

Patient's Name: _____ DOD ID: _____
 Cell Phone # _____

Diving Special Duty - (MANMED article 15-102)
SO Special Duty (SEAL/SWCC/RECON/MARSOC/EOD) - (MANMED article 15-105)
Parachuting (aka "Jump" for Basic/MFF/HAPS/HALO) - (AR 40-501)

MEDICAL DEPARTMENT SPECIAL DUTY EXAM CHECK LIST

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| <input type="checkbox"/> DD 2807-1 (Medical History) | <input type="checkbox"/> DD 2808 (Physical) | <input type="checkbox"/> NAVMED 6150/2 (Special Duty Abstract) | <input type="checkbox"/> OPNAV 8020/6 +/- DOT (Explosive Handler/Driver) |
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*Note: Include a NAVPERS 1200/6 (the U.S. Military Diver Medical Questionnaire) only for those who will be attending the Dive School. It is an interval history review to be completed within 30 days of transfer/arrival to NDSTC for training.
 Note: Addition of Dept. of Transportation (DOT) Medical Form only for those requiring explosive diver as a collateral duty,*

Note for medical representative:

**All study results must be TRANSCRIBED with date of lab on DD 2808, and then printed and filed in service member's hard copy chart.
 All studies must be within 3 months of exam unless otherwise stated in MANMED
Medical to Check or initial blocks below only after transcribed on DD 2808**

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| <input type="checkbox"/> CXR (PA/LAT – candidates only or as indicated) <input type="checkbox"/> 12 lead EKG <input type="checkbox"/> Audiogram (current w/in 12 mo of exam) <input type="checkbox"/> Visual Acuity (Refraction for >20/20) <input type="checkbox"/> Field of Vision <input type="checkbox"/> Color Vision (candidates only) <input type="checkbox"/> Depth Perception (candidates only in SO/Parachuting) <input type="checkbox"/> PPD (or TB screener on NAVMED 6224/8) <input type="checkbox"/> CBC (WBC, PLT, HGB, HCT) <input type="checkbox"/> Fasting Blood Glucose <input type="checkbox"/> HEP C <input type="checkbox"/> UA dipstick (w/ Micro for SO/Parachuting) <input type="checkbox"/> Lipid (Only parachuting or screening for PHA age over 40) | <input type="checkbox"/> PSA (Male over 40) (Only Parachuting) <input type="checkbox"/> IOP (If over 40) <input type="checkbox"/> Blood Type (only once in career) <input type="checkbox"/> Sickle Cell (only once in career) <input type="checkbox"/> G6PD (only once in career) <input type="checkbox"/> 2 Doses HEP A Documented <input type="checkbox"/> 2 of 3 Doses HEP B Documented <input type="checkbox"/> All Immunizations up to date <input type="checkbox"/> HIV (As Per DoD Inst. 6485.01) <input type="checkbox"/> Dental T-2 w/in 12 mo AND dental sig. <input type="checkbox"/> Stool GUIAC (Only Parachuting) <input type="checkbox"/> RPR (Only Parachuting) <input type="checkbox"/> Current PHA (w/in 12 months of exam) |
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All FEMALES to complete the following *IN ADDITION* to the above:

- Urine HCG (optional, as indicated. Does not need to be documented)
- Document "**counseled on fetal hazards of diving while pregnant**" in block 73 of DD 2808 per BUMEDINST 6200.15A: *"Medical and scientific evidence demonstrate that the hyperbaric environment may be hazardous to a fetus, potentially resulting in developmental anomalies or fetal death. These untoward fetal events may occur despite the absence of discernible maternal effects. Safe diving profiles that protect the fetus have not been developed. Factors related to the normal maternal-fetal circulation place the fetus at increased risk of injury, even if exposed to routine, "low risk" dive profiles performed by the mother. Therefore, pregnant divers should not dive or be occupationally exposed to a hyperbaric environment".* (To also be read and document on every PHA)
- Normal PAP Smear when indicated per ASCCP guidelines.
- Mammogram within the last 12 months starting at age 40 or if at high risk.
- Women's health exam may be transcribed if current for the Breast/Pelvic exam and Genital/Anal visual exam.

Note for Medical Representative: This checklist was created and intended to be a quick reference guide for special duty physicals. This should not replace reviewing and familiarizing yourself with instructions. Last updated 31MAY2018