DEPARTMENT OF THE NAVY
OFFICE OF THE CHIEF OF NAVAL OPERATIONS
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AND
HEADQUARTERS UNITED STATES MARINE CORPS
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WASHINGTON, D.C. 20350-3000

IN REPLY REFER TO
OPNAVINST 6320.6A
MCO 6320.5
BUMED-M3/CMC-MED
15 Aug 2007

OPNAV INSTRUCTION 6320.6A
MARINE CORPS ORDER 6320.5

From: Chief of Naval Operations
Commandant of the Marine Corps

Subj: HOSPITALIZATION OF SERVICEMEMBERS IN FOREIGN MEDICAL FACILITIES

Ref: (a) MANMED Chapter 16
(b) BUMEDINST 6320.72
(c) BUMEDINST 6320.85
(d) MCO 6320.2D
(e) MCO P3040.4E
(f) NAVMILPERSMAN 1770-030

1. Purpose. To establish policy, prescribe procedures, and assign responsibilities regarding hospitalization of Department of Navy (DON) servicemembers in foreign medical facilities. A foreign medical facility would include non-United States (US) military treatment facilities (MTFs) located outside the Continental United States (OCONUS). For the purposes of this instruction, Hawaii and Alaska are not considered OCONUS.

2. Cancellation. OPNAVINST 6320.6.

3. Scope. Applies to all Navy and Marine Corps activities, commands, and units which have servicemembers hospitalized in foreign medical facilities.

4. Background. Active duty Navy and Marine Corps personnel may be hospitalized in OCONUS non-U.S. MTFs due to a medical condition that requires urgent or emergent medical treatment. Reference (a) addresses the handling of health records and references (b) and (c) address medical cognizance while the patient is hospitalized in a non-Naval medical facility.

5. Policy. When appropriate care cannot be provided in a U.S. MTF, Navy and Marine Corps members may be hospitalized at medical facilities authorized under the auspices of the North

Atlantic Treaty Organization (NATO) Status of Forces Agreement (SOFA), Partnership for Peace SOFA, or a country with which the United States has a recognized Reciprocal Health Care Agreement. If none of the alternatives listed above is available or is medically feasible, the member may be hospitalized in a civilian medical facility. When a servicemember is hospitalized in a foreign civilian medical facility, arrangements should be made to transport the member to the appropriate CONUS or OCONUS US MTF when medically feasible.

6. Responsibilities

a. Hospitalized Active Duty Member. Upon hospitalization, the member should notify his or her parent command. If unable to reach the parent command, the member should contact the nearest U.S. military activity. If the member is unable to contact their parent command or nearest U.S. military activity, he or she should contact the nearest United States Embassy or Consulate office for assistance.

b. Commanding Officer/Officer in Charge (Non-Medical Command). Upon receiving notification of a hospitalized active duty member:

(1) Obtain information to include patient's name, assigned military unit, geographical location, name of medical facility where hospitalized, contact information, reason for hospitalization and current medical condition.

(2) Contact the member's unit to notify them of the member's hospitalization if the hospitalized member is assigned to a different military unit.

(3) Notify the appropriate geographical area Navy Fleet Surgeon or Marine Expeditionary Force (MEF)/Marine Corps Forces (MARFOR) Surgeon Office to ensure appropriate liaison and coordination between line commands, medical commands, and United States Embassies.

(4) Assign an active duty member as an escort capable of providing the appropriate level of assistance and to accompany the member throughout their hospitalization. If available, assign a member who is conversant in the local language. Ensure fiscal arrangements are made to pay for the hospitalization and

appropriate expenses for the patient and escort. There are countries where it is customary to pay for hospital expenses before the patient is discharged and the patient's friends or family are expected to provide bedside assistance. This may include purchasing necessity items such as a pillow, blanket, food, water, towel, and personal hygiene products. The assigned escort should be directed to return to his or her parent command once the hospitalized member is transferred to a US MTF.

(5) Notify the nearest Navy medical treatment facility and provide them with information listed in paragraph 6b(1) of this instruction.

(6) Follow procedures contained in the current edition of references (d) and (e) if a Marine or Sailor assigned to a Marine unit is hospitalized.

(7) Submit a Personnel Casualty Report per references (e) and (f) to the appropriate branch of service points of contact for all active duty members whose medical condition is determined to be seriously ill, very seriously ill, or terminally ill. Once a US MTF accepts medical cognizance of the patient, the MTF will assume the responsibility of submitting appropriate patient updates.

c. Commanding Officer/Officer in Charge (US Navy MTF)

(1) Upon receiving notification of a DON active duty member's hospitalization in a non-US MTF, the Navy MTF will:

(a) Assume medical cognizance of the hospitalized member per references (b) and (c) and arrange for the patient's transfer to the appropriate CONUS or OCONUS US MTF when medically appropriate.

(b) Establish communication with the hospitalized member, the hospitalized member's escort, or a representative from the medical facility where the member is hospitalized.

(c) Communicate with a representative at the medical facility where the member is hospitalized to gather up-to-date information regarding the patient's medical status at least every 3rd day if the patient's medical condition is stable or daily if the member is seriously ill or very seriously ill.

(d) If necessary, contact the United States Embassy or Consulate Office nearest the location where the member is hospitalized to request assistance monitoring the patient's medical condition and facilitating the member's transfer to a CONUS or OCONUS US MTF.

(e) Provide a status report, per references (b) and (c), to the member's parent command at a minimum of every 5 working days or at more frequent intervals depending on the severity of the member's medical condition.

(f) Submit a Personnel Casualty Report per references (e) and (f) to the appropriate branch of service points of contact, to include member's parent command, for all active duty members whose medical condition is determined to be seriously ill, very seriously ill, or terminally ill.

(2) Follow procedures contained in the current edition of references (d) and (e), if a Marine or Sailor assigned to a Marine unit is hospitalized.

7. Responsibilities

a. Chief, Bureu of Medicine and Surgery (BUMED). Serves as the DON point of contact for this program.

b. Navy and Marine Corps Commanders. Ensure that all subordinate commands comply with this instruction.

c. Navy Medicine Regional Commanders. Ensure Navy MTFs comply with this instruction.

R. S. KRAMLICH
Director, Marine Corps Staff

D. C. ARTHUR
Surgeon General of the Navy

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