BUMED INSTRUCTION 6120.20B CHANGE TRANSMITTAL

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

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

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

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

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

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

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

J. WILLIAM COX

Stocked:
CO, NAVPUBFORMCEN
5801 Tabor Ave.
Phila., PA 19120
BUMED INSTRUCTION 6120.20B

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

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

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

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

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

2. Cancellation. BUMEDINST 6120.20A.

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

4. Policy

   a. An evaluation of sobriety can have many legal and administrative ramifications. It must be carefully made. The admissibility of evidence gained from such an evaluation is not a matter for Medical Department personnel to decide. No evidentiary privilege attaches to the information. Medical personnel can legally be required to provide a complete report of their findings to the requesting authority without the consent of the patient. Subject to the requirements of this instruction, medical personnel shall cooperate with law enforcement personnel and other proper authorities in evaluating sobriety, determining competence for duty, making bodily views, and accomplishing bodily intrusions without regard to the legal competence of the evidence to be obtained.
b. In instances of need for samples of body fluids for therapeutic purposes, such samples may be drawn and may be used both for medical purposes and appropriate evidentiary purposes.

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

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

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

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

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

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

5. Action

a. Medical Department personnel shall assist in executing views of or intrusions into the body in conformance with the policies set forth above when so requested by competent authority.
b. Addressees shall use NAVMED 6120/1 in accordance with the instructions on the form and the requirements of this instruction to record the results of competence for duty examinations and evaluations of sobriety when requested by proper authority. (A sample of NAVMED 6120/1 is provided as enclosure (1)). Previous editions of NAVMED 6120/1 are obsolete.

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

6. Form. NAVMED 6120/1, Competence for Duty Examination, is available from the Cog 11 stock points of the Navy Supply System.

J. WILLIAM COX

Stocked:
CO, NAVPUBFORMCEN
5801 Tabor Ave.
Phila., PA 19120
COMPETENCE FOR DUTY EXAMINATION

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

DEFINITION OF COMPETENCE FOR DUTY

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

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

INSTRUCTIONS

1. Items 1-12 shall be completed in duplicate by the commanding officer or other proper authority requesting examination.
2. Items 13-49 shall be completed by medical officer conducting examination. Under item 13, History, include information provided by examinee as to ingestion and quantity of alcoholic beverage, narcotic drug substance, or food, and time taken. Note any evidence of disease or injury (other than the condition prompting this examination) in item 16.
3. When conducting an examination for competence for duty and individual is accused or suspected of an offense, comply with BuMedInst 6120.20 series.
4. All treatment provided at the time of examination shall be entered on form NAVMED 6150/3, Sick Call Treatment Record.

<table>
<thead>
<tr>
<th>A. REQUEST FOR EXAMINATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. TO</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

It is requested that a physical examination be given the following individual to determine competence for duty:

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

7. REASON FOR REFERRAL:
   - Check here if laboratory analysis is desired.

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

a. CLINICAL EXAMINATION
13. HISTORY

14. GENERAL APPEARANCE (Include appearance of clothing)
15. MENTAL STATE

16. DISEASES OR INJURIES (Other than the condition prompting this examination, per Test 2 above):

17. TEMPERATURE
18. PULSE (Rapid and labile)

19. BLOOD PRESSURE
20. FACE (Flushed, pallid, cyanotic)
21. TONGUE
22. BREATH

23. SKIN (Warm, cool, moist, dry, pale)
24. SPEECH (Thick, slurred, ability to repeat words such as Merry Christmas, Peter Piper)

25. EYES (Size of pupils, reaction to light, conjunctivae, etc.)
### C. NEUROLOGICAL EXAMINATION

<table>
<thead>
<tr>
<th>28. REFLEXES</th>
<th>29. COORDINATION</th>
<th>30. TIME TAKEN (HOUR)</th>
<th>31. OTHER TESTS (GASOLINE CONSUMED, WIFE, FLG.)</th>
<th>32. DATE</th>
<th>33. TIME TAKEN (HOUR)</th>
<th>34. DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>HYPERACTIVE</td>
<td>FINGER TO NOSE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HYPOACTIVE</td>
<td>HEEL TO KNEE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TREMOR</td>
<td>ABILITY TO APPROACH AND PICK UP OBJECT FROM THE FLOOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### D. LABORATORY EXAMINATIONS (If requested in Part A):

<table>
<thead>
<tr>
<th>30. BLOOD ANALYSIS (Name of test and results expressed as mgm per ml or in other standard units)</th>
<th>31. TIME TAKEN (HOUR)</th>
<th>32. DATE</th>
<th>33. OTHER TESTS (GASOLINE CONSUMED, WIFE, FLG.)</th>
<th>34. TIME TAKEN (HOUR)</th>
<th>35. DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36. SPECIMEN OBTAINED BY (Name of person)</th>
<th>37. RESULTS VERIFIED BY (Name of person)</th>
</tr>
</thead>
</table>

### E. CONCLUSIONS AS TO COMPETENCE FOR DUTY

Check the applicable "YES" or "NO" box to indicate answer.

38. Is examiner competent to perform duty? **YES**  **NO**

39. Is examiner's condition due to disease or injury? **YES**  **NO**

40. Is examiner's condition due to the use of drugs or alcohol? **YES**  **NO**

41. DISPOSITION:  
- RETURNED TO FULL DUTY  
- ADMITTED TO SICK LIST  
- RELEASE TO CUSTODY OF (Specify to whom)

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

### F. RESPONSE TO REQUESTER

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

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

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

<table>
<thead>
<tr>
<th>44. SIGNATURE (Examiner)</th>
<th>45. GRADE OR RATE</th>
<th>46. DUTY STATION</th>
<th>47.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>48. NAME (Type twice)</th>
<th>49. TIME</th>
<th>50. DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>