



DEPARTMENT OF THE NAVY
COMMANDANT OF MIDSHIPMEN
UNITED STATES NAVAL ACADEMY
101 BUCHANAN ROAD
ANNAPOLIS, MARYLAND 21402-5100

COMDTMIDNINST 1301.3
PROPROGS
06 APR 2006

COMDTMIDN INSTRUCTION 1301.3

Subj: POLICY CONCERNING MEDICAL STATUS AND SERVICE ASSIGNMENT

Ref: (a) COMDTMIDNINST 1301.1C
(b) Manual of the Medical Department
(c) OPNAVINST 3710.37A

1. Purpose. To provide policy concerning the service assignment process and medical status beginning with the Class of 2007. This instruction will be incorporated into reference (a) when it is updated for the Class of 2007.

2. Background. The service assignment process and eventual commissioning into the Navy or the Marine Corps is the culmination of the four-year experience at the Naval Academy. Medical screening is a key part of the process to ensure Midshipmen understand any limitations in their career options as well as to ensure medically qualified Midshipmen are assigned to the appropriate warfare communities. The goal of the service assignment process is to fill Navy Unrestricted Line (URL) and Marine Corps billets to meet the Navy's officer accession goals.

3. Policy. Due to the changes in reference (b) and the continued mission to fill the needs of the Navy and the Marine Corps, the following policies apply to medical status:

a. With the exception of Medical and Dental Corps assignments, Restricted Line (RL) and Staff Corps billets will only be assigned to Midshipmen considered not medically qualified for URL or Marine Corps assignment or to color deficient Midshipmen not accepted by the communities specified below in section 3.b.

b. Midshipmen identified with a color deficiency per reference (a) are considered eligible for the following communities:

(1) Submarine, Special Operations, Special Warfare. If otherwise fully medically qualified, color deficient Midshipmen will have a medical waiver submitted for them to be considered for assignment to these communities. If the waiver is granted, these Midshipmen will be considered by these boards if qualified.

(2) Marine Corps. If otherwise medically qualified, color deficient Midshipmen may be considered for assignment to the Marine Corps Ground community. No medical waivers are required.

(3) Restricted Line or Staff Corps. Only after consideration for the above communities will color deficient Midshipmen be considered for RL/Staff Corps assignment.

c. When Midshipmen enter their final preferences into MIDS, color deficient Midshipmen will rank the above URL and Marine Corps communities in order of preference ahead of any RL/Staff Corps preferences.

d. Per reference (b), there is no height restriction for service in URL or Marine Corps assignments, with the exception of anthropometric measurement restrictions for the aviation community delineated in reference (c).

e. Only the Superintendent may designate a Midshipman not physically qualified (NPQ) for commissioning. The Navy Bureau of Medicine and Surgery (BUMED) may designate NPQ for individual URL, Marine Corps, or RL/Staff Corps assignments.

4. Action

a. Brigade Medical Officer.

(1) Conduct medical screenings per reference (a).

(2) Make medical recommendations for NPQ for commissioning for forwarding to the Superintendent, via the Director, Division of Professional Development, and the Commandant of Midshipmen.

(3) Forward medical packages to BUMED for commissionability recommendations and special duty clearances. Inform Midshipmen and Professional Programs of NPQ decisions for individual URL, Marine Corps, or RL/Staff Corps assignments.

(4) Identify color deficient Midshipmen for tracking for service assignment.

(5) Submit waiver request for special duty for otherwise medically qualified color deficient Midshipmen.

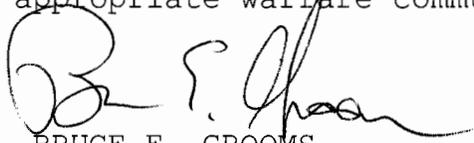
(6) Coordinate with the Department of Professional Programs to ensure all medical restrictions are updated throughout the service assignment process.

(7) Supervise outstanding medical cases with the goal of having no outstanding issues by Orders Assignment Night in February 2007.

b. Chairman, Department of Professional Programs.

(1) Coordinate with the Brigade Medical Officer to ensure Midshipmen are aware of their service assignment options prior to entering final preferences.

(2) Supervise the assignment process to ensure qualified Midshipmen are assigned to the appropriate warfare communities.



BRUCE E. GROOMS

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