere) medical support that will be available (assume aid station or field surgical hospital). The physician/PA should be conservative in determining DC fitness.

6-3. **MANAGEMENT.** a. EEP are responsible for meeting all medical and administrative requirements of this chapter at all times. Medical requirements are reviewed and verified (not necessarily repeated) yearly. The checklist at **appendix H** is provided to assist EEP in this initial and yearly validation process. Volunteers must meet certain medical and administrative requirements before deploying. The checklist at **appendix I** is provided to assist volunteers in this process.

b. The installation commander will appoint a manager to oversee administrative aspects of the DC program. The DC manager ensures that DCs meet all medical and readiness requirements, thus he/she must become familiar with these requirements. The yearly requirements of EEP may be met during the birth month, during annual medical surveillance (if applicable), or on another schedule at the discretion of the DC manager. The DC manager must liaison with the appropriate installation offices and facilities providing support to ensure that the program is administered correctly and efficiently. In particular, the DC manager should meet with the chief of the supporting physical exam section or IMA, providing them with a copy of the PE requirements.

6-4. **COSTS.** The government will bear costs of PEs, special equipment (e.g., protective mask optical inserts), and services (e.g., travel, immunizations) required for employment and deployment. The applicant/ DC will bear medical costs incurred in meeting job standards (e.g., corrective surgery, dental work). While on TDY, AR 40-3 (Medical, Dental, & Veterinary Care), paragraph 4-29a.(8) applies--any disease or injury incurred by a civilian employee on TDY will be regarded as job related. While deployed, in-theater medical services will be available to DCs as if they were soldiers.

6-5. **LOCATION.** a. All PEs should be accomplished at home station, if possible. This saves TDY costs and provides the greatest continuity of care. Where medical support is not available, the DC manager should arrange support at the nearest available military Medical Treatment Facility (MTF).

b. For specific deployments, DA may designate a CONUS replacement center to perform predeployment processing, including PE. In this case, EEP (for whom the most recent, annual periodic PE suffices) should review their checklists (appendix H) and ensure they are current before leaving home station, taking their medical records with them. Volunteers (who need a complete PE) should take any available medical records with them to the designated replacement center and accomplish the predeployment PE there.

6-6. **COMPONENTS OF MEDICAL READINESS.** a. **PHYSICAL EVALUATION.** There are six occasions when EEP must undergo PE: upon appointment (preplacement), at 5-year intervals (5-year periodic), annually (annual), following deployment (postdeployment), when there is cause (fitness-for-duty), and upon termination (termination). They are described below. All PEs must be conducted and signed by a physician or PA. A complete PE is required on all occasions except annually and following deployment. The requirements of a complete PE are in [appendix F](#). The requirements of an annual PE are in [appendix G](#). Volunteers must undergo preplacement and postdeployment evaluation only.

(1) Preplacement - A complete PE will be administered. EEP applicants must pass a preplacement PE based on the functional requirements of the job (appendix E) to determine fitness for duty prior to entering the program. Volunteers must pass a preplacement PE based on the same functional requirements (appendix E) to determine fitness for duty prior to deployment.

(2) Five-year periodic - EEP continuing in their program will receive a complete PE every 5 years beginning at age 25, and annually after age 60.

(3) Annual - EEP continuing in the program will receive an annual PE consisting of a medical history, except when they are undergoing a 5-year periodic PE. The goal of the annual PE is to identify--by history--any changes in the health status of the employee that may preclude worldwide deployability to an area with little or no medical support. Emphasis should be placed on identifying any changes in cardiovascular, pulmonary, neurologic, endocrine, dermatologic, orthopedic or psychological status since the employee's last PE. A list of current medications must be provided by the employee. The need for physical examination and diagnostic procedures (and for making entries on part C, SF 78) will be left to the discretion of the examining physician/PA but is not required, unless warranted by the history. Normally, the PE will be accomplished using SFs 93 and 78 (parts A, B, and the bottom of C [conclusions]) only.

(4) Postdeployment - Normally, the Army Surgeon General or Theater Surgeon specifies the postdeployment PE, which usually consists of a medical history by a medic or nurse, with physician review and (as necessary) consultation. A tuberculin skin test is often required. Ordinarily, the postdeployment PE

forms are specific to the operation and are issued by The Surgeon General or the Theater Surgeon. DCs will receive the same postdeployment PE as soldiers. If these PEs are being performed in-theater, the DC will be examined there. If soldiers are undergoing postdeployment PE at home station, so will DCs.

(5) Fitness For Duty - A complete PE will be administered, when appropriate, to determine the employee's fitness for duty. This examination will be based upon a supervisor's observation or suspicion of deficiency in safe or efficient job performance.

(6) Termination - All EEP will undergo a complete PE within 90 days prior to termination of assignment or employment.

b. Immunizations and Tuberculin Skin Test (TST).

(1) Immunizations - EEP must be up-to-date on all routine adult immunizations (i.e., measles, mumps, rubella, diphtheria, tetanus and polio). Additionally, all EEP must become/remain up-to-date on the following immunizations: influenza, typhoid, hepatitis A (active vaccine, not Immune Globulin), and meningococcal. No other immunizations are required until mandated for a specific deployment. Volunteers will receive all immunizations required for their particular deployment. Immunizations are recorded in the 'yellow' shot record (PHS Form 731, International Certification of Vaccination).

(2) Tuberculin Skin Test - EEP will receive a TST every 5 years. Volunteers will receive a TST if required for their particular deployment. TST results are recorded in the 'yellow' shot record.

c. Records. DCs will establish three medically-related records. A medical record will be established and maintained at the supporting home station medical clinic. This record will include all PEs, consultations, labs, etc., pursuant to the DC's deployment (or employment in the EEP program). A 'yellow' shot record will be established and maintained inside the medical record. A dental record will be established and maintained at the supporting home station Dental Treatment Facility. DCs will hand-carry the appropriate record(s) on consultation visits, and will hand-carry all three records to the CRC (if designated) and on deployment.

d. Dental Examination. EEP will undergo yearly dental examination at a military Dental Treatment Facility (DTF). Volunteers will undergo dental examination at a military DTF prior to deployment. Army dental officers will make dental fitness determinations. The four Army dental fitness classes are: 1) no dental work needed; 2) existing dental condition, unlikely to result in dental emergency within 12 months; 3) existing dental condition, likely to cause dental emergency within 12 months; and 4) no exam within 1 year, no record available, or no panograph. DCs who are in dental fitness class 3 or 4 will be nondeployable until restored to class 1 or 2; such dental work will be the responsibility of the DC.

e. Panograph. DCs must have a current panograph (dental full mouth x-ray) on file in their dental record. The question of 'currency' is one of clinical judgment, not simply years. The examining Army dental officer will make this determination.

f. DNA Sample. EEP will have a DNA sample taken during their replacement PE; volunteers will have a DNA sample taken prior to deployment. The supporting military MTF will obtain the DNA sample and forward it to the central DNA repository. A second DNA sample will remain in the medical record.

g. Human Immunodeficiency Virus (HIV) Test. Current Army policy calls for involuntary HIV testing of civilian employees only if required by the country to which the DC is deploying.

h. Medical Alert Identification (ID) Tags. The military MTF or installation will provide medical alert (red) ID tags for DCs with allergies or medical conditions (that fall within fitness standards). EEP will have tags made as they are accessed to the program; volunteers will have theirs made prior to deployment.

i. Protective Mask Optical Inserts. When a DC's distant visual acuity exceeds 20/40, the supporting military MTF will provide two pairs of prescription protective mask optical inserts. These are maintained by the DC. EEP will have their optical inserts made as they are accessed to the program; volunteers will have theirs made prior to deployment.

j. Chemoprophylaxis and Medicines.

(1) Chemoprophylaxis - Preventive medicines such as antimalarial medications will be provided to DCs during preparation for deployment.

(2) Medicines - In-theater medical support may be austere or, for a time, nonexistent. For this reason, EEP must maintain--at their expense--a 90-day supply of personal prescription medications (non-expired) at all times, so that they will be ready to deploy on short notice. Volunteers must procure--at their expense--a 90-day supply of personal prescription medications prior to deployment.

k. Other Items. Generally, other items of personal or medical importance must be maintained in a ready condition by the EEP, at his/her own expense. This includes, for example, two pairs of eyeglasses and spare hearing aid batteries.

6-7. **EXAMINING PHYSICIAN/PA.** a. Location. DC PEs will be conducted by a physician or PA at a military MTF. DCs should use home station medical support whenever possible.

b. Examining physicians/PAs should refer to appendix F for the requirements of a complete PE. Note that all DC PEs are 'complete' except

annual and postdeployment. In performing a complete PE, the physician/PA should complete SF 93 (appendix D) and SF 78 (appendix E) part C, rendering his/her opinion in the 'conclusions' block. The requirements of an annual PE are in appendix G. In performing an annual PE, the physician/PA should review prior PEs, complete SF 93 and only the 'conclusions' block of part C, SF 78, unless further testing or examination is indicated by the history.

c. Determining Fitness. In general, soldier retention standards will be used in determining fitness for DCs. These are found in AR 40-501 (Standards of Medical Fitness), chapter 3. The examining physician/PA has full authority in determining DC fitness. In making this determination he/she should consider: the specified standards of the DC position (described on SF 78, Certificate of Medical Examination; see appendix E), the physical and medical condition of the DC, the potential environment to which the DC may deploy (for EEP, assume combat zone in the 3d world; for volunteers, consider the environment to which the volunteer is deploying), and the [austere] medical support that will be available (assume aid station or field surgical hospital). The physician/PA should be conservative in determining DC fitness, rendering his/her written recommendation on SF 78 (part C, [conclusions]).

d. Consultation. Examining physicians/PAs may consult with specialists, if necessary, to determine fitness. Furthermore, examining physicians/PAs may consult with their MTF Commander, MSC Surgeon, or the Command Surgeon.

6-8. RESPONSIBILITIES OF DEPLOYABLE CIVILIANS. a. Maintain physical fitness and be able to function in harsh environmental conditions in a combat zone.

b. Inform the supervisor, DC manager, and physician of any health problems that could affect the ability to perform the functional requirements of the job. Failure to disclose known problems could jeopardize the DC's health and the unit's mission, and justifies removal from the program or deployment.

c. Manage Personal Medical Readiness. DCs bear the responsibility for familiarity with this chapter and meeting all the medical and administrative responsibilities contained herein.

6-9. FAILURE TO MEET STANDARDS OR REQUIREMENTS. Failure to pass the required PE will disqualify the DC/applicant unless the condition is corrected within 6 months. Corrective work is the DC/applicant's responsibility and will be accomplished using his/her normally available medical care and resources.

6-10. APPEAL PROCESS. The determination of fitness for duty will be made by the evaluating physician/PA. If the physician/PA determines that the DC/applicant is not fit for this duty, and the DC/applicant has questions or disagrees, he/she should first seek explanation/ resolution with the evaluating physician/PA. Appeals will be made by memorandum through command channels to the MSC Commander (AMC Commander for those assigned to AMC HQ). The appellant should include the PE in question and all consultations and information that bear on the case. The MSC Commander will make the final decision after consulting with the MSC Surgeon (AMC Surgeon if the MSC has no assigned Surgeon). For those assigned to AMC HQ, the AMC Commander will make the final decision after consulting with the AMC Surgeon.

CHAPTER 7
ENVIRONMENTAL HEALTH

7-1. **GENERAL.** a. Throughout history, more soldiers have been rendered noneffective from disease and nonbattle injury (DNBI) than from injury received as a direct result of conflict. Although disease is no longer expected to be a major cause of death in combat areas or overseas peacetime deployments, it still accounts for the vast majority of loss of productivity.

b. Among the diseases historically impacting on military deployments are diseases transmitted by arthropods (biting insects), including malaria, dengue, and typhus, and diseases associated with poor sanitation and personal hygiene (hepatitis, cholera, typhoid, and dysentery). Preventable injuries (including those due to heat, cold, or altitude) have also adversely impacted past operations.

7-2. **RESPONSIBILITIES.** a. MACOM/Task Force Surgeon.

(1) Review operational requirements, determine and assess medical threats, and recommend appropriate countermeasures for environmental health issues based on geographical location, season of the year, and interaction with local populations.

(2) Review and prepare, as necessary, training and information packages and coordinate with planners of the operation to ensure appropriate dissemination of the material.

b. Home Station Medical Staff.

(1) Provide services necessary to meet basic requirements for maintaining baseline medical readiness as discussed in chapter 6 of this regulation.

(2) Be aware of the medical processing requirements for the specific deployment. Obtain information as to immunizations, prophylactic pharmaceuticals, and laboratory tests in addition to routine adult immunizations discussed in chapter 6 of this regulation from the medical annex to the operations order and/or specific deployment guidance. Request assistance from the Preventive Medicine unit participating in the deployment.

(3) Coordinate information packets, threat briefings and deployment specific training to increase awareness of medical threats and their countermeasures with operations planners.

(4) Provide DCs with all available information prior to deployment to allow for personal preparation.

(5) Address problems in obtaining necessary preventive medicine information to the MSC Surgeon (or the Command/Task Force Surgeon if there is no MSC Surgeon) for resolution.

c. Deployment Station Medical Staff. In those cases where the home station is not the deployment station, the deployment station medical staff will--

(1) Validate the deployment status of individuals upon arrival at the CRC.

(2) Be prepared to provide medical readiness processing and threat/countermeasure information discussed above for those who did not receive them at home station.

d. Deploying Personnel. Medical support will be austere during most deployments. Individual adherence to policies for the prevention of DNBI is mandatory both for the well being of the individual and the accomplishment of the mission. Each individual will--

(1) Accomplish medical readiness processing as outlined in chapter 6 prior to departure from home station.

(2) Be familiar with the medical threats specific to the deployment and comply with all procedures deemed necessary by appropriate authority to ensure their health.

(3) Use all personal protective equipment intended to prevent occupational injuries specific to their jobs when deployed.

(4) Report all injuries and illnesses as soon as possible to the local medical support unit or facility.

7-3. **MEDICAL THREATS AND COUNTERMEASURES.** Medical Threats and Countermeasures. Deployment creates stress. Pressures of the job at hand, separation from family, different climates, unfamiliar medical threats, even without the rigors of combat, put all personnel at risk of illness and injury. Proper attention to preventive medicine guidance specific to the deployment is essential for maintaining individual health. The following are basic categories of threats and appropriate countermeasures.

a. Heat injuries caused by heat stress and insufficient water consumption. Countermeasures: Drink plenty of water! Work and rest in cycles. Modify clothing consistent with the mission and other protective factors.

b. Cold injuries caused by combinations of low temperatures, wind, and wetness. Countermeasures: Wear layers of loose clothing to avoid sweating. Protect exposed skin. Keep socks clean and dry. Watch each other for signs of frostbite.

c. Diseases caused by arthropod/animal/snake bites. Countermeasures: Treat clothing with permethrin spray. Wear long pants and keep sleeves down. Apply a DEET base insect repellent. Use mosquito bed netting when sleeping. Avoid contact with animals and snakes.

d. Diarrheal diseases caused by--

(1) Drinking contaminated water.

(2) Eating contaminated foods and ice.

(3) Not practicing good individual preventive medicine/ sanitation measures. Countermeasures: Bottled water and packaged ice are not necessarily safe for consumption. Drink and eat only approved water and food. Use basic personal sanitation practices, especially washing hands.

e. Diseases, trauma, or injuries caused by physical or mental unfitness. Countermeasures: recognize your limitations. Get plenty of sleep, find ways to relax, and give each other support.

f. Occupational injuries caused by exposures to noise, vibration, and chemicals. Countermeasures: use all available personal protective equipment. Be aware of increased risks due to austere surroundings.

g. Disease resulting from altitude exposure at high terrestrial elevations. Countermeasures: recognize the potential for problems when working at high altitude and follow prescribed precautions.

h. Radiation injuries caused by ionizing and nonionizing radiation sources such as depleted uranium weapons and battlefield laser systems. Countermeasures: avoid exposure to ionizing and non-ionizing sources. Recognize and avoid depleted uranium armor and ammunition. Do not look into laser beams.

I. Injuries resulting from other environmental exposures (sunburn, blowing sand, snow blindness). Countermeasures: Use protective clothing and eye protection appropriate for the hazard.

CHAPTER 8
TRAINING

8-1. **SPECIALIZED SKILL TRAINING/LICENSES.** Individuals identified for deployment will be required to perform tasks outside their normal duties. These may include, but are not limited to: operation of tactical/nontactical vehicles, power generation equipment and communications equipment, i.e., International Maritime Satellite (INMARSAT) and Logistics Assistance Program (LAP) Fly-Away Package components. The training and qualification of deploying personnel for required operator's licenses for this equipment will be the responsibility of the home station; however, in those instances where training cannot be given at home station, the CRC will provide required training during overall processing and deployment.

8-2. **WEAPONS FAMILIARIZATION TRAINING.** While most military personnel are trained in the maintenance and utilization of individual fire arms (weapons), current policy is that civilians will only be issued weapons when authorized by the theater commander and after appropriate familiarization training. Sidearms for deployment purposes are limited to 9MM and standard government-issue ammunition. Weapons familiarization training will be conducted at the designated CRC or in-theater.

8-3. **CHEMICAL DEFENSIVE EQUIPMENT (CDE) TRAINING.** The in-theater commander will determine the requirement for equipping and training deploying personnel with CDE. Training and equipment will be theater specific and dependent upon the threat and nature of duties. The designated CRC will as part of the individual processing for deployment, provide familiarization training when it cannot be provided at the home station. Personnel who deploy from home station to the AO, i.e., LARs and TMDE will be issued CDE and receive training from their home station.

8-4. **WEAR AND USE OF ARMY UNIFORMS, CLOTHING AND EQUIPMENT.** LSE personnel will be required to wear Army uniform and Common Table of Allowances (CTA) authorized clothing as well as use Army equipment. It cannot be assumed that deploying personnel are familiar with the wear and use of these items. The home station or CRC will provide instruction and training in the wear and use of these items to deploying personnel. This will aid the individual's successful deployment and maintain the professional image of the LSE and AMC personnel in field conditions.

CHAPTER 9
CLOTHING AND EQUIPMENT

9-1. **ISSUANCE.** a. General. The designated CRC has the responsibility for issuance of clothing and equipment to deploying personnel assigned to or in support of the Logistics Support Element (LSE).

b. The CRC will issue required organizational clothing and individual equipment (OCIE), to include CTA-50, weapon, chemical protective mask and protective clothing. Minimum OCIE requirements will be determined by the theater commander. A list of items of OCIE which may be issued to each deployee is at **appendix J**. This list may be modified based on the contingency, geographic area of deployment, climate, etc.

c. Government Issued Weapons For Civilians. Current policy is that civilians will only be issued weapons when authorized by the theater commander and after appropriate familiarization training. HQ AMC DCSPER will advise all deployees when this approval is granted. Acceptance of such weapons is voluntary for all civilian personnel. Weapons will normally be issued and collected at a location in the theater of operation. Personal weapons are prohibited.

9-2. **ACCOUNTABILITY/RETURN.** Individual accountability will be established for all items of clothing and equipment issued for use by deploying personnel. It is the responsibility of the individual to return or adequately account for disposition of all clothing and equipment with the issuing activity at conclusion of his/her deployment. The individual may be held pecuniarily liable for all clothing or equipment which cannot be returned or accounted for at conclusion of the deployment.

CHAPTER 10
PREPARATION OF TRAVEL ORDERS

10-1. **GENERAL.** Civilian employees require travel orders, DD Form 1610, in order to begin movement to air or sea Point of Debarkation (POD) and onward to the Area of Operation (AO). Travel orders will be prepared by their home station, or if this is not possible, by another activity. Travel orders must be prepared as soon as practical so as not to impede deployment of personnel. Funding for the deployment of civilian personnel for non-exercise-related situations is usually after the fact on a reimbursable basis. The activity's Operations and Maintenance Appropriation, Army (OMA) funds are utilized to fund deployment and detailed records must be maintained to document subsequent reimbursement requests. The itinerary section, Item 11, of the DD Form 1610 should show all authorized layovers en route to and from TDY location whenever possible. Mark an "X" in the block labeled "Variation Authorized" in case conditions warrant deviation enroute to and from TDY location. The following must be included in the remarks section, Item 16, of the DD Form 1610:

- Actual expense allowance authorized while at TDY site.
- Rental car authorized at authorized layover locations.
- Authorized to carry Government issued weapon when permitted by the Theater Commander.
- Medical care is authorized per AR 40-3, paragraph 4-29A(8), for civilians in a TDY status.
- Overtime (or compensatory time) authorized at TDY site, as required by the Theater Commander.

10-2. **TRAVEL ADVANCES.** Army policy authorizes advances for TDY expenses provided the estimated reimbursable "cash" expenses exceed \$50.00. Advances are limited to meals and incidental expenses covered by the per diem rate or actual subsistence expense allowance and other authorized expenses that cannot be paid by charge card.

10-3. **PER DIEM.** a. Per diem is authorized while enroute to and from the TDY site; however, if both lodging and meals are provided by the government, the per diem is limited. If there is a charge for the use of Government facilities, the limited per diem rates will be increased by the actual fees incurred.

b. No per diem is authorized for civilians when living under field conditions while in support of military operations.

10-4. **GOVERNMENT ISSUED CREDIT CARD.** Civilian employees will be offered a Government contractor-issued charge card during pre-deployment processing at home station. Civilian employees are expected to use Government contractor-issued charge cards to cover travel expenses. If conditions preclude use of the Government contractor-issued charge card, an additional advance not to exceed 80 percent of the additional estimated cash expenses is authorized. This exception to the advance limitation is not available to employees who elected not to receive the Government contractor-issued charge card when offered by their command or whose Government contractor-issued charge card has been suspended or revoked because of delinquent payments.

CHAPTER 11
LIVING UNDER FIELD CONDITIONS

DEPLOYMENT/FIELD CONDITIONS.

a. During major deployments, most individuals will live under field conditions. Living under field conditions is much different from normal civilian life. There will be a general lack of privacy and little opportunity for recreation during nonduty hours. Housing will often consist of tents or hastily constructed buildings. Food will include prepackaged rations or be served in a military dining facility, which means that special diets may not be accommodated in some circumstances. Showers, if available, may be communal, otherwise bathing may be from a bucket.

b. There will be limited opportunities to phone home and mail deliveries may be delayed. Laundry service may also be limited. The organized practice of religion may be restricted to services and assistance provided by a military chaplain.

c. The on-site commander may impose special rules, policies, directives and orders based on mission necessity, safety, and unit cohesion.

d. The host nation may also impose special laws and rules. The specific customs, traditions and restrictions of the host nation will be addressed in the predeployment briefing and compliance is required.

CHAPTER 12
PERSONNEL ACTIONS

12-1. **SF50 DETAIL.** A detail transaction will be processed for all deploying civilians not to exceed 179 days. The Standard Form 52 should be initiated by the employee's organization and submitted to the servicing civilian personnel office. The effective date of the detail is the day the employee is scheduled to depart the installation. It is the responsibility of the servicing civilian personnel office to ensure the detail action is processed in the Defense Civilian Personnel Data System (DCPDS). Specific supplemental coding instructions will be provided by the AMC DCSPER. A copy of the Standard Form 50 will be hand carried by the deployee to the AO.

12-2. **SUPERVISORY RELATIONSHIPS.** a. Establishment of Supervisory Relationships. The LSE is staffed with personnel from throughout AMC. It is the responsibility of the LSE commander and staff to integrate these personnel from diverse backgrounds into a working unit. The LSE commander and staff will promptly establish supervisory relationships within the LSE.

b. Personnel Performance Management. The LSE commander and staff will perform supervisory tasks related to civilian personnel appraisals in those cases where the employee is deployed 120 days or more.

c. Awards. The LSE commander will prepare and submit nominations for Incentive Awards for those employees who merit such recognition. The award nomination will be prepared and submitted by the LSE commander and his staff. The permanent supervisor will not make the nomination for his personnel after their redeployment. Guidance in this area is found in AR 600-8-22, Military Awards.

d. Disciplinary Actions. The LSE commander is responsible for maintaining order within his command. Civilian employees and contractor personnel are not subject to the Uniform Code of Military Justice when serving with or accompanying an armed force except in "time of war." The U.S. Supreme Court has interpreted this to mean during a Congressionally declared war and not during contingency operations such as Southwest Asia or Somalia. Any disciplinary problems requiring action will utilize normal administrative disciplinary procedures. Civilian employees are subject to the "chain of command" and disciplinary procedures which are the responsibility of the on-site commander. In cases resulting in a disciplinary or adverse action being proposed, the disciplinary action may be initiated or effected at home station or on site.

CHAPTER 13
LEGAL COUNSELING

GENERAL.

The AMC Office of the Command Counsel (AMCCC) has primary responsibility for and overall management of the legal counseling program for AMC civilian employees. All inquiries regarding the AMC legal counseling program for deploying civilians will be directed to AMCCC for action. AMCCC will coordinate, as necessary, with higher headquarters and the local legal office supporting the CONUS Replacement Center site where AMC civilians will be processing, to ensure that appropriate legal counseling is being provided to AMC's deploying civilians.

CHAPTER 14
FAMILY CARE PLAN/LEGAL ASSISTANCE

14-1. **FAMILY CARE PLAN.** Deployees are encouraged and will be counseled to prepare a Family Care Plan prior to deployment. The Legal Assistance Office will provide necessary support in reviewing and modifying the following documents, if required:

- a. Personal Will.
- b. Power Of Attorney.

14-2. **LEGAL ASSISTANCE.** a. Eligibility for legal assistance is covered in AR 27-3, The Army Legal Assistance Program.

b. Deploying civilian employees and their family members are entitled to legal assistance limited to matters (as determined by the supervising attorney) that relate to their participation in deployments such as contingencies, operations, or exercises.

c. Though all deploying civilian employees and their families are entitled to such assistance, the period of time during which they are eligible for legal assistance is dependent upon whether they encumber positions designated as emergency essential positions or are volunteers who were encumbering nonemergency essential positions prior to their deployment. Emergency essential employees will be eligible as soon as they encumber such positions. Nonemergency essential civilian employees who volunteer for deployment will be eligible upon notification of their deployment.

d. Legal assistance will be provided to eligible civilian employees and their family members at home station, or at any other military facility convenient to the deploying civilian employee or family member. The preference is for the legal assistance to be provided at home station, whenever possible.

e. Legal assistance services will be provided for matters related to deployment that arises before or during deployment. These services include Will preparation, Powers of Attorney, and basic income tax assistance.

CHAPTER 15
FAMILY SUPPORT GROUPS

GENERAL.

a. Family Support Groups provide assistance to family members of military and civilian employees prior to and during periods of family separation caused by deployment. These groups are organized to open lines of communication and provide information on available benefits. Family members are strongly encouraged to contact the installation Army Community Services Office for information.

b. Family Support Groups services normally include these services during predeployment, deployment, and postdeployment:

- (1) Outline available assistance.
- (2) Assist single parent and dual deploying families in preparing family care plans.
- (3) Coordinate with local and state human service assistance agencies and identify families with major problems which require special assistance.
- (4) Assist casualty assistance officers in providing support to survivors.
- (5) Assist families in relocating.
- (6) Provide support to waiting families.
- (7) Serve as sponsor for families with special needs.
- (8) Keep commanders abreast of major problems.
- (9) Establish groups to deal with reunification problems.

CHAPTER 16
ENTITLEMENTS

16-1. **OVERTIME/COMPENSATORY TIME.** a. It is command policy that all employees will be paid overtime for all work performed in excess of 8 hours per day and 40 hours per week. The in-theater commander has authority to set the work schedule and approve overtime/compensatory time.

b. General Schedule (GS) employees whose basic rate of pay does not exceed that of a GS-10, Step 1, will be paid at a rate of one and one-half times their basic hourly pay rate for each hour of work authorized and approved over the normal 8-hour day or 40-hour week. Employees whose rate exceeds that of a GS-10, Step 1, will be paid at the overtime rate of one and one-half times the basic hourly rate of GS-10, Step 1. Since it may not be possible to approve exact overtime hours in advance, the employee's travel orders should have this statement in the remarks column: "Overtime authorized at TDY site as required by the Field Commander." The field commander should then submit a DA Form 5172-R or local authorization form (with a copy of the travel orders) documenting the actual premium hours worked for each employee and each day of the pay period as soon as possible after the premium hours are worked. GS/General Manager (GM) employees who are exempt from the Fair Labor Standards Act (FLSA), designated by an "E" in the FLSA code block on their Leave and Earning Statement, may be granted compensatory time because they are required to be paid overtime at the rate of one and one-half times the basic hourly rate of GS-10, Step 1. When circumstances prohibit the timely reporting of premium hours worked, the in-theater commander may establish a set work schedule (i.e., 12-hour/7-day workweek). This schedule will be reported to the parent organization as the established hours of duty. Employees will be compensated based on this schedule. Any variations from the schedule due to leave, compensatory time, shift work, holidays, etc., will be reported to the employee's parent organization.

c. **Compensatory Time.** Overtime under field conditions will be considered occasional or irregular for payroll purposes. This allows GS/GM employees who are exempt from the FLSA (designated by an "E" in the FLSA code block of the Leave and Earnings Statement) to be granted compensatory time in lieu of overtime pay. Since pay is a home office responsibility, the employees will have up to 26 pay periods after that in which the compensatory time was earned to take the time off. After that, the compensatory time will be paid at the overtime rate in effect at the time worked. Wage grade employees are not eligible for compensatory time because they must be paid at the overtime rate one and one-half times their basic hourly rate. Compensatory time is subject to the same constraints/limitations of the pay cap.

16-2. **PAY.** a. **Sure Pay.** In order to ensure continuation of pay while detailed to support military operations in the field, Department of the Army policy requires civilian employees to join a direct deposit/electronic funds transfer (DD/EFT) program at their home installation before deployment. Once under DD/EFT the employee must remain in the program. All emergency essential employees are required to join a DD/DFT program as a condition of their

employment. Any errors by the Government resulting in charges by a financial institution will be reimbursed by the Defense Finance and Accounting Service Center servicing the employee. Letters of explanation will be sent to the recipients of any dishonored checks explaining that the dishonored check was the result of Government error, not an error on the part of the individual.

b. Salaries. Salaries are not tax free while on deployment. Likewise, salary deductions do not change while on deployment. If civilian employees are in a "missing" status, his/her pay and allowances continue. "Missing" status is defined as missing in action; interned in a foreign country; captured; beleaguered; or besieged by a hostile force; or detained in a foreign country against his/her will. Civilian employees will be entitled to receive the same pay and allowances they are entitled at the time they were declared missing, and to which they would become entitled thereafter (i.e., within grade increases).

16-3. **DANGER PAY.** Danger pay areas are designated by the Secretary of State (SECSTATE). The danger pay allowance is designed to provide additional compensation above basic compensation to all U.S. Government civilian employees for service at places in foreign areas where there exists conditions of civil insurrection, civil war, terrorism or wartime conditions which threaten physical harm or imminent danger to the health or well-being of a majority of employees stationed or detailed to that area. The allowance will be a percentage of the employee's basic compensation at the rates of 15, 20 or 25 percent as determined by the SECSTATE. However, a flat rate may be used in lieu of a percentage. This allowance is in addition to any foreign post differential (FPD) prescribed for the area but in lieu of any special incentive differential authorized the post prior to its designation as a danger pay area. The FPD will be reduced by any part attributable to political violence.

The combined danger pay and post differential must be at least 5 percent above the previous combined post differential and special incentive differential at the post, if any, in effect at the post prior to its designation as a danger pay area.

The danger pay commences for employees already in the area on the date of the area's designation for danger. For employees assigned or detailed to the area, danger pay commences upon arrival in the area. For employees returning to the post after a temporary absence, it commences on the date of return. Danger pay will terminate with the close of business on the date the SECSTATE removes the danger pay designation for the area or on the day the employee leaves the post for any reason for an area not designated for danger pay. Danger pay is not subject to the maximum salary limitation as described in this regulation. Danger pay is not part of the basic compensation for computation of within-grade step increases; however, for wage grade employees it is part of the employee's basic rate of pay for the computation of overtime, holiday, Sunday premium pay, retirement, Federal Employees Group Life Insurance (FEGLI), Federal Employee's Compensation Act (FECA) or Medicare, federal, state and city and local tax deductions. Danger Pay cannot exceed 25 percent of the employee's basic pay.

16-4. **FOREIGN POST DIFFERENTIAL (FPD).** Employees assigned to work in foreign areas where the environmental conditions either differ substantially from CONUS conditions or warrant added compensation as a recruiting and retention incentive are eligible for FPD after being stationed in the area in excess of 42 days. FPD is exempt from the pay cap and is paid as a percentage of the basic pay rate at the rates of 10, 15, 20 or 25 percent. The Office of the Secretary of State determines areas entitled to receive FPD and the FPD rate for that area. The SECSTATE also determines the length of time the rate is in effect. Different areas in the same country can have different rates.

16-5. **LEAVE ACCUMULATION.** Any annual leave in excess of the maximum permissible carryover is automatically forfeited at the end of the leave year. Annual leave forfeited during a combat or crisis situation which has been determined by appropriate authority to constitute an exigency of the public business may be temporarily restored. Normally, the employee shall request excess leave carry-over and has up to 2 years to use restored annual leave.

CHAPTER 17
MAXIMUM SALARY LIMITATION

GENERAL.

Basic pay plus premium pay is limited to the maximum biweekly earning of GS-15, Step 10. The Department of Defense has authority to waive the biweekly limitation of the GS-15, Step 10. The employee is then subject to the annual maximum rate of a GS-15. Hours of work and income must be monitored to ensure that employees do not reach the imposed ceiling, taking into account that the pay cap is imposed on annual earnings and not just on income earned during a period of mobilization. Danger pay is not subject to the premium pay cap. The pay limitation does not apply to wage grade employees.

CHAPTER 18
HOURS OF WORK

WORK SCHEDULE.

General. The authority for establishing and changing the work schedule for civilian employees is delegated to the in-theater commander or his representative. The duration of the established hours of duty is dependent upon the particular operation and will be established by the in-theater commander.

CHAPTER 19
TOUR OF DUTY/ROTATION POLICY

19-1. **TOUR OF DUTY.** The initial tour of duty for deploying personnel is 179 days. The LSE commander has authority to extend or reduce the designated tour of duty.

19-2. **ROTATION POLICY.** If the deployment's duration is extended or environmental factors are extreme, a rotation policy will be established by the LSE commander. The rotation policy must be uniformly applied across grade and organization. AMC must expend all possible effort to avoid penalizing individuals with hard-to-replace skills by retaining them in a deployed status for extended periods. Major subordinate commands should establish a rotation plan for replacement of redeploying personnel.

CHAPTER 20
CUSTOMS PROCESSING

ENTRANCE AND EXIT REQUIREMENTS.

Civilian employees entering and exiting a country will be subject to the customs processing procedures established for that country. The entrance and exit requirements are country specific and will be covered during processing for deployment. Returning civilians are also subject to reentry customs requirements of the United States.

CHAPTER 21
GENEVA CONVENTIONS/PRISONER OF WAR STATUS

a. The 1907 Hague Conventions and the 1949 Geneva Conventions are rules that were developed by the international community to govern the rules of warfare. These agreements have evolved into principles that are now recognized as part of the international law.

b. Under Geneva Conventions for Prisoners of War (GPW), civilians captured while accompanying military forces in the field, regardless if carrying a self-defense weapon or wearing a uniform, are entitled to be protected as Prisoners of War (POW) if captured by hostile forces. These protections are afforded to those POWs who are persons accompanying the armed forces without actually being members thereof provided they have received authorization from the armed forces which they accompany, and have been provided with an identity card, most notably the Geneva Convention Card (DD Form 489). Since the issuance of an identity card is significant, all civilians accompanying the armed forces must be issued a Geneva Convention Card. The treatment accorded to POWs depends on each POW's particular status or rank. The higher the status or rank, the greater the benefits afforded to that POW.

c. It is not a violation of the law of war for an EE employee to wear a uniform or to carry a weapon for self-defense while accompanying a military force. Capture of an EE employee by an opposing force while wearing a uniform or carrying a weapon does not deprive a civilian employee accompanying a military force of any Geneva Convention's protections.

d. If issued a personal weapon, that weapon is issued only for the individual civilian's personal protection from attack. It does not constitute authorization for a civilian to be assigned to guard duty, perimeter defense, or engage in offensive combat operations.

CHAPTER 22
COMMUNICATIONS

22-1. **MAILING ADDRESS.** Upon arrival in theater, the LSE Personnel Specialist shall provide appropriate mailing address and telephone number to HQ AMC DCSPER Operations Desk. DCSPER will disseminate information to MSCs/SRAs. The LSE Personnel Specialist shall provide in-theater employees with a standardized memo or post card to mail unit address to family members.

22-2. **TELEPHONE COMMUNICATION.** Based upon availability, the LSE Personnel Specialist shall establish policy with theater commander approval to allow one 5-minute phone call upon arrival and one phone call per month, as appropriate.

CHAPTER 23
MEDICAL CARE/FEDERAL EMPLOYEES
COMPENSATION ACT BENEFITS

23-1. **GENERAL.** a. All permanent employees with regularly scheduled tours of duty are eligible for coverage under the Federal Employee Health Benefits (FEHB) Program. These employees are also automatically covered by the Federal Employee's Compensation Act (FECA) (Workman's Compensation). The FEHB helps protect employees and family members from the expenses of illness and accident. Employees must register for FEHB during regularly designated "open seasons" and cannot initiate coverage because of detail to another area.

b. Employees will be permitted to select another health plan if they are currently insured under a Health Maintenance Organization (HMO) arrangement and one or all of their family members are moving out of the HMO serviced area. Employees under HMOs should consider electing a fee for service plan if their family will be moving outside the HMO serviced area during the period of deployment. In either case, employees are encouraged to continue medical coverage for their families.

c. Civilian employees who sustain injury or death while deployed may receive benefits provided by the FECA. Civilian employees who sustain a traumatic injury in the performance of duty must notify the on-site supervisor as soon as possible, but not later than 30 days from the date of the injury. If the employee is incapacitated, this action may be taken by someone acting on his/her behalf.

d. Civilian employees who require treatment for disease or injury sustained during the deployment will be provided care at no cost to the employee under the DOD Military Health Services System. The care provided will be equivalent to that received by active duty military personnel.

e. If a redeployed civilian employee suspects that an injury or illness is related to the deployment or occupation, the employee should follow the procedures and regulations established by the installation's Civilian Personnel Office and the Department of Labor.

23-2. **MEDICAL CARE.** Civilian employees who sustain work-related injury or death are covered under the provisions of the Federal Employee's Compensation Act. An employee who is outside of the United States because of his or her employment and who sustains disability or death from a war-risk hazard is entitled to medical treatment for work-related injuries, monetary compensation for wage loss, and rehabilitation services to aid injured employees to return to work.

CHAPTER 24
REVIEW AND UPDATE OF LIFE INSURANCE

Federal civilian employees are eligible for coverage under the Federal Employees Group Life Insurance (FEGLI) program. Death benefits (under basic and all forms of optional coverage) are payable regardless of cause of death. The Office of Personnel Management (OPM) has confirmed that civilians who are deployed with the military to combat support roles during times of crises are not "in actual combat" and are entitled to accidental death and dismemberment benefits under FEGLI in the event of death. Similarly, civilians carrying sidearms for personal protection are not "in actual combat." Employees should review the following forms prior to deployment:

- Designation of Beneficiary, CSRS (SF 2808)
- Designation of Beneficiary, FERS (SF 3102)
(The SF 2808 and SF 3102 are lump sum benefits or unpaid annuity.)
- Designation of Beneficiary, FEGLI (SF 2823)
- Designation of Beneficiary, (SF 1152 Unpaid Compensation Of Deceased Employee)
- Designation of Beneficiary, (TSP 3 Federal Retirement Thrift Savings Plan)

Employees should obtain a copy of the FEGLI booklet entitled "Description and Enrollment in the FEGLI Program". The booklet is available in local Civilian Personnel Offices (CPO). Employees who desire to obtain or increase FEGLI optional insurance should consult their servicing CPO for eligibility and evidence of insurability.

CHAPTER 25
CASUALTY OPERATIONS/PROCEDURES

25-1. **CASUALTY OPERATIONS.** Casualty operations include reporting, casualty notification and casualty assistance. Only those installations who are identified as Casualty Area Commands (CAC) are authorized to report casualties, perform notification of the next of kin, and provide casualty assistance. A casualty is defined as any person who is lost to the organization by reason of having been declared dead, wounded, injured, diseased, interned, captured, missing in action, beleaguered (an organization which has been surrounded by a hostile force to preclude escape of its members), besieged (an organizational element which has been surrounded by a hostile force for the purpose of compelling it to surrender), or detained. A diagram of the casualty reporting process is at [appendix K](#).

25-2. **NEXT OF KIN NOTIFICATION.** Next of kin notification is the responsibility of the Department of the Army and will be accomplished as soon as possible and in a professional, dignified, and understanding manner. In death and missing cases, notification will be made in person by a uniformed service representative to primary and secondary next of kin and confirmed by written communication.

After official notification by the Casualty Area Command, local commanders may contact the next of kin for expressions of condolence and offers of assistance. In some cases it may be necessary to appoint a Survivor Assistance Officer.

25-3. **RECORD OF EMERGENCY DATA.** As part of processing at the designated CRC, employees are required to complete a DD Form 93 (Record of Emergency Data). Where circumstances dictate that an employee deploys from his/her home station, it is the home station responsibility to ensure the DD Form 93 has been completed. In the event of a casualty, this information will be used for proper notification of next of kin. The original form will be mailed to the Casualty and Memorial Affairs Operations Center (CMAOC), a copy maintained at the CRC or home station and a copy hand carried by the employee to the theater of operations. To receive expeditious processing the envelope sent to the CMAOC will be marked to indicate the particular operation/contingency (i.e., DESERT STORM, OPERATION VIGILANT WARRIOR, BOSNIA).

25-4. **SALARY.** The Victims of Terrorism Compensation Act authorizes the continued salary of an employee when the employee is determined to be captured by a hostile force or detained in a foreign country against his or her will.

25-5. **ENTITLEMENTS.** Civilian employees killed in the line of duty are entitled to many of the same benefits as military casualties. Mortuary benefits for eligible employees include: search, recovery, and identification of remains; disposition of remains; removal and preparation of remains; casket; clothing; cremation (if requested); flag, escort; and transportation of remains to permanent duty station or other designated location.

25-6. **BENEFITS.** Due to the continuing changes in Federal laws and government regulations relating to benefits and entitlements and the many complexities involved with each case, every case must be handled on an individual basis. The Civilian Personnel Officer will appoint a Civilian Survivor Assistance Counselor to assist the next of kin in obtaining benefits and entitlements. Counselors should be familiar with all of the benefits and entitlements that are available to eligible family members. Veteran's Administration and Social Security Administration personnel are the experts on benefits offered under their programs. Activities are therefore encouraged to establish and maintain a dialogue with these program officials.

25-7. **ARMY COMMUNITY SERVICE (ACS).** The local ACS is also available to provide assistance to the next of kin of eligible family members.

CHAPTER 26
REDEPLOYMENT ACTIONS

26-1. POSTDEPLOYMENT MEDICAL EXAMINATION.

Redeploying civilian employees will be administered a postdeployment examination. This examination will be similar to the predeployment physical and is administered to identify medical conditions attributable to deployment.

26-2. CLOTHING/EQUIPMENT ACCOUNTABILITY.

a. Return of Clothing and Equipment. All clothing and equipment previously issued, will be returned to the CRC upon redeployment. As an alternative, the LSE may collect this property for backhaul prior to redeployment.

b. Release From Accountability. The deployed individual will receive proper documentation for all returned clothing and equipment. A reconciliation of issued and returned items of clothing and equipment will be conducted as a part of redeployment processing. Discrepancies will be adjusted by means of Cash Collection Voucher against the individual or Report of Survey.

26-3. COMPLETION OF TRAVEL VOUCHER.

A final travel voucher will be submitted to the servicing Finance and Accounting Office by deployed personnel within 15 days of return to home station. Copies of all completed settlement vouchers received from the servicing Finance and Accounting Office will be provided to the individual's command to assist in maintaining LSE-related cost data.

The proponent of this regulation is the United States Army Materiel Command. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) to the Commander, HQ AMC, ATTN: AMCPE-CE, 5001 Eisenhower Avenue, Alexandria, VA 22333-0001.

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TECOM/AMSTE-CT-N (4)
USASAC/AMSAC-IM-O (4)

APPENDIX A

REFERENCES

A related publication is merely a source of additional information. The user does not have to read it to understand this regulation.

Related Publications

AR 600-8-1
Army Casualty Operations/Assistance/Insurance

AR 600-8-14
Identification Cards, Tags and Badges

AR 600-8-22
Military Awards

AR 600-8-101
Soldier Readiness Processing

AR 690-11
Mobilization Planning and Management

DA PAM 690-47
DA Civilian Employee Deployment Guide

DODD 1400.10
Emergency Essential (E-E) DOD U.S. Citizen Civilian Employee Overseas

DODD 1400.31
Mobilization Management of DOD Civilian Workforce

DODD 1400.32
Mobilization Preparedness Planning for the DOD U.S. Citizen Civilian Workforce

AMC Civilian Deployment Guide, March 1994

AMC Commander's Pocket Guide to Civilian Deployment, October 1996

APPENDIX B

CIVILIAN DEPLOYMENT PACKET

1. DD FORM 93, RECORD OF EMERGENCY DATA.
2. TDY ORDERS (DD FORM 1610).
3. ABBREVIATED PERSONNEL FILE - DCPDS (ACPERS) REPORT PRODUCED BY THE LOCAL/SERVICING CPO.
4. PROOF OF COMPLETION OF SRP/POM REQUIREMENTS (DEPLOYMENT CHECKLIST).
5. DD FORM 2365 (DOD CIVILIAN EMPLOYEE OVERSEAS EMERGENCY ESSENTIAL POSITION AGREEMENT).

MEDICAL AND DENTAL FILE

1. COPY OF PANOGRAPHIC X-RAY.
2. DNA RECORD.
3. PHS FORM 731, SHOT RECORD.
4. DA FORM 8007, INDIVIDUAL MEDICAL HISTORY.

**SOLDIER AND CIVILIAN DEPLOYMENT
CHECKLIST**

For use of this form see AR 600-8-101; the proponent agency is DCSBOS

DATA REQUIRED

PURPOSE Information required for exercise/deployment.
ROUTINE USES Will be used to ascertain deployable/non-deployable status. Will also provide historical data for after action reports and reviews.
DISCLOSURE Disclosure of this information is voluntary. However, Failure to disclose information requested could result in improper processing.

NAME (Last, First, MI)	SSN	GRADE	MOS/AOC/OCC		
CURRENT UNIT/STATION	AC	TPU	IMA	IRR	ARNG

REASSIGNED OR ATTACHED TO (UNIT)

HEIGHT	WEIGHT	RELIGIOUS PREFERENCE	SEX (MALE/FEMALE)	CRC ARRIVAL DATE
--------	--------	----------------------	-------------------	------------------

Personnel Requirements

Level 1 (Basic Movement SRP)	N/A	NO GO	REASON	DATE CORRECTED	GO
*a. ETS within 7 days of deployment date?					
*b. Family Care Plan approved/on file? (if required)					
*c. SGLV 8286 reviewed/revised date?					
d. C DD Form 93 reviewed/revised date?					
*e. C Two ID tags w/metal necklace around neck? (worn at all times)					
*f. C Current ID card? (Civilians require DD Form 1173)					
*g. C Received Geneva Convention Card?					
Civilians Only:					
h. Civilian Personnel Data Sheet completed?					
i. Emergency Essential Mobility Agreement?					
Level 2 (Wartime Movement Stopper SRP)					
j. C Former Peace Corps member in deployment area? (cannot deploy in any Intel capacity to country in which worked)					
*k. C POW in deployment area? (waiverable)					
*l. C German alien or U.S./Turkish citizen? (cannot send to Germany or Turkey)					
*m. Sole Surviving family member? (waiverable)					
n. 12 wks BT/AIT/equivalent completed?					
*o. 3/4 physical profile, not evaluated by MMR, is deployable?					
p. C Initiated passport/visa (if required for area)?					
Level 3 (Other SRP)					
*q. Pending discharge/separation/reassignment/human reliability program?					
*r. Approved conscientious objector (Class 1-A-O)?					
*s. Review/update: (circle one) 2A & DA Form 2-1 or 2B & ORB					
t. C Passport/Visa (if required) received?					
u. Army Linguist? YES/NO (circle one) If YES: Language: Certification Date:					
Level 4 (Deployment)					
*v. C Passport/Visa required for area?					
w. Pending Administrative action? Reason:					

SAMPLE

CERTIFYING OFFICIAL (Home Station)	DATE	CERTIFYING OFFICIAL (Deployment Site)	DATE CORRECTED
------------------------------------	------	---------------------------------------	----------------

NOTES: * denotes areas required for deployment IAW AR 600-8-101
 'C' denotes areas also required for Civilian processing

Medical Requirements					
Level 1 (Basic Movement SRP)	N/A	NO GO	REASON	DATE CORRECTED	GO
*a.C HIV cleared?					
b.C Blood type:					
c.C DNA sample collected?					
Level 2 (Wartime Movement Stopper SRP)					
*d.C Are you Pregnant? Yes/No (circle one)					
*e. Assigned to Qtrs/MTF?					
*f.C Current Immunizations?					
*g. Requires eyeglasses? (2 pairs; 1 civilian pair is OK) (Civilians must bring 2 pairs)					
*h.C Requires inserts? (1 pair)					
*i.C Requires hearing aid? (w/extra batteries)					
*j.C Requires Medical Warning Tags?(wears 2) Reason needed:					
*k.C HIV positive/test date older than 24 months?					
l.C Personal prescription(s)? (90 day supply)					
m. Medical Holding?					
LEVEL 3 (Other SRP)					
*n. Medical Records review (SF 93)/Interview?					
*o. Exceptional Family Member referred/enrolled? (If required)					
p. DA Form 8007 completed?					
Level 4 (Deployment)					
*q.C HIV cleared? (w/n 24mo for 179-days, or w/n 6 mo for 180+ days) Last test date:					
*r.C Immunizations required for deployment area?					
s.C Preventive Medicine Brief?					
t.C Pregnancy test administered?					
CERTIFYING OFFICIAL (Home Station)	DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Dental Requirements					
Level 1 (Basic Movement SRP)					
*a.C Complete dental record on file with appropriate record custodian					
Level 3 (Other SRP)					
*b. Dental Class 3/4 treatment completed?					
*c. Duplicate panoramic X-RAY on file at Central Panograph Storage Facility (CPSF)?					
CERTIFYING OFFICIAL (Home Station)	DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Legal Affairs Requirements					
Level 2 (Wartime Movements Stopper SRP)					
*a.C Received Geneva Convention brief? (during current enlistment/career)					
Level 3 (Other SRP)					
*b.C Pending civil felony charges?(may not deploy)					
*c.C Requires Power(s) of Attorney?					
*d.C Requires a Will?					
*e.C Counseled on insurance/civil matters?					
Level 4 (Deployment)					
*f.C Briefed on local laws for deployment area?					
CERTIFYING OFFICIAL (Home Station)	DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	

SAMPLE

NOTES: * denotes areas required for deployment IAW AR 600-8-101
 'C' denotes areas also required for Civilian processing

Training Requirements						
Level 1 (Basic Movement SRP)		N/A	NO GO	REASON	DATE CORRECTED	GO
a.C Issued Central Issue Facility(CIF)?						
b.C Issued Clothing Initial Issue Point (CIIP)?						
c.C Issued Chemical Defense Equip (CDE)?						
Level 2 (Wartime Movement Stopper SRP)						
*d.C Weapons qualified within last 12 months? Date						
e. APFT within last 12 months?						
f. CTT within last 24 months?						
Level 4 (Deployment)						
*g.C Received terrorist briefing?						
h.C Weapon issued? (Civilians receive 9mm) Serial #						
*i. Family members received deployment briefing?						
CERTIFYING OFFICIAL (Home Station)		DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Security Clearance Requirement						
Level 2 (Wartime Movement Stopper SRP)						
*C Meets security clearance requirements for current duty position & deployment area? (if required)						
CERTIFYING OFFICIAL (Home Station)		DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Finance Requirements						
Level 3 (Other SRP)						
*a.C Enrolled in SUREPAY/Direct Deposit?						
*b. Initiate/change allotment(s)?						
*c. Entitlements verified?						
*d. Settle any travel claim(s)?						
CERTIFYING OFFICIAL (Home Station)		DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Installation Requirements						
CHAPLAIN SERVICES						
TRANSPORTATION:						
a. Completed HHG/Personal Property arrangements?						
b. Requires Transportation Arrangements?						
PROVOST MARSHAL:						
c. Completed vehicle storage report (DD Form 2506)?						
d. Completed disposition of private weapons?						
HOUSING OFFICE:						
e. Requires housing/lease/notification of absence?						
ARMY COMMUNITY SERVICE:						
f. Family information/assistance provided?						
CERTIFYING OFFICIAL (Home Station)		DATE	CERTIFYING OFFICIAL (Deployment Site)		DATE CORRECTED	
Final Check						
THIS SOLDIER IS		DEPLOYABLE		NONDEPLOYABLE REASON:		
Signature and Date of Unit/CRC Certifying Official			Signature and Date of Installation Validation Authority For Deployment			
NOTES: * denotes areas required for deployment LAW AR 600-8-101 'C' denotes areas also required for Civilian processing						

SAMPLE

REPORT OF MEDICAL HISTORY

(THIS INFORMATION IS FOR OFFICIAL AND MEDICALLY-CONFIDENTIAL USE ONLY AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONS)

1. LAST NAME—FIRST NAME—MIDDLE NAME				2. SOCIAL SECURITY OR IDENTIFICATION NO.							
3. HOME ADDRESS (No. street or RFD, city or town, State, and ZIP CODE)				4. POSITION (title, grade, component)							
5. PURPOSE OF EXAMINATION			6. DATE OF EXAMINATION		7. EXAMINING FACILITY OR EXAMINER, AND ADDRESS (Include ZIP Code)						
8. STATEMENT OF EXAMINEE'S PRESENT HEALTH AND MEDICATIONS CURRENTLY USED (Follow by description of past history, if complaint exists)											
9. HAVE YOU EVER (Please check each item)						10. DO YOU (Please check each item)					
YES	NO	(Check each item)				YES	NO	(Check each item)			
		Lived with anyone who had tuberculosis						Wear glasses or contact lenses			
		Coughed up blood						Have vision in both eyes			
		Bled excessively after injury or tooth extraction						Wear a hearing aid			
		Attempted suicide						Stutter or stammer habitually			
		Been a sleepwalker						Wear a brace or back support			
11. HAVE YOU EVER HAD OR HAVE YOU NOW (Please check at left of each item)											
YES	NO	DON'T KNOW	(Check each item)			YES	NO	DON'T KNOW	(Check each item)		
			Scarlet fever, erysipelas						Traction or locked knee		
			Rheumatic fever						Stomach trouble		
			Swollen or painful joints						Neuritis		
			Frequent or severe headache						Paralysis (include infantile)		
			Dizziness or fainting spells						Epilepsy or fits		
			Eye trouble						Car, train, sea or air sickness		
			Ear, nose, or throat trouble						Frequent trouble sleeping		
			Hearing loss						Depression or excessive worry		
			Chronic or frequent colds						Loss of memory or amnesia		
			Severe tooth or gum trouble						Nervous trouble of any sort		
			Sinusitis						Periods of unconsciousness		
			Hay Fever								
			Head injury								
			Skin diseases								
			Thyroid trouble								
			Tuberculosis								
			Asthma								
			Shortness of breath								
			Pain or pressure in chest								
			Chronic cough								
			Palpitation or pounding heart								
			Heart trouble								
			High or low blood pressure								
13. WHAT IS YOUR USUAL OCCUPATION?						12. FEMALES ONLY: HAVE YOU EVER					
									Been treated for a female disorder		
									Had a change in menstrual pattern		
14. ARE YOU (Check one)											
						<input type="checkbox"/> Right handed		<input type="checkbox"/> Left handed			

SAMPLE

YES	NO	CHECK EACH ITEM YES OR NO. EVERY ITEM CHECKED YES MUST BE FULLY EXPLAINED IN BLANK SPACE ON RIGHT	
		<p>15. Have you been refused employment or been unable to hold a job or stay in school because of:</p> <p>A. Sensitivity to chemicals, dust, sunlight, etc.</p> <p>B. Inability to perform certain motions.</p> <p>C. Inability to assume certain positions.</p> <p>D. Other medical reasons (If yes, give reasons.)</p> <p>16. Have you ever been treated for a mental condition? (If yes, specify when, where, and give details.)</p> <p>17. Have you ever been denied life insurance? (If yes, state reason and give details.)</p> <p>18. Have you had, or have you been advised to have, any operations? (If yes, describe and give age at which occurred.)</p> <p>19. Have you ever been a patient in any type of hospitals? (If yes, specify when, where, why, and name of doctor and complete address of hospital.)</p> <p>20. Have you ever had any illness or injury other than those already noted? (If yes, specify when, where, and give details.)</p> <p>21. Have you consulted or been treated by clinics, physicians, healers, or other practitioners within the past 5 years for other than minor illnesses? (If yes, give complete address of doctor, hospital, clinic, and details.)</p> <p>22. Have you ever been rejected for military service because of physical, mental, or other reasons? (If yes, give date and reason for rejection.)</p> <p>23. Have you ever been discharged from military service because of physical, mental, or other reasons? (If yes, give date, reason, and type of discharge: whether honorable, other than honorable, for unfitness or unsuitability.)</p> <p>24. Have you ever received, is there pending, or have you applied for pension or compensation for existing disability? (If yes, specify what kind, granted by whom, and what amount, when, why.)</p>	
<p>I certify that I have reviewed the foregoing information supplied by me and that it is true and complete to the best of my knowledge. I authorize any of the doctors, hospitals, or clinics mentioned above to furnish the Government a complete transcript of my medical record for purposes of processing my application for this employment or service.</p>			
TYPED OR PRINTED NAME OF EXAMINEE		SIGNATURE	
<p>NOTE: HAND TO THE DOCTOR OR NURSE, OR IF MAILED MARK ENVELOPE "TO BE OPENED BY MEDICAL OFFICER ONLY." 25. Physician's summary and elaboration of all pertinent data (Physician shall comment on all positive answers in items 9 through 24. Physician may develop by interview any additional medical history he deems important, and record any significant findings here.)</p>			
TYPED OR PRINTED NAME OF PHYSICIAN OR EXAMINER		DATE	SIGNATURE
			NUMBER OF ATTACHED SHEETS

SAMPLE

TO BE GIVEN TO PERSON EXAMINED WITH A PRE-ADDRESSED "CONFIDENTIAL-MEDICAL" ENVELOPE.

UNITED STATES CIVIL SERVICE COMMISSION CERTIFICATE OF MEDICAL EXAMINATION

Form Approved Budget Bureau No. 50-R0073

Part A. TO BE COMPLETED BY APPLICANT OR EMPLOYEE (type or print in ink)

1. NAME (Last, first, middle) 2. SOCIAL SECURITY ACCOUNT NO. 3. SEX [] MALE [] FEMALE 4. DATE OF BIRTH 5. DO YOU HAVE ANY MEDICAL DISORDER OR PHYSICAL IMPAIRMENT WHICH WOULD INTERFERE IN ANY WAY WITH THE FULL PERFORMANCE OF THE DUTIES SHOWN BELOW? [] YES [] NO 6. I CERTIFY THAT ALL THE INFORMATION GIVEN BY ME IN CONNECTION WITH THIS EXAMINATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF (signature of applicant)

Part B. TO BE COMPLETED BEFORE EXAMINATION BY APPOINTING OFFICER

1. PURPOSE OF EXAMINATION [] REAPPOINTMENT [] OTHER (specify) 2. POSITION TITLE 3. BRIEF DESCRIPTION OF WHAT POSITION REQUIRES EMPLOYEE TO DO Serves as a Deployable Civilian of the U.S. Army Materiel Command, which requires individuals to deploy overseas in support of mobilization, major field exercises, and be able to live in a field environment. There will be total exposure to the prevailing weather conditions at the particular geographical locations of military activities worldwide. 4. Circle the number preceding each functional requirement and each environmental factor essential to the duties of this position. List any additional essential factors in the blank spaces. Also, if the position involves law enforcement, air traffic control, or fire fighting, attach the specific medical standards for the information of the examining physician. A. FUNCTIONAL REQUIREMENTS 1. Heavy lifting, 45 pounds and over 2. Moderate lifting, 15-44 pounds 3. Light lifting, under 15 pounds 4. Heavy carrying, 45 pounds and over 5. Moderate carrying, 15-44 pounds 6. Light carrying, under 15 pounds 7. Straight pulling (hours) 8. Pulling hand over hand (hours) 9. Pushing (hours) 10. Reaching above shoulder 11. Use of fingers 12. Both hands required 13. Walking (2 hours) 14. Standing (2 hours) 15. Crawling (hours) 16. Kneeling (1/2 hours) 17. Repeated bending (1/2 hours) 18. Climbing, legs only (hours) 19. Climbing, use of legs and arms 20. Both legs required 21. Operation of crane, truck, tractor, or motor vehicle 22. Ability for rapid movement, muscle coordination time 23. Ability to handle irregularity of using fingers 24. Near vision correctable at 13" to 16" to 25. Far vision correctable in one eye to 20/20 and to 20/40 in the other 26. Far vision correctable in one eye to 20/50 and to 20/100 in the other 27. Specific visual requirement (specify) * 28. Both eyes required 29. Depth perception 30. Ability to distinguish basic colors 31. Ability to distinguish shades of colors 32. Hearing (aid permitted) 33. Hearing without aid 34. Specific hearing requirements (specify) 35. Other (specify) Emotional and mental stability. *Near vision correctable to 20/30 in either eye; Far vision correctable to 20/40 B. ENVIRONMENTAL FACTORS 11. Silica, asbestos, etc. 12. Fumes, smoke, or gases 13. Solvents (degreasing agents) 14. Grease and oils 15. Radiant energy 16. Electrical energy 17. Slippery or uneven walking surfaces 18. Working around machinery with moving parts 19. Working around moving objects or vehicles 20. Working on ladders or scaffolding 21. Working below ground 22. Unusual fatigue factors (specify) Stress 23. Working with hands in water 24. Explosives 25. Vibration 26. Working closely with others 27. Working alone 28. Protracted or irregular hours of work 29. Other (specify) High altitude; Flying in military aircraft

Part C. TO BE COMPLETED BY EXAMINING PHYSICIAN

1. EXAMINING PHYSICIAN'S NAME (type or print) 2. ADDRESS (including ZIP Code) 3. SIGNATURE OF EXAMINING PHYSICIAN (signature) (date) IMPORTANT: After signing, return the entire form intact in the pre-addressed "Confidential-Medical" envelope which the person you examined gave you.

NOTE TO EXAMINING PHYSICIAN: The person you are about to examine will have to cope with the functional requirements and environmental factors circled on the other side of this form. Please take them, and the brief description of job duties above them, into consideration as you make your examination and report your findings and conclusions.

1. HEIGHT: _____ FEET, _____ INCHES. WEIGHT: _____ POUNDS.

2. EYES:
 (A) Distant vision (Snellen): without glasses: right ²⁰ left ²⁰; with glasses, if worn: right ²⁰ left ²⁰
 (B) What is the longest and shortest distance at which the following specimen of Jaeger No. 2 type can be read by the applicant? Test each eye separately.

Jaeger No. 2 Type
 employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representative. This order will supplement the Executive Orders of May 29 and June 18, 1923 (Executive Order, September 4, 1924).

without glasses: with glasses, if used:
 R. _____ in. to _____ in. R. _____ in. to _____ in.
 L. _____ in. to _____ in. L. _____ in. to _____ in.

(C) Color vision: Is color vision normal when Ishihara or other color plate test is used? YES NO
 If not, can applicant pass lantern, yarn, or other comparable test? YES NO

3. EARS: (Consider denominators indicated here as normal. Record as numerators the greatest distance heard.)
 Ordinary conversation: Audiometer (if given):

RIGHT EAR _____; LEFT EAR _____
 20 ft. 20 ft.

250	500	1000	2000	3000	4000	5000	6000	7000	8000

4. OTHER FINDINGS: In items a through l briefly describe any abnormality (including diseases, scars, and disfigurements). Include brief history, if pertinent. If normal, so indicate.

a. Eyes, ears, nose, and throat (including teeth and oral hygiene)	e. Abdomen
b. Head and back (including face, hair, and scalp)	f. Peripheral blood vessels
c. Speech (note any malfunction)	g. Extremities
d. Skin and lymph nodes (including thyroid gland)	h. Urinalysis (if indicated) Sp. gr. _____ Sugar _____ Blood _____ Albumen _____ Casts _____ Pus _____
i. Respiratory tract (X-ray if indicated)	
j. Heart (size, rate, rhythm, function) Blood pressure _____ Pulse _____ EKG (if indicated)	
k. Back (special consideration for positions involving heavy lifting and other strenuous duties)	
l. Neurological and mental health	

SAMPLE

CONCLUSIONS: Summarize below any medical findings which, in your opinion, would limit this person's performance of the job duties and/or would make him a hazard to himself or others. If none, so indicate.

- No limiting conditions for this job
- Limiting conditions as follows:

APPENDIX F

REQUIREMENTS OF A COMPLETE PHYSICAL EVALUATION (PE)
(AMC Deployable Civilians)

NOTE: This appendix is intended to guide medical personnel and DC managers.

General: Emphasis will be placed on diagnosing cardiovascular, pulmonary, orthopedic, neurologic, endocrine, dermatologic, psychological, visual, and auditory conditions which may preclude performing the related functional requirements under harsh environmental conditions. The evaluation must be performed by a physician or PA.

Documents:

SF 93 - Report of Medical History (appendix D).
SF 73 - Certificate of Medical Examination (appendix E).

Requirements:

UA (urinalysis)
CBC (complete blood count)
LFTs (liver function tests)
Lipid Profile (fasting)
FBS (fasting blood sugar)
EKG (electrocardiogram)
PFTs (pulmonary function tests; initially, then as indicated
by history)
CXR (chest X-ray; initially, then as indicated by history)
Visual Acuity
Tonometry (over 35 years old)
Audiometry
Medical History (SF 93)
Occupational History (SF 93)
HRA (Health Risk Appraisal)
CVSP (Cardiovascular Screening Program; if 40+ years old)
Certificate of Medical Examination (SF 78, parts A, B, & C)

The physician's/PA's written opinion is recorded at the bottom of part C, SF 78.

APPENDIX G

REQUIREMENTS OF AN ANNUAL PHYSICAL EVALUATION (PE)
(AMC Emergency Essential Personnel)

NOTE: This appendix is intended to guide medical personnel and DC managers.

General: Emphasis will be placed on diagnosing--through interval history--cardiovascular, pulmonary, orthopedic, neurologic, endocrine, dermatologic, psychological, visual, and auditory conditions which may preclude performing the related functional requirements under harsh environmental conditions. The evaluation must be performed by a physician or PA. Further testing and physical examination is at the discretion of the physician/PA.

Documents:

SF 93 - Report of Medical History (appendix D)

SF 78 - Certificate of Medical Examination (appendix E)

Requirements:

Medical History (SF 93)

Occupational History (SF 93)

Written Opinion (SF 78, parts, A, B, bottom of C)

The physician's/PA's written opinion is recorded at the bottom of part C, SF 78.

APPENDIX H

AMC EEP READINESS CHECKLIST

NOTE: This appendix is intended to guide medical personnel, EEP, and EEP managers. During preplacement, yearly, and before deployment, EEP should revalidate the following requirements. While not every requirement must be done each time, all items should be checked to ensure they are up to date, on file, current, etc. See paragraph 6-6 for detailed guidance.

Components of Medical Readiness.

- a. Physical Evaluation - yearly, undergoing appropriate type of PE.
- b. Immunizations and Tuberculin Skin Test (TST) - review yearly and before deployment.
- c. Records (medical, dental, immunization) - check for presence and completeness.
- d. Dental Examination - yearly.
- e. Panograph - current and on file in dental record.
- f. DNA Sample - in medical record and at central repository.
- g. HIV Test - if required by country of deployment.
- h. Medical Alert ID Tags - check yearly and before deployment.
- I. Mask optical inserts - check yearly and before deployment.
- j. Chemoprophylaxis and Medicines - before deployment.
- k. Other Items (2 pair glasses, extra hearing aid batteries, etc.) - check yearly and before deployment.

APPENDIX I

AMC VOLUNTEER READINESS CHECKLIST

NOTE: This appendix is intended to guide medical personnel, volunteers, and DC managers. Volunteers must accomplish the following requirements before deployment. See paragraph 6-6 for detailed guidance.

Components of Medical Readiness.

- a. Physical Evaluation - Complete PE.
- b. Immunizations and Tuberculin Skin Test (TST).
- c. Records (medical, dental, immunization) - check for presence and completeness.
- d. Dental Examination.
- e. Panograph - current and on file in dental record.
- f. DNA Sample - in medical record and at central repository.
- g. HIV Test - if required by country of deployment.
- h. Medical Alert ID Tags.
- I. Mask optical inserts.
- j. Chemoprophylaxis and Medicines.
- k. Other Items (2d pair of glasses, extra hearing aid batteries, etc.).

APPENDIX J

ORGANIZATIONAL CLOTHING AND INDIVIDUAL EQUIPMENT (OCIE)

1. The following OCIE items may be issued at the designated CONUS Replacement Center.

a. Chemical Defense Clothing Equipment:

- Protective Mask and Optical Inserts
- Overgarments, Chemical (Proper size/required)
- Hood, Protective Mask
- Overshoes
- Gloves with inserts

b. Battle Dress Uniform (2) (Desert if required)

- Coat
- Trousers
- Hat
- Boots (2 pairs)

c. Individual Equipment:

- 2 - Canteens
- 1 - Belt/Individual
- 1 - Duffel Bag
- 1 - Poncho
- 1 - Sleeping Bag
- 2 - Blankets
- 2 - Waterproof Bags
- 1 - First Aid Case

d. Extreme Weather Clothing Equipment: Appropriate clothing and equipment will be issued based on the weather conditions in the theater of operations.

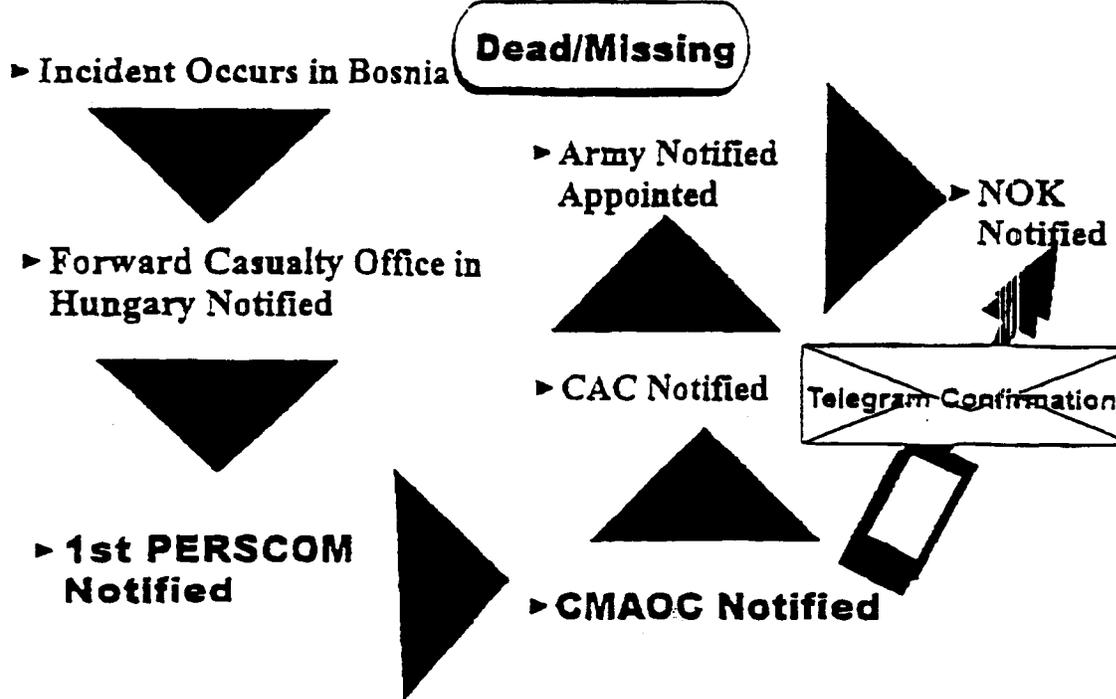
2. The following personal items are recommended:

- Personal Will
- Power of Attorney
- Telephone Calling Card
- Government Issued Credit Card
- Personal Medication (90 Days Suggested)
- Extra Pair of Glasses
- Disposable Razors/Shaving Kit
- Personal Hygiene Items (toothpaste, deodorant, etc.)

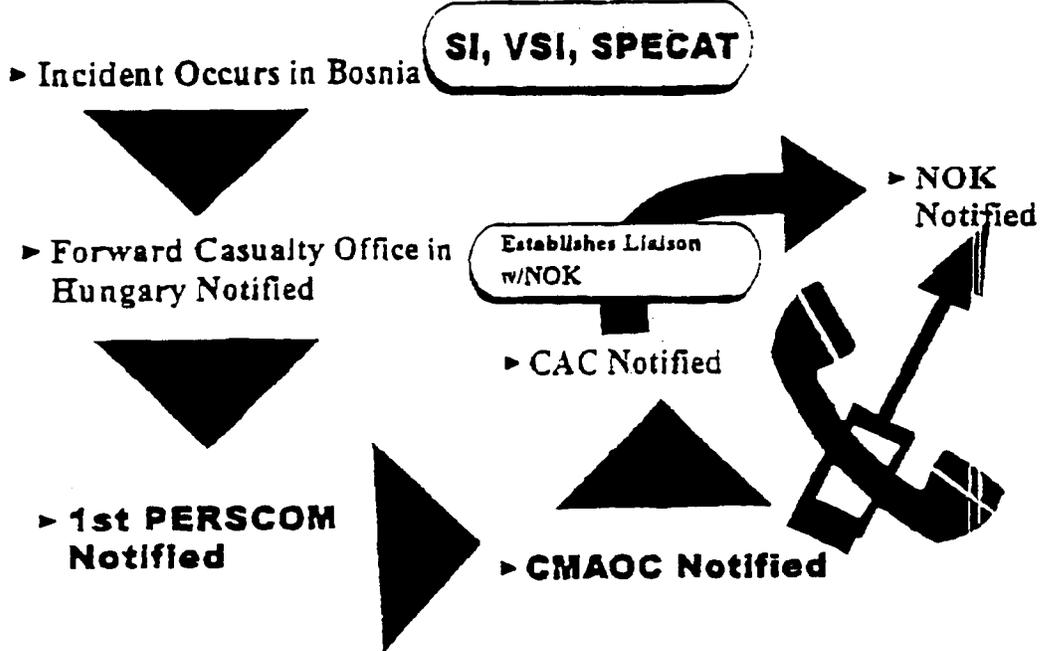
Personnel items - (continued)

- Zip lock bags in various sizes
- Towels and Wash Cloths
- Underwear (enough for 2 weeks)
- Radio (battery powered) FM or Short Wave
- Alarm Clock (battery powered)
- Socks (to be worn with boots)
- Safety Shoes (if required for your job)
- Sewing Kit
- Sun Glasses
- Stationery and Stamps
- Extra Batteries for Radios/Hearing Aids/Games
- Extra Civilian Clothing (approximately 5 sets),
2 casual, 3 for work.
- Blank Checks (banking facilities may/may not
be available)

Casualty Reporting



Civilian Casualty Reporting



GLOSSARY

AMC	United States Army Materiel Command
AMCCC	AMC Office of the Command Counsel
AO	area of operation
AOAP	Army Oil Analysis Program
AR	Army Regulation
CAC	Casualty Area Commands
CDE	chemical defensive equipment
CMAOC	Casualty and Memorial Affairs Operations Center
CONUS	continental United States
CPO	Civilian Personnel Office
CRC	CONUS Replacement Center
CS	combat support
CSS	combat service support
CTA	Common Table of Allowances
DA	Department of the Army
DAC	Department of the Army Civilian
DC	deployable civilian
DCPDS	Defense Civilian Personnel Data System
DCSPER	Deputy Chief of Staff for Personnel
DD/EFT	direct deposit/electronic funds transfer
DNBI	disease and nonbattle injury
DOD	Department of Defense
DTF	Dental Treatment Facility
EE	emergency essential
EEP	emergency essential personnel
FECA	Federal Employee's Compensation Act
FEGLI	Federal Employees Group Life Insurance
FEHB	Federal Employee Health Benefits
FLSA	Fair Labor Standards Act
FPD	Foreign Post Differential
GM	General Manager
GPW	Geneva Conventions for Prisoners of War
GS	General Schedule
HIV	Human Immunodeficiency Virus
HMO	Health Maintenance Organization
HQ	Headquarters
ID	identification
IMA	Installation Medical Authority
INMARSAT	International Maritime Satellite
LAO	Logistics Assistance Office
LAP	Logistics Assistance Program
LAR	Logistics Assistance Representative
LOGSA	Logistics Support Activity
LSE	Logistics Support Element
MEDDAC	Medical Activity
MSC	major subordinate command
MTF	Medical Treatment Facility
NRP	nonunit related personnel

OCIE	organizational clothing and individual equipment
OMA	Operations and Maintenance Appropriation, Army
OOTW	operations other than war
OPM	Office of Personnel Management
PA	physician assistant
PE	physical evaluation
POD	Point of Debarkation
POM	preparation for overseas movement
POR	preparation for overseas replacement
POW	Prisoner of War
SECSTATE	Secretary of State
SRA	separate reporting activities
SRP	Soldier Readiness Processing
TDA	Table of Distribution and Allowances
TDY	temporary duty
TMDE	test, measurement, and diagnostic equipment
TOC	Tactical Operations Center
TSP	Thrift Savings Plan
TST	Tuberculin Skin Test