



**DEPARTMENT OF THE NAVY**

BUREAU OF MEDICINE AND SURGERY  
2300 E STREET NW  
WASHINGTON DC 20372-7300

IN REPLY REFER TO

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Ser M00WII/E10UGEN014690c

10 Dec 10

MEMORANDUM FOR COMMANDER, NAVY MEDICINE EAST  
COMMANDER, NAVY MEDICINE WEST  
COMMANDER, NAVY MEDICINE NATIONAL CAPITAL AREA  
COMMANDER, NAVY MEDICINE SUPPORT COMMAND

Subj: IMPLEMENTING REQUIRED MEDICAL EXAM BEFORE ADMINISTRATIVE  
SEPARATION FOR POST TRAUMATIC STRESS DISORDER (PTSD) OR  
TRAUMATIC BRAIN INJURY (TBI)

Ref: (a) DoD Instruction 1332.14  
(b) NAVMED P-117, CHAPTER 15/-1  
(c) MILPERSMAN 1910-702  
(d) CMC WASHINGTON DC 0910307 JUN 10 (MARADMIN 328-10)

1. Navy Medicine is fully committed to the comprehensive care and treatment of our wounded, ill and injured warriors who are expected to maintain the same high standards of good order and discipline that the Nation expects of all Service members, regardless of their medical status. All Navy and Marine Corps leaders play crucial roles that balance the welfare of the individual Service member with good order and discipline and mission accomplishment.

2. As part of the administrative separation process under the provisions of reference (a), a medical evaluation of a Service member must be performed per reference (b). These medical evaluations shall be completed by medical providers authorized to perform separation evaluations and shall be sufficient in scope and timing to meet separation medical requirements.

3. In addition to the requirements stated above, a Service member must receive additional evaluation to assess whether the effects of Post Traumatic Stress Disorder or Traumatic Brain Injury constitute matters in extenuation that relate to the basis for administrative separation if the member:

- a. Is being administratively separated under a characterization other than Honorable; and
- b. Was deployed overseas to a contingency operation during the previous 24 months (NOTE: Marine Corps guidance (reference (d)) does not state a time limit); and
- c. Is diagnosed by a Physician, Clinical Psychologist, or Psychiatrist as experiencing PTSD or TBI, or reasonably alleges the influence of PTSD or TBI based on deployed service to a contingency operation during the previous 24 months; and
- d. Is not being separated under courts-martial or other proceedings.

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4. Medical providers performing separation evaluations shall ensure Service members meeting the criteria outlined above will be further evaluated by appropriately privileged health care professionals. In a case involving PTSD, the evaluation shall be performed by a Clinical Psychologist or Psychiatrist. In a case involving TBI, the evaluation may be performed by a Physician, Clinical Psychologist, Psychiatrist, or other health-care professional, as appropriate. Evaluations must specifically include comments on the presence or absence of PTSD and/or TBI, and if present, the extent to which the diagnoses affected the Service member's judgment and may have been a contributing factor in the basis for separation.
5. Completed evaluations for PTSD and/or TBI shall be forwarded to the referring provider responsible for completion of the separation evaluation. The provider conducting the separation evaluation will then forward required medical information to the responsible Separation Authority per reference (c) or (d).
6. A Service member receiving a medical evaluation shall not be separated until the result of the medical evaluation has been reviewed by appropriate authorities responsible for evaluating, reviewing, and approving the separation case, as determined by the Secretary of the Navy.
7. My point of contact for questions is CAPT Richard Bergthold, MSC, USN, who may be reached at (202) 762-3054 or [Richard.Bergthold@med.navy.mil](mailto:Richard.Bergthold@med.navy.mil).



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