NAVMEDEDTRACOM INSTRUCTION 1520

From: Commander

Subj: NMETC ARMED FORCES HEALTH PROFESSIONS SCHOLARSHIP PROGRAM (AFHPSP) STUDENT HANDBOOK

Ref: (a) SECNAVINST 1520.8A
(b) SECNAVINST 1520.11
(C) BUMEDINST 1520.30A
(d) BUPERSINST 1001.39D
(e) Title 10, United States Code, Section 2107
(f) Title 10, United States Code, Section 2121

Encl: (1) Student Handbook

1. Purpose. This instruction provides Naval Reserve Officers in the Armed Forces Health Professions Scholarship and Financial Assistance Program (AFHPSP/FAP) with policies, procedures and instructions. Failure to comply with the provisions of this regulation may result in disciplinary or administrative actions or in removal from the AFHPSP/FAP.

2. Applicability. This instruction applies to all Naval Reserve Officers participating in AFHPSP/FAP.

3. Background.

a. The **Medical Department Accessions Directorate (MDAD)** has oversight for the Navy's medical accessions programs including: the Armed Forces Health Professions Scholarship program (AFHPSP), Health Professions Loan Repayment Program (HPLRP), First Year Graduate Medical Education (FYGME), First Year Graduate Dental Education (FYGDE/GPR), Financial Assistance Program (FAP) and Navy Active Duty Delay for Specialist (NADDS) Program. The Directorate is the central point of contact on medical department accessions issues for DOD agencies and numerous national medical and dental organizations. The Directorate is also responsible for the management and the execution of a multi-million dollar budget.

b. AFHPSP offers qualified students full tuition for school, a monthly stipend, and reimbursement for books and various required equipment and fees. In return, students serve as active duty medical, dental or medical service corps officers (for a minimum of three years). Scholarship recipients also attend a 45-day (consecutive days) Active Duty for Training (AT) tour for every year of scholarship awarded. The ATs range from a required Officer Indoctrination School (OIS) Newport, Rhode Island to numerous choices of rotations at military facilities. During AT, students serve on Active Duty in the rank of Ensign with all attendant obligations, benefits and respect of the rank.

INTRODUCTION

1. Welcome to the Medical Department Accessions Directorate (MDAD) and the Armed Forces Health Professions Scholarship Program (AFHPSP). This student handbook is a Navy policy and provides initial guidance and answers to many of your questions regarding HPSP. It contains important information about your entitlements, training and administrative requirements. You have a wonderful team of staff members here at MDAD who are here to assist you in your educational endeavors. You should refer to this handbook before contacting MDAD.

2. As an AFHPSP member, you are responsible for compliance with this policy. We have a website for additional information regarding AFHPSP. Policy changes will be sent out to each student periodically via email. It is imperative that you keep MDAD updated with your current status as far as Leave Without Pay, name, telephone and address change and dependency status.

3. Please take the time to **read this handbook**. If after reading this handbook, you have any questions, please feel free to contact us. We also invite your suggestions. **OH@nmetc.med.navy.mil**

4. The Medical Department Accessions Directorate wishes you success in your current educational endeavor and welcomes you as a member of the proud tradition of the Navy Medical Department health care team.

5. This policy supersedes previous student handbooks. This is effective 1 February 2004.

Contact information

1. OH@nmetc.med.navy.mil. ***Please correspond by e-mail as this is our most efficient way to answer your queries.*** If you need to speak with us please send a current number and when you will be available to receive our call. We are in the office Monday through Friday 0800-1600 (Eastern Standard Time).

Website:

http://nshs.med.navy.mil/hpsp/Pages/HPSPHome.htm

Mailing Address:
Medical Department Accessions Directorate
NMETC, Bethesda (Code OH)
8901 Wisconsin Ave
Bethesda, MD 20889-5611

2. Please keep this booklet with all of your Armed Forces Health Professions Scholarship () documents for future reference.

3. Changes or updated program information will be e-mailed and/or placed on our website. **It is your responsibility to advise us of any change in your current e-mail address (OH@nmetc.med.navy.mil).**

4. Access the website often to be informed regarding program changes and subsequent handbook changes.

THE ARMED FORCES HEALTH PROFESSIONS SCHOLARSHIP PROGRAM NAVY STUDENTS' HANDBOOK

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CHAPTER ONE
STUDENT ACCOUNTABILITY AND RESPONSIBILITY

1-1. **Origin and Purpose.**

1. The was created under authority of the Uniformed Services Health Professions Revitalization Act of 1972, and is governed by Department of Defense Directive 1215.14 (February 1975) and SECNAVINST 1520.8A (November 1987). The program's purpose is to obtain adequate numbers of commissioned officers on active duty that are qualified in the various health professions. The Navy provides scholarship support for students undergoing training in the health professions of medicine, osteopathy, dentistry and optometry.

1-2. **Policy Compliance.**

1. You are responsible to successfully complete your academic program within the appropriate degree timeframe. **You must keep the Program Director informed in writing, at all times, concerning matters affecting your standing in the program, to include academic failure or change in physical condition.** You must comply with the instructions and responsibilities outlined in this handbook and in your service agreement as well as those that may be issued from the AFHPSP or other agencies having authority over the management of your program.

2. The following are **grounds for immediate termination** of Navy support of your academic program with possible recoupment of all monies disbursed on your behalf and/or prosecution under the Uniform Code of Military Justice (UCMJ):

a. Failure to comply with all written HPSP instructions (handbook, contract, website)

b. Unsatisfactory academic performance

c. Conduct unbecoming a naval officer

d. Falsification of documents

e. Criminal failure to comply with all written AFHPSP Instructions.

1-3. **Administration.**

1. The program is administered by the Medical Department Accessions Directorate, (MDAD), of the Naval Medical Education Training Command, Bethesda, Maryland, (NMETC), referred to in the remainder of this handbook as **Code OH.** This the only official contact for all matters pertaining to your participation in the scholarship program. This includes questions and correspondence concerning changes in eligibility dates, transfers to other institutions, medical evaluations, personal problems, and requests for leave of absence, extensions, and academic withdrawals.

2. Address all correspondence to:

Medical Department Accessions Directorate
NMETC, Bethesda (Code OH)
8901 Wisconsin Ave
Bethesda, MD 20889-5611

1-4. **Student Records.**

1. Code OH maintains your service, health, dental records and other documents related to your participation in the. **Keep copies of all correspondence you send to the Navy or the Navy sends to you.**

2. When performing Annual Training (AT) the following documents will be required to be on file in Code OH:

a. **Physical** (forms DD Form 2807-1 and 2 and DD Form 2808)

b. **Dependency Application Record of Emergency Data** (also known as a "Page Two"; form NAVPERS 1070/602)

c. **Annual Certificate of Physical Condition** (NAVMED 6120)

1-5. **Change of Address.**

1. It is required that you keep Code OH informed of your current mailing address, e-mail address and telephone number. Official correspondence via the mail must be sent registered or certified. It must include your full name, address, social security number and complete telephone number. Changes in your personal information can be accepted via email, **OH@nmetc.med.navy.mil**, or regular mail. When possible use e-mail as your primary source of communication.

1-6. **Physical Qualification.**

1. Your complete physical is valid for 5 years from the date obtained. The "Report of Medical Examination", SF-88 was replaced by DD-2808 of the same name, effective 3 August 2000. The "Report of Medical History", SF-93 was replaced by DD2807-1 of the same name, effective 3 August 2000. In addition to your complete physical, you are required to submit an "Annual Certificate of Physical Condition" NAVMED 6120 annually, available on our website on the forms page.

2. You must report immediately, to Code OH, any serious illness, period of hospitalization, pregnancy or chronic health problem that causes you to miss class or which may adversely affect your ability to serve on active duty. In addition, you are required to remain within Navy height/weight standards (Appendix D).

1-7. **Changes in Family Member Status.**

1. At the time your service record was established, a Dependency Application/Record of Emergency Data (NAVPERS 1070/602, commonly known as a "Page Two") was included. Each time the status of a family member changes due to marriage, divorce, birth or death, you must update your Page Two as follows:

a. Annotate changes in pen and ink on your current copy of your Page Two and forward to Code OH with a copy of applicable legal paperwork (i.e., a birth or marriage certificate).

b. Code OH will then prepare a new Page Two and mail it to you for signature. You will be directed to return the original to Code OH for maintenance in your service record.

1-8. **Identification Cards.**

1. While in the AFHPSP, you are required to maintain in your possession a valid Armed Forces ID Card. To obtain an Armed Forces ID Card, you must go to your local Navy Reserve Center and have an Application for Uniformed Services Identification Card and DEERS Enrollment form (DD-1172) completed and your ID card produced. The DD-1172 is available on the forms pager of our website. Fill it in and take it with you to the Navy Reserve Center.

1-9. **Navy Drug Policy.**

1. The Navy's policy on drugs is **ZERO TOLERANCE!** If you test positive for illicit or controlled drugs (without a prescription) your scholarship benefits will be immediately terminated and you will be processed for immediate administrative separation from the Navy.

2. While serving on Annual Training, (outlined in Chapter 5), each participant in the AFHPSP is subject to the current drug policies of the Navy and the Uniform Code of Military Justice. Student status in no way exempts an individual from drug policies and possible screening at any accession site established by the Navy.

CHAPTER TWO
STIPEND AND TUITION BENEFITS

2-1. **Establishment of Eligibility Date for Benefits.**

1. Code OH establishes the date you are eligible to begin receiving AFHPSP benefits based on the date you sign your Oath of Office, the date you sign your AFHPSP Service Agreement or the commencement date of you academic year as shown on the Academic Year Statement (AYS) provided by your school. The latter of these dates becomes the date you will begin receiving benefits. This is known as your benefit start date (BSD).

2-2. **Termination of Benefits.**

1. Your eligibility for scholarship benefits will be terminated on the date you graduate from school or on the date you complete your program requirements if that date precedes your graduation date by 45 days or more.

2-3. **Pro-ration of Benefits.**

1. If your BSD coincides with your school matriculation date, stipend, tuition and required fees will be paid for the full term.

2. If BSD is effective after you start school, a portion of the full tuition amount will be paid using the following formula:

Full cost of tuition & required fees
Divided by number of days in the school term
Times number of days eligible

Example: Term Start Date: 01 Sep
Eligibility Date: 06 Oct
Term Ending Date: 12 Dec
Tuition Cost: $1,600

Full cost of tuition & required fees:	$1,600.00
Divided by total days in school term:	102
Equals a daily rate of	$ 15.69
Times number of days eligible	67
Pro-rated amount paid by Navy:	$1,051.23
Balance paid by Student:	$ 548.77

2-4. **Tuition Payments.**

1. Your school will be paid directly for the required items listed below, in accordance with the Educational Service Agreement or contract that the Navy has established with your school, upon receipt of a valid invoice.

a. Normal tuition

b. Building use fees

c. Student activity fees

d. Student union fees

e. Laboratory fees

f. Health Service Fee

g. Graduation fees

h. University-required rentals (i.e. microscopes, slide sets).

i. Health insurance premiums, when invoiced with your tuition, but ONLY when this insurance is required by your school, and only at the single policy rate (single-rate with no dependents). This insurance is an allowable reimbursement item if not invoiced with your tuition and if paid by you directly, but again only if required by your school. Include such premiums on your SF 1164, "Claim for Reimbursement for Expenditures on Official Business", following all instructions found in Chapter 3 very carefully.

2. You must seek reimbursement directly from your school for any tuition deposit. If you receive a tuition bill from your school that is covered under your scholarship, return the bill to the school office with the address and phone number of Code OH and notify OH at **OH@nmetc.med.navy.mil** that it is coming.

2-5. **AFHPSP Stipend.**

1. Your stipend begins on your AFHPSP benefit start date and ends on your graduation date or on the date you complete all academic requirements for receipt of the professional degree (if that date precedes the date of graduation by more than 45 days). As members of the AFHPSP you are eligible for 12 months of financial assistance each year: 10 ½ months of stipend and 1 ½ months of active duty pay and allowances of an Ensign while on annual training (AT). Stipend payments are suspended while you are on AT and if placed in a Leave Without Pay (LWOP) status (see Chapter 4). You will receive your first stipend check approximately 30 days after the establishment of your eligibility date. Thereafter, deposits in your bank/credit union will be received at the beginning of the month for the preceding month.

2. Stipend payments are made by the Defense Finance and Accounting Service, Cleveland (DFAS-CL), after Code OH has established your pay account.

3. Stipend payments will be electronically transferred as a direct deposit into your bank account. **You will receive direct deposit payments approximately every two weeks (on the 1st and 15th of each month).** If you have any questions about direct deposit of your monthly stipend please email, **OH@nmetc.med.navy.mil**.

2-6. **Taxation of Benefits.**

1. Stipends of students who began receipt of scholarship benefits on or after 01 January 1981 are subject to Federal Withholding Tax. The amount of Federal tax withheld is based on the number of exemptions claimed on the Employee's Withholding Certificate (form W-4) submitted with the service record. If no Form W-4 is received with the record, the stipend is taxed at the rate of single with no dependents. To initiate any change in Federal Withholding Tax, complete a new Form W-4 and submit it to Code OH.

2. State Tax is currently withheld from your stipend check. You must file a DD 2058 State of Legal Residence Certificate with our office. DFAS-CL will send you Federal Wage and Earnings Statements (Form W-2) for stipend earned each tax year.

2-7. **Accepting Stipend or Pay from Other Sources.**

1. Members of the AFHPSP (except those eligible for the G. I. Bill) are prohibited from accepting other scholarship support in any form from the Federal government (Dual Compensation), other than the pay associated with Annual Training. No restrictions apply to accepting pay or other remuneration from private or state sources, if doing so does not interfere with your status, requirements for graduation, your Annual Training assignments, or your active duty service obligation.

CHAPTER THREE
REIMBURSEMENTS

3-1. **General Information**

1. **Armed Forces Health Professions Scholarship (AFHPSP)** participants are authorized reimbursement as outlined in this chapter. To avoid delay or denial of your claim, be sure to follow all guidance in this chapter very carefully.

2. **Financial Assistance Program (FAP)** participants will be reimbursed for books only. Tuition will not be reimbursed, but may be paid directly, as outlined in chapter 2.

3. **Nurse Candidate Program (NCP)** participants are not authorized reimbursements or payment of tuition.

4. **Items authorized for reimbursement** are limited to purchased items that are considered ordinary, necessary and are **required** of all students whether an **AFHPSP** member or not, enrolled in a qualifying professional degree program. Reimbursement is further limited to those items required by your school for all students enrolled in your year level and course rotation. You must submit your request on a "Claim for Reimbursement of Expenditures on Official Business", standard form 1164 (SF-1164) as prescribed in sections 3-7. **To avoid delay or denial of your claim be sure to follow all guidance in this chapter carefully.**

a. **You will be reimbursed** for authorized items listed in this chapter and on the website up to the maximum amount and quantity indicated. **Reimbursement is one time only for ALL items unless otherwise specified.**

b. **You will NOT be reimbursed** for items specifically listed as not authorized for reimbursement in this chapter and on the website, or for items determined not authorized during Code OH review and processing of your claim.

c. **You will NOT be reimbursed in any case** for items purchased more than 45 days prior to your benefit start date (BSD). If your BSD coincides with your school matriculation date, you will be reimbursed for all authorized items purchased within 45 days prior to your BSD. If your BSD does not coincide with your school matriculation date, Code OH may be required to pro-rate reimbursement as outlined in the Pro-ration of Benefits, section 2-3 of this handbook.

d. **You will NOT be reimbursed for items purchased while you are in a leave without pay (LWOP) status as outlined in chapter 4 of this handbook.**

e. **Graduating students will not be reimbursed** for purchases made within the 45 days prior to the earlier of their graduation date, or the date of completion of their academic requirements. Claims must be received in Code OH no later than 30 days prior to graduation.

3-2. **Items Authorized for Reimbursement (All)**

1. When authorized in accordance with section 3-1, the below items will be reimbursed to all AFHPSP students. Dollar limits on authorized items are listed on our website.

a. **Textbooks** when included on the required book list, course rotation schedule and/or syllabus submitted as proof of requirement with your claim as outlined in section 3-7. CD-ROM format will be reimbursed only when that is the required format as indicated by the proof you provide.

b. **Microscope and Computer rental/lease** - $250.00 each per year for up to two years for a microscope and four years for a computer. This cannot be applied to microscope and/or computer purchases. A copy of the computer lease or rental agreement from a leasing/rental entity (not friends or relatives) in business for that purpose must be provided. **Rental/lease agreement must not contain an option to buy. Agreement that includes a provision that results in ownership at the end of the lease/rental period is not authorized for reimbursement and will be disallowed.**

c. **National board examinations** USMLE/COMLEX/NBDE/NBEO fee only (no travel costs) as outlined in this chapter and required for graduation. In addition to all usual SF-1164 submission requirements, **you must submit proof that you have passed the exam.** Provide a copy of the notification you receive with your SF-1164 documentation.

d. **Health insurance** is an allowable reimbursement item only when paid by you (that is, NOT invoiced with your tuition), and only when required by your school. The maximum allowable is the amount of the school's single-rate policy (a policy that does not include coverage for dependents of any kind). In addition

to a properly completed SF-1164, the Health Insurance section on the Dean's Certification must be completed as follows:

1) Proof that health insurance coverage is required by your school (Item 1 or 2 under HEALTH INSURANCE on the Dean's Certification form must be completed/initialed)

2) Proof of the cost and dates of coverage for a single-rate policy if one is offered by your school

3) If required but no policy is offered by your school, the Dean or authorized representative must initial item 2 under HEALTH INSURANCE on the Dean's Certificate. You must provide proof from the insurance company holding the policy of both their single-rate policy and the actual policy premiums being paid as well as the dates of coverage.

If coverage is required and you are covered on someone else's policy as a dependant, you will NOT be reimbursed the single rate of your school's policy. You will be reimbursed only the amount of the difference between what the policy actually costs with you included, and the amount of that company's single-rate policy, and only up to the single rate of the school policy if one exists. Again, proof of these rates is required as outlined above. For proof of payment when premium payments are made by payroll deduction, submit pay stubs for all periods claimed.

e. **Immunizations** are available at most Navy Recruiting Commands (NRC). You are encouraged to obtain any required immunizations not obtained prior to your entry into the program at Naval Reserve Center (NRC). Immunizations are reimbursable as follows:

(1) Hepatitis B Series (3 shots): The completed series.

(2) Measles-Mumps-Rubella (MMR): Required if no immunization documentation is available.

(3) Varicella: Required if no immunization documentation is available.

(4) Influenza

f. Fees authorized under section 2-4 may be reimbursed only if paid by you directly and NOT invoiced/paid with your tuition.

3-3. **Items Authorized for Reimbursement (Medical AFHPSP)**

1. When authorized in accordance with section 3-1, the below items will be reimbursed to all Medical AFHPSP students. -Note- be sure to review 3-6 Items NOT authorized for reimbursement for any item not specifically listed as authorized. Dollar limits on authorized items are listed on our website.

a. Small medical equipment **(one time only)**:

(1) Sphygmomanometer

(2) Diagnostic set - otoscope and ophthalmoscope

(3) Stethoscope

(4) Doctor's bag

(5) Penlight

(6) Tuning forks

(7) Reflex hammer

(8) Neurological hammer

(9) Measuring tape, physician's

(10) Thermometer

(11) Scissors, bandage

(12) Gloves, disposable/examination (max 5 boxes)

(13) Osteopathic treatment table

(14) Either Dissection kit – OR – Scalpel Blades and Handle as required

(15) Eye Chart

(16) Goggles

(17) Clinical Jackets/Laboratory Clothing - a maximum of 6 items in any combination for the entire period you are in the AFHPSP program.

b. **National Medical board examinations** United States Medical Licensing Examination (USMLE) or Comprehensive Osteopathic Medical Licensing Examination (COMLEX) as applicable. USMLE Step 1, USMLE Step 2 Clinical Knowledge (CK) and USMLE Step 2 Clinical Skills (CS) or COMLEX Levels 1 & 2 will be reimbursed. - Note - The "old" USMLE Step 2 is now known as USMLE 2 Clinical Knowledge (CK), and is required for ALL graduating students regardless of the year of graduation. The "new" part of USMLE Step 2 is known as USMLE 2 Clinical Skills (CS), and is required for all students graduating in 2005 and beyond. It will NOT be reimbursed for 2004 graduates, as it is not required to graduate. Only the registration fee of $975.00 will is reimbursable for those graduating in 2005 or later. No travel costs will be reimbursed and no per diem paid.

THE AFHPSP PROGRAM IS NOT PERMITTED TO REIMBURSE INDIVIDUALS FOR COST OF SECURING A LICENSE OR CERTIFICATION.

c. Total Electronic Residency Application Service (ERAS) fees and NRMP fees up to $300.00 will be reimbursed. ERAS is a GME-1 requirement at NMETC and therefore does not require a Dean's Certificate, however, proof of payment must be submitted with a properly completed SF-1164 as outlined in 3-7.

3-4. **Items Authorized for Reimbursement (Dental AFHPSP)**

1. When authorized in accordance with section 3-1, the below items will be reimbursed to all Dental AFHPSP students up to the maximum quantities and amounts shown. -Note- be sure to review section 3-6, Items NOT authorized for reimbursement for any item not specifically listed as authorized. Dollar limits on authorized items are listed on our website.

a. Paint brush #1 sable

b. Diamond burr (maximum 4)

c. Student casting kit

d. Smoothex

e. Aero dope

f. Separating Discs sgl and dbl sided (maximum of 2)

g. Lathe chuck bur ck8r and taper ck7bl

h. Casting crucible

i. Disc kit (includes stand, box discs and mandrel)

j. Gold crown thickness gauge

k. Glass mixing slab

l. Beauty cast investment 18 pkg

m. Lab knife handle

n. Blades

o. Plaster knife #12

p. Mixing pads

q. Car bide lab. bur #71E023

r. Sable brushes

s. Bush silent stones

t. Mandrel FG and sthp

u. Wax burr

v. #8 round carbide sthp

w. Denture teeth

x. Porcelain kit

y. Sonic scaler

z. Cement spatula

aa. Rubber base spatula

bb. Rubber base syringe

cc. Package of teeth

dd. Face Mask

ee. Inlay tongs

ff. Soldering tweezers

gg. Wax blue inlay

hh. Articular case with facebow and accessories

ii. Student polishing kit (trustier, arbor chuck, brush wheel, arbor bands, soft brushes, 2" chamois wheel, 1-1/4" and 3" buffs, felt cones, stick rouge and stiff brushes)

jj. Syringe anesthetic

kk. Test teeth per academic year (2-year maximum)

ll. Diamond burr cleaning stone

mm. Plastic resin sheets

nn. Lentulo spirals

oo. Utility scissors

pp. Technique metal 32 dwt

qq. Super sep

rr. Occlusion balancer

ss. Porcelain adjustment kit

tt. Relief metal

uu. Plaster syringe

vv. Impression trays

ww. Plier #121

xx. Plier #137

yy. Plier, cotton (maximum of 3 each)

zz. Svedopter

aaa. Probe, PCP 12 (maximum 3 each)

bbb. XCP instruments

ccc. Iris scissors

ddd. Perma bond 910

eee. Vac-U-Spat/Vac-U-Mixer Combo kit

fff. Casting ring (maximum 3 each)

ggg. Clinic cart

hhh. Loupes (surgical/magnification)

iii. Dental kits required by the school only if not billed and paid directly with tuition and equipment or instrument list must be submitted with your properly completed SF-1164.

(1) First year students - up to $9,000.00

(2) Second year students - up to $5,000

(3) Third year students - up to $700.00

(4) Fourth year students - up to $700.00

jjj. Clinic Jacket (maximum 3 each)

kkk. Disposable Exam gloves (max 5 boxes)

lll. Goggles

mmm. National Board Dental Examination (NBDE) part I and part II

nnn. Caulk/Densply Prolite

00. Cavijet

2. **Duplicate payment for separate items listed above is not authorized except as indicated for replacement.**

3-5. **Items Authorized for Reimbursement (OPTOMETRY)**

1. When authorized in accordance with section 3-1, the below items will be reimbursed to all Optometry AFHPSP students up to the maximum quantities and amounts shown. -Note- be sure to review section 3-6, Items NOT authorized for reimbursement for any item not specifically listed as authorized. Dollar limits on authorized items are listed on our website.

a. Illusion Slides

b. Handheld Maddox Rod

c. Lighthouse Cards

d. Anaglyph Glasses

e. Lens Holder

f. Occluder

g. Near Point Cards

h. Near Point Fixation Stick

i. Clinic Jacket (maximum 3 each)

j. Reading Cards

k. Gonioscope (4ml)

l. Gonioscope (3ml)

m. Lens Clock

n. Halogen Penlight

o. CEVS Clinic Kit

p. Sphygmomanometer

q. Stethoscope

r. Binocular Indirect Ophthalmoscope Kit w/case

s. 90D and 20D Lens - (combined total)

t. Retinoscope/Ophthalmoscope Diagnostic Set

u. Transformer (Desk)

v. Comparator

w. Lens Gauge

x. Stereo Test

y. Trial Lenses and Frames (combined total)

z. Projector Slide

aa. Color Vision Testing Plates

bb. Pliers 1 each Adjustment and Ophthalmic

cc. Calibration Kit

dd. Lens Flipper

ee. Tool Kit (ophthalmic)

ff. Dissection Kit

gg. Disposable/Examination gloves (max 1 box)

hh. Goggles

ii. Prism Bar Set

jj. NBEO part I, II, and part III only if required

3-6. **Items NOT authorized for reimbursement**

1. **You will NOT be reimbursed** for the following items, as they are not authorized for reimbursement in any case:

a. Student note-taking service

b. Optional or recommended books

c. Stolen, lost, or damaged items

d. AMA, ADA, AOA, APA, or other professional society, student association or class dues

e. Cameras or attachments for use in elective courses

f. Surgical clothing (unless specifically authorized elsewhere in this chapter)

g. General office supplies, name tags, laundry or locker fees

h. Housing, meals or school - sponsored travel expenses

i. Computers (purchase) or palm pilots

j. Non-related courses (including fees for continuing education programs)

k. Refundable fees or deposits

l. Theft or damage insurance for books, supplies and/or equipment

m. Equipment repair and maintenance

n. National Board pretest, retest, study books, guides or review books

o. Magazine and/or journal subscriptions

p. Loans or interest on loans

q. Initials on doctor’s bags

r. Deposits or down payments on equipment or supply

orders

s. State Boards, Regional Boards or other exams not specifically authorized

t. Reproduction/copying expenses, including those incurred when making copies of reimbursement claims

u. Binding charges for reports or research papers

v. CIBA Series. Individual volumes within the series may be subject to reimbursement if **required** as outlined in section 3-1

w. Shipping and handling

x. Beepers

y. Parking

z. Telephone Calls

aa. Military Uniforms

bb. Cap and gown fees

cc. Items purchased while in a Leave Without Pay (LWOP) Status

3-7. **Instructions for Submitting a Claim for Reimbursement**

1. **Read all of the below instructions before beginning to prepare your claim, then follow the instructions very carefully to avoid delay, return or denial of your reimbursement.** BONUS! You will receive your reimbursement faster by allowing us to process requests most efficiently. To save you some time and speed processing, it is recommended that when purchasing authorized items over a several week period, you hold the receipts and combine those together on one claim, being careful not to combine fiscal years as defined in section b below. All requests for reimbursement for authorized items must be submitted to Code OH **within 60 days of purchase** on a "Claim for Reimbursement for Expenditures on Official Business", standard form 1164(SF-1164). A fillable PDF version of the SF-1164 can be found on our website on the forms page. **Appendix A provides step-by-step instructions for properly filling out the SF-1164.**

a. **Use only ONE SF-1164 per claim,** ensuring that you have used the back of the form (page 2 of the electronic version on our website) for listing any items that do not fit on the front. **Also be sure to type or print legibly in black ink.**

b. **Only one fiscal year per SF-1164.** A fiscal year begins on 1 October and ends the following 30 September. Do not combine items from different fiscal years on one form SF-1164. Example - if you purchased 6 textbooks between the 20th of September 2003 and the 4th of October 2003 they cannot all go on one SF-1164. Those purchased on or before the 30th of September would go on one SF-1164, those purchased on or after October 1st would go on another.

c. **Arrange original receipts in chronological order** attaching small receipts to 8½" x 11" sheet/s of paper to prevent loss in handling. If this is not done, your claim may be returned to you unprocessed, and Code OH will not be liable for any loss of original receipts that may occur. Print your name and the last 4 digits of your social security number on each page submitted.

d. **Itemize the SF 1164** in the order that authorized items appear on the original receipts.

e. **Sign and date the SF-1164** and include all documents listed in section 3-8 together in one package. Print your name and the last 4 digits of your social security number clearly on each page of your submission and all attachments.

f. **As with all correspondence, be sure to keep copies of your entire claim submission package for your record and future reference.** Your claim package flows through many hands on the way to Code OH, and in the unlikely event that it is lost in the mail delivery process, you will be able to duplicate your submission quickly and easily. It is strongly recommend that you use a delivery method that provides a tracking mechanism, such as Registered or Certified mail when submitting your claim.

3-8. **WHAT TO SUBMIT WITH YOUR CLAIM (SF-1164)**

1. **An official, current course or rotation schedule** from your school registrar's office. - NOTE - This used to be placed in your AT/Reimbursement file, but we have determined that for

audit purposes we must have ALL back-up documentation, receipts, etc. attached to the original SF-1164 for each claim, allowing audit of any claim package independently.

2. **Qualifying receipts are as outlined below:**

a. Original cash register tape which includes at a minimum the vendor name, date of purchase, individual item identity, cost per item and total paid for all items shown on the receipt, if paid by cash. If the cash register tape does not include all of the above, or if payment was other than cash, additional proof required as outlined below.

b. Itemized bookstore/vendor/online receipt, invoice or packing slip which includes at a minimum the vendor name, student's name, method of payment, amount paid, date paid, and signature of employee if paid by cash. This must be accompanied by additional proof of payment as outlined below if paid by other than cash, or if vendor receipt paid by credit card does not show a zero balance due.

c. A copy of both sides of a canceled check that is in the amount of and paid to the vendor shown on the itemized receipt or packing slip. A copy of the uncancelled check <u>and</u> a copy of the bank statement showing that specific check number as being paid is acceptable if you do not get cancelled checks back with your statement.

d. A copy of the credit card statement with the line item (matching the date and amount of the receipt) circled or highlighted if paid by credit card.

3. **The following are <u>NOT</u> acceptable as qualifying receipts:**

a. Invoices, unless accompanied by proof of payment as outlined above.

b. National Board acknowledgment cards.

c. Dime store receipts (Carbon with receipt with no store or school heading).

d. Letters or notes indicating sales or agreements for rentals between private parties.

4. **Dean's Certificate** Your Dean's office must review each claim for reimbursement and complete and sign the most current version of the Dean's Certificate/Certification form as available on our website on the forms page. – NOTE - The Dean's Certificate is not a blanket authorization. Also staff members in your Dean's office may offer to mail the claim for you once it has been signed. To avoid confusion over mailing dates and the whereabouts of your claim and/or any required supporting documentation we recommend that you pick up your claim package from the Dean's office and **mail it yourself!**

5. **Required book list**. Obtain a required book list and send it with your claim. If your school does not clearly identify texts as "**required**," but provides only a list of "recommended" books, additional proof is required. It is usually clear from the instructor's syllabus which texts are necessary for the course. If it is not, you must have your instructor identify each text on the "recommended" list (or provide you with a list on school letterhead) of texts he/she expects you to purchase, **sign and date the list and provide his/her contact phone number** in case the Code OH reviewer has any questions. If you have any questions about reimbursable texts, contact Code OH. Again, the rule is to reimburse you for all items that are necessary and **required** of all students as outlined in 3-1. The burden of proof is on you to demonstrate that the texts you are claiming are **required**; the Dean's Certification is not a blanket authorization for all texts. If we cannot verify that an item is required, we may ask you to provide a letter from your instructor specifying that the item/s is/are required by all students in that course or rotation. If that letter cannot be provided, your claim will not be reimbursed.

3-9. WHERE TO SUBMIT WITH YOUR CLAIM (SF-1164)

1. **Send your claim to:**

Medical Department Accessions Directorate
NMETC, Bethesda (Code OH)
8901 Wisconsin Ave
Bethesda, MD 20889-5611

Any questions concerning your claim should be addressed via email only and sent to OH@NMETC.MED.NAVY.MIL to ensure a prompt and accurate reply.

CHAPTER FOUR
SPECIAL INFORMATION

4-1. **Leave Without Pay (LWOP)**

1. Most schools provide for leave of absence for students experiencing difficulty coping with academic requirements. Students must request Leave Without Pay (LWOP) from the program if there is any delay in their academic progress.

2. GENERAL. Students must request a leave of absence **without pay (LWOP)** from the **HPSP Program Director at NMETC** when there is a hiatus in their academic progression. This is done via the OH web site **OH@nmetc.med.navy.mil**. A LWOP may be granted for a period of **6 months or one year**. Leave for other educational endeavor is rarely authorized, and is evaluated on a case-by-case basis.

3. LWOP APPROVAL. The **HPSP Program Director** must approve all LWOP requests in advance. This is done electronically via email. Approval of an LWOP from the scholarship program is separate from any approval from the school. A LWOP that is not approved constitutes a withdrawal from school and may result in loss of scholarship eligibility and immediate order to active duty.

a. You must submit all LWOP requests via the OH E-mail address: OH@nmetc.med.navy.mil before the proposal effective date when there is a hiatus in academic progression. This notification must be made immediately upon your discovery that you will require a Leave of Absence.

b. You must be approved for LWOP in advance by the Navy (without regard to school approval) and may be approved for up to twelve months.

4. TYPES OF LWOP. There are four types of LWOP.

a. **Administrative LWOP.** This is an **involuntary** LWOP. It is the only LWOP status from which a student can automatically be returned to active status. Students will be automatically placed on an administrative LWOP: for noncompliance with administrative or contractual requirements, such as failure to obtain a physical examination, apply to GME and ERAS, failure to update the address or telephone number, failure to provide USMLE/COMLEX/NBDE/NBEO results; or when medical, security or military service disqualification is first indicated, requesting discharge from the reserves, or when status cannot be determined.

b. **Medical LWOP.** This is normally a **voluntary** LWOP when the student requests it. It may become **involuntary** when it is determined that a student has been granted a medical leave by the school, when the Student Management Office is notified of a medically disqualifying condition, or when otherwise indicated. While on a medical LWOP the student is **required** to submit monthly progress reports to the HPSP Program Director via OH@nmetc.med.navy.mil Quarterly progress reports are required from the treating health care professionals and may be sent via e-mail or via certified/registered mail.

c. **Academic LWOP.** This is sometimes a **voluntary** LWOP when the student requests it. It may be **involuntary** when it is determined that the student must repeat an academic period, has entered a preparatory or decelerated program, has failed to take or pass part 1 or 2 of the USMLE/COMLEX/NBDE/NBEO and part 3 of the NBEO within the specified period or otherwise determined to be appropriate. A student repeating an academic period over the summer is not placed in a LWOP status.

d. **Personal LWOP.** This is normally a **voluntary** LWOP when the student requests it. This type of LWOP is requested for other difficulties that may be encountered by the student.

e. A LWOP for educational purposes is rarely approved. Educational LWOP is completely subject to the needs of the Service.

5. LWOP PROCEDURE. LWOP and return from LWOP must be requested and processed via the OH website OH@nmetc.med.navy.mil

a. **Requesting LWOP.** LWOP requests must be submitted as soon as possible before the LWOP effective date. Any entitlements received after the LWOP effective date must be repaid.

(1) The LWOP request should include a detailed justification for the LWOP and its proposed duration. The **HPSP Program Director** will determine the period of the LWOP, if it is omitted from the request.

(2) A letter from the Dean of Student Affairs indicating the LWOP period, the student's class standing, revised graduation date and reasons for the LWOP must be sent separately to the HPSP Program Director at NMETC, 8901 Wisconsin Ave, Bldg 1, Rm 15135, Bethesda, MD 20889-5611.

a. **Return from LWOP.** Reinstatement requests are submitted as described below:

(1) **Administrative LWOP.** Return from an administrative involuntary LWOP is automatic after the issues that prompted the LWOP are resolved.

(2) **Medical LWOP. The participant must initiate removal from LWOP status to ensure timely resumption of entitlements. Return from a voluntary LWOP IS NOT automatic.** Return from a medical LWOP additionally requires a medical specialty consultation (evaluation) from a physician with the following information to be provided via certified/registered letter to the HPSP Program Director:

(a). Initial diagnosis

(b). Initial treatment

(c). Interim progress (monthly for all medical LWOP)

(d). Final diagnosis

(e). Final treatment

(f). Prognosis

****** The HPSP Program Director will prepare your package for submission to the Bureau of Medicine and Surgery for approval or disapproval. If the medical condition is deemed not suitable for continued military service you will be separated from military service.

(3) **Academic LWOP. The participant must initiate removal from LWOP status** by submitting information showing remediation such as passing licensure examination or a letter from the Dean of Student Affairs substantiating that remedial course work has been successfully completed. Academic LWOP based solely on failure to provide scores of licensure examinations is automatically void upon receipt of passing scores and entitlements are retroactively reinstated if there are no other academic issues, such as interruption of academic progression, multiple academic LWOP, multiple failure of a step/part of licensure examinations or other issues. In such cases, LWOP is not automatic, may require additional documentation and entitlements are not retroactively reinstated for periods of remediation or school absence. The request for return from LWOP must include a letter from the Dean of Student Affairs that confirms the effective date of re-entry into school and new anticipated graduation date.

(4) **Voluntary and personal LWOP. The participant must initiate this request to ensure timely resumption of entitlements.** Return from a voluntary LWOP **IS NOT** automatic. A request for reinstatement must be made at least **60 days before the LWOP expires** in order to allow adequate time to restore entitlements. The request must include a letter from the Dean of Student Affairs that confirms the effective date of the student's re-entry into school and new anticipated graduation date.

(5) **Failure to request return from LWOP may result in loss of scholarship eligibility.**

(6) You must request return from LWOP at least 60 days before the LWOP expires with a letter from the Dean of Student Affairs that confirms the effective date of re-entry into school full-time and graduation date.

(7) You will be placed on LWOP for failure to take, pass or provide results of the USMLE/COMLEX/NBDE/NBEO within the specified period and all entitlements, as well as active duty training, will be suspended during any period of LWOP.

6. **EFFECT ON ENTITLEMENTS.** All entitlements, as well as active duty training, are suspended during any period of LWOP.

a. **Recalculation of entitlements.** This normally shortens the period of stipend pay relative to other entitlements by up to 45 days prior to graduation. This is influenced by the length of the LWOP, timely notification, and the fact that stipend pay is continuous (except during AT) even when classes are not in session. Recalculation is performed by:

(1) Subtracting the **LWOP PERIOD** from the **TOTAL ENTITLEMENT PERIOD** (period from the HPSP entry date to the standard projected graduation date of 10 May of the graduation year) to arrive at the **REMAINING (unused) ENTITLEMENT.**

(2) The **REMAINING ENTITLEMENT** is then added to the LWOP **REINSTATEMENT DATE** (date of return from LWOP) to arrive at the **STIPEND TERMINATION DATE** (date stipend entitlements will cease).

b. **Notice of expended entitlements.** The LWOP restoration letter will outline expended benefits, stipend termination date, entitlement restoration effective date, and remaining benefits. The letter is sent upon receipt of a request to return from LWOP.

c. **Retroactive entitlement restoration.** Entitlements are restored retroactively only when students are placed in an administrative LWOP status or academic LWOP based on failure of licensure examinations and after the appropriate requirements are met. Restoration will not occur if the student becomes ineligible for AFHPSP participation. Otherwise, scholarship entitlements are restored as of the last of the three dates indicated below:

(1) The date that all requirements for returning from LWOP are met; or,

(2) The day after the last day of the LWOP; or,

(3) The date that the Bureau of Medicine and Surgery approves a waiver of a medically disqualifying condition.

7. DISENROLLMENT POLICY

a. Disenrollment from AFHPSP occurs automatically upon failure to maintain eligibility, including but not limited to, disenrollment from school for any reason, loss of eligibility for military service or the scholarship, medical disqualification, call to active duty regardless of completed academic requirements.

b. You may be considered for involuntary AFHPSP disenrollment for deficiency in conduct, studies or other reasons; and have the opportunity to respond through due process procedures (without personal appearance) to the HPSP Program Director.

8. **DISENROLLMENT TYPES.** There is no requirement for due process when an individual fails to maintain eligibility or is discharged from the Navy Reserve. Loss of eligibility occurs upon a participant's: withdrawal or disenrollment from the course of study for any reason; loss of reserve appointment; loss of eligibility for military service; call to active duty regardless of completion of academic requirements

a. **Voluntary.** A participant may request disenrollment from the AFHPSP. This is rarely approved without extenuating circumstances and requires approval by the Bureau of Naval Personnel. The request for disenrollment must include the reasons and also does not eliminate any incurred service obligation. A formal letter must be sent via Certified/Registered mail to the Program Director with the request.

b. **Involuntary.** A participant considered for involuntary disenrollment must be given due process. Participants may be considered for involuntary disenrollment if it is determined to be in the best interest of the Government and for a participant's:

(1) Failure to complete the agreed upon health care degree.

(2) Conviction for: a felony as defined under Federal, State, or Local law; an offense which if tried under the Uniform Code of Military Justice (UCMJ) could result in confinement or a dishonorable discharge; or an offense involving moral turpitude.

(3) Discreditable involvement with civilian or military authorities, including driving under the influence or while intoxicated.

(4) Exceeding the maximum authorized leave of absence period.

(5) Application for conscientious objector (1-0) status.

(6) Administrative or contractual noncompliance.

(7) Deficiency in conduct, in studies or other reasons.

(8) Failure to successfully complete Officer Indoctrination School (OIS) or undergraduate licensure examination requirements.

9. **DUE-PROCESS.** When it is determined that a participant may meet criteria above, or other statutory or administrative criteria that may warrant involuntary disenrollment, due-process shall be afforded to the participant. Failure on the part of the participant to keep contact addresses and phone numbers current does not delay the proceedings.

a. Participants are provided a written due process notification that specifies the information below.

(1) They are being considered for involuntary disenrollment from the HPSP and the reason for the proposed disenrollment.

(2) The actions necessary to correct the deficiency and a reasonable time to correct the deficiency (administrative or contractual noncompliance only).

(3) A specification of the alleged misconduct, if applicable, including approximate date and location of occurrence.

(4) The time period allotted for responding and address of the office to receive the response.

(5) The decision authority.

(6) The service obligation or repayment provisions, as appropriate.

(7) The participant's rights under the due process proceedings, which include: consultation with an attorney at their own expense; submission of statements in their own behalf; and submission of statements from witnesses and other information to show why disenrollment should not occur or why other disposition should be considered because of extenuating circumstances.

b. A participant is given not less than 14 calendar days to respond to the disenrollment notice. An extension (up to 30 calendar days) may be granted if warranted. The **AFHPSP Program Director** must receive the response by the date indicated in the proposed disenrollment notice. Responses not received in a timely manner may not be considered. Failure to respond in a timely manner will not delay the decision, unless there are extenuating circumstances.

c. The Commander, Naval Medical and Education Training Command (NMETC) is the initial reviewing authority for all proposed disenrollments. A written decision will normally be provided from the Bureau of Naval Personnel within 60 calendar days from the date of the proposed disenrollment notice. It will provide: the nature of the decision; the basis for the decision; appeal rights; location for submitting the appeal; and the appellate authority. The decision is final, unless a timely appeal is submitted.

d. **An appeal is not automatic**. It is the participant's option to appeal any decision that results in disenrollment. A participant is given not less than 14 calendar days to submit an appeal. Appeals are not considered after that period, unless there are extenuating circumstances. A decision on the appeal will normally be provided within 60 calendar days from the date the appeal is received.

(1) All appeals must be processed through the Naval Medical and Education Training Command (NMETC) where it must be received by the date indicated in the disenrollment notice.

(2) The HPSP Program Director is the first appellate authority. The Commanding Officer, Naval Medical Education and Training Command (NMETC), is the final appellate authority.

e. When situations warrant, a participant may be placed in a leave of absence without pay (LWOP) status pending the outcome of the decision. The LWOP status may also be used as an alternative to disenrollment.

f. All responses and appeals must be signed and dated but such omissions will not delay the proceedings. Undated correspondence will assume the postmark date. Ensure all correspondence is mailed via certified or registered mail to:

Medical Department Accessions Directorate
NMETC, Bethesda (Code OH)
8901 Wisconsin Ave
Bethesda, MD 20889-5611

g. Personal appearance in response to the initial disenrollment notification and any appeal is not authorized.

4-2. **Transfer between Academic Institutions.**

1. **Prior** to transfer to another institution, you must request permission from Code OH by submitting the following:

a. A request in writing via certified or registered mail to seek transfer to another school (this request must contain the name of the school you are currently attending and the school to which you desire to transfer to) and supporting explanation for the request. **Requests that necessitate an extension of your scholarship beyond the time established in your initial contract will not be approved.**

b. A letter of acceptance from the new institution stating both the academic term start date and your anticipated graduation date.

c. A letter from the institution you are leaving verifying the effective date of your release. Your request must reach Code OH at least 90 days prior to the start of the term for which the transfer is requested. If you receive approval from Code OH to transfer schools, you must send us a new Academic Year Statement (AYS) from the receiving institution. Once we receive your AYS, Code OH will contact the receiving institution concerning the payment of your tuition and required fees.

4-3. **Program Resignation.**

1. The Navy has entered into a written contract with you in good faith and is depending upon your matriculation to fill Navy Operational Medicine needs. This contract presumes you are entering a rigorous education program that attests to your maturity, integrity, academic ability and comprehension; thus, you are expected to understand and fulfill the terms of your written contract.

2. As stated in your AFHPSP service agreement, **there is no provision to "buy out" your contract.**

3. Requests based on personal reasons are normally disapproved. If you decide to request resignation, contact the **AFHPSP Program Director** for guidance. Your request must include the following:

a. A letter from you fully explaining your reasons for requesting resignation.

b. Supporting documents i.e. a letter from the dean of student affairs or an advisor who supports your resignation, confirmation of your current academic status, whether or not you have disenrolled from medical school and the circumstances involved.

c. Based on your particular case and supporting correspondence the Commander, Naval Medical Education and Training Command (NMETC) will make a recommendation and forward your request to the Bureau of Naval Personnel for a final decision.

4-4. **Members with Prior Active Duty Service.**

1. If you have been on active duty before entry into the AFHPSP, you may be entitled to higher pay rates during your AT. By law, Code OH cannot pay you in a grade higher than 01 (Ensign); however, there is a difference in pay between an 01 under 2 years of service and an 01 with 2 or more years of service. Members with at least four years and one day of prior active enlisted service are entitled to "OlE" pay.

2. To make Code OH aware of prior service, send us a copy of your **DD 214,** (Report of Separation from Active Duty), and any documentation of Reserve drill time and/or National Guard duty. Code OH will forward these documents to the Bureau of Naval Personnel for computation of creditable prior service.

3. The Department of Veteran's Affairs considers the stipend a scholarship. This enables you to collect the stipend plus the GI Bill education benefits you earned while on active duty. To qualify, you must have served on continuous active duty for more than 180 days, be attending an approved institution, and be pursuing an approved program of education. For more information on application forms, see the VA officer at your school or contact the local VA office in your area. As with the stipend, **you are not entitled to receive GI Bill benefits while you are on AT.**

4-5. **Government Transportation.**

1. While in the AFHPSP, you are eligible to travel space available (Space A) aboard Department of Defense aircraft. You are required to possess an Authentication of Reserve Status for Travel Eligibility, DD Form 1853, when traveling aboard DOD-controlled aircraft.

2. To obtain the DD Form 1853, call or write Code OH 60 days prior to the start of your planned travel. The DD Form 1853 expires 30 days from the date of issue.

a. Students travel in a Space "A" flight category, which is low priority. AFHPSP members will be assigned seats on aircraft only after personnel with a higher priority have been seated.

b. Members must possess a valid Armed Forces ID Card when traveling aboard DOD-controlled aircraft.

c. Students on Space A travel must conform to current Navy grooming standards, as set forth in US Navy Uniform Regulations (See Chapter 6). Particular attention must be addressed to hair length and the wearing of articles of jewelry. Please note that AFHPSP members who attempt to board aircraft, but fail to conform to such standards, will be denied a seat.

d. Information concerning the flight schedules of DOD controlled aircraft, seat availability and proper attire may be obtained from the Passenger Service Section at military air installations. Students may obtain limited information concerning flight schedules by telephone, but must be aware that such schedules are subject to frequent last minute changes.

e. AFHPSP students must ensure that they have ample funds available for their trip via commercial carrier in the event a DOD-controlled aircraft is not available. **The student is solely responsible for being at his/her place of duty (school) at the appointed time.**

f. Students must ensure that their behavior while traveling aboard DOD aircraft reflects dignity upon themselves and the US Navy. Behavior that does not meet these standards may cause the member to be denied a seat aboard the aircraft and subject the member to disciplinary action.

g. Space available transportation cannot be used when traveling on AT orders.

4-6. **Commissary Privileges.**

1. AFHPSP and FAP participants and their dependents are presently entitled to unlimited commissary privileges while performing AT.

CHAPTER FIVE
ANNUAL TRAINING

5-1. **The Purpose of Annual Training (AT).**

1. As an AFHPSP member, you are required by law to perform an active duty tour every year while you are in the program. These tours are designed to provide you with specific military instruction (at military medical or dental training) an integral part of your scholarship. These tours provide a valuable adjunct to your professional education and assist you immeasurably in your adjustment to future active duty service with the Navy. A current list of AT locations and types of clinical and research clerkships is available on the website.

5-2. **Assignment Length.**

1. Every eligible member of the AFHPSP is required by law to perform one 45-day AT period each year of program participation (four-year scholarship students will perform a total of four AT periods; three-year scholarship students will perform three AT's.) Officer Indoctrination School (OIS), discussed below, counts as one AT period.

a. There is no provision for extending an AT period beyond 45 days or taking it at two different Naval medical facilities.

b. You will return to your academic institution, if a clerkship at a Naval medical or dental facility does not cover the full 45 days (either because you have fewer than 45 days available, or because a naval medical or dental facility limits training to 30 days). The minimum period allowed at a Naval medical or dental facility is 30 days (four weeks).

c. You will perform a set of "school orders", if your school schedule does not allow time for an AT, (see below), in which your entire active duty period is performed by reporting to a local Naval reserve center.

5-3. **Assignment Types.**

1. **Officer Indoctrination School (OIS)**. A four-week orientation at Newport, Rhode Island, will be completed before entry into medical, dental, or optometry school, or after your first year. If you have no prior commissioned service in the U.S. Navy, you must attend OIS prior to your first active-duty assignment after graduation. You **MUST** attend OIS at your first available opportunity. Specific information about OIS is sent to you with your orders. Further information about OIS is available on **www.cnet.navy.mil/netc/ois**

2. **Research Clerkship**. A clerkship is performed at Naval medical facilities often focusing on research related to the operational Navy. First and second year students usually perform the rotation. Refer to the web site for a current list of research clerkships.

3. **Clinical Clerkship**. A clinical rotation is performed at a Naval hospital or Naval dental clinic, for which you may receive elective credit toward graduation (check with your school). Third and fourth year students who have gained some clinical experience perform the rotation.

4. **School Orders**. School Orders Annual Training (AT) is executed primarily by second year medical students preparing for the USMLE/COMLEX exams and is performed entirely in the geographical location of your school. Third-year students who have no elective rotation time will also be allowed to perform school orders. School orders consist of checking in with the reserve center, and returning to school to pursue your studies. You must check out with the reserve center on the last day of your orders. You do not stay and work at the reserve center; school is the place of duty for this active-duty period. You must remain at school for the entire 45-day period (no trips or vacations away from school); therefore, schedule your school orders accordingly (do not wait until spring break or summer vacation when you may want to travel).

5-4. **Annual Certificate of Physical Condition.**

1. You must have a valid Annual Certificate of Physical Condition (form NAVMED 6120) prior to executing each AT period. (This is much shorter than the full-length physical, DD forms 2807-1 and 2808). Without a current NAVMED 6120 on file, your AT application will be returned to you unprocessed or disapproved. The NAVMED 6120 is obtained at a Naval reserve center, and must bear the signature of the reserve center's medical department representative (MDR). **The signature of a civilian health care professional is not acceptable.** An **HIV test, which is required each year**, should be performed at the time you obtain the MDR's signature; ask that the lab results be forwarded to Code OH. You should submit the NAVMED 6120 with your AT application (see Appendix C). If at any time you encounter difficulty obtaining the NAVMED 6120, contact Code OH for assistance.

2. Pregnant members may perform AT up to, but not during, the third trimester. Please notify Code OH in writing via certified or registered mail of pregnancy and estimated date of delivery.

3. **Height/Weight Requirements.** You are responsible for maintaining good health and physical readiness. You are encouraged to develop a personal fitness program to aid in staying physically fit and within weight standards.

a. Failure to meet current regulations regarding height/weight, or body fat percent (if not meeting height/weight standards), is justification to find you Not Physically Qualified for AT. If you fail to meet these standards, you will be placed on a Weight Control Program. The Navy's current height/weight standards are shown in Appendix B.

b. Pregnant members may perform AT up to, but not during, the third trimester of pregnancy and six weeks postpartum. Navy height/weight standards must be met within six months.

5-6. **AT Travel.**

1. If the AT site is **greater than** 450 miles from your school, Code OH is required to issue you a government-purchased airline or train ticket. If the AT site is **less than** 450 miles from your school, you can request to drive. This policy is in accordance with DOD travel regulations, and is **not** negotiable.

2. Travel for family members is not authorized in your AT orders. If family members accompany you, the Navy will not reimburse you for any expenses they incur.

5-7. **Requesting AT.**

1. All AT applications must be received at Code OH at **least eight weeks** prior to the AT start date. You must apply for annual training on the Naval Reserve Order Writing System (NROWS) at **https://nows.cnrf.navy.mil/nrows/**
The directions are in Appendix E.

2. You must request a clerkship *p*osition from the Graduate Medical Education coordinator at the AT site, using the list found on our website. Once you have received an acceptance letter from the site, you must submit an AT request on NROWS for a set of AT orders.

3. Once you receive a tracking number, keep that number for the tracking of your orders.

a. You must forward the following to Code OH:

(1) Research clerkship or clinical clerkship: a copy of the acceptance letter from the Naval medical or dental facility.

(2) School Orders: A letter from the school Dean's or registrar's office confirming that you do not have 45 days to leave school for annual training, must be forwarded to the AT Coordinator. **NOTE:** School Orders are issued as the last alternative for AT. You must make every attempt to perform some other type of AT assignment if eligible.

4. Every AT has to have an updated Medical Physical Conditioning form or AT will **not be** approved.

5. Remember, you are responsible for securing a clerkship. Please plan in advance, and follow up on your request for clerkship assignments with the activities you contact. Once you have scheduled a clerkship at a Navy site, you will receive a confirmation letter. You or the clerkship site must fax or email the confirmation letter to the AT Coordinator at 301-295-6014.

6. If you apply and get accepted to more than one clerkship, cancel the clerkship reservation in which you do not plan to attend. Failure to cancel will result in a wasted training space that another student may have been able to attend.

5-8. **AT Locations.**

1. As stated above, a current listing of AT locations and types of clinical and research clerkships can be found on the website. **http://nshs.med.navy.mil/hpsp/Pages/HPSPHome.htm**

5-9 **AT Orders.**

1. Orders (and tickets, if required) assigning you to AT will be issued prior to the date you are scheduled to report for duty. Please take the time to read your orders and tickets, carefully, to ensure that they are correct. If you have any questions, or find a discrepancy with your orders, contact Code OH immediately.

2. Once you have received your orders, you are required to carry them out. **If for any reason you cannot execute your orders, you must notify Code OH immediately for further instructions.**

3. Each time you report to and depart from a duty station, including a Naval Reserve Center, you must have your orders endorsed (signed) to reflect the time and date you reported and detached from that duty station. Endorsements are the only proof that you performed the active duty specified in your orders. If you muster (check in and out via phone), write down, on the bottom of your orders, the name of the person that you spoke with, the date, and the time. In addition, these endorsements on your ORIGINAL orders authorize the finance center at each duty station to pay you for travel and per diem if authorized while you were attached to that duty station; you will not be paid without them.

4. **You must report to the Personnel Support Detachment (PSD) at each site to receive payment.** After the local Personnel Support Detachment (PSD) has paid you, they will return your original orders and a NAVCOMP 2120 (AT PAY VOUCHER) to you. Make a copy of these documents for your records and **send the originals to Code OH.**

5-10. **Uniforms.**

1. The Navy authorizes a variety of uniforms for all climates and seasons, plus jackets, raincoats, overcoats, etc., for both men and women. A listing is too extensive to be presented here. A complete description of authorized uniform combinations and specific instructions for placement of rank and insignia are contained in the United States Navy Uniform Regulations. These regulations are available in the administration section at any of your Navy training locations and on the web.

https://buperscd.technology.navy.mil/bup_updt/508/unireg/uregMenu.html

2. You are authorized to purchase Navy uniforms from the Uniform shop at any Navy Exchange. You do not have to be on active duty, but you must have your military ID card. Any experienced officer or clothing sales store person can assist you in selecting and setting up the best and least expensive uniforms for your needs. The uniform is required to be worn only when you are assigned to AT with the Navy Medical Department facility, or while serving aboard a Navy vessel.

a. You do not need to purchase uniforms prior to attending OIS; you will purchase uniforms there.

b. Before you report on AT, you must contact the GME/GDE coordinator at the facility to which you are being assigned regarding the specific type of uniform you will be required to wear. Ask whether you need to purchase uniforms prior to reporting to AT. In some instances, you may be able to purchase uniforms after reporting. If you need to purchase uniforms before reporting and have not been to OIS for uniform issue, your local recruiting personnel, NROTC personnel, or Reserve Detachment personnel can offer advice/assistance as to where to purchase the uniforms.

c. You may also call the **Navy Uniform Support Center at 1-800-368-4088.** However, we do not recommend that first-time uniform purchasers buy uniforms by mail, due to size variations between civilian and military clothing. You may even purchase uniforms online at
https://www.nexnet.navy.mil/pls/nexauth/wg_shop_online

5-11. **Uniform Allowance.**

1. You are authorized a uniform allowance of $400.00 on your first AT assignment that requires the wearing of a uniform. You will be paid via Direct Deposit. If your first AT requires a uniform and your orders do not contain this statement, please call Code OH. You will not be reimbursed for uniform purchases through the reimbursement process, due to you receiving a uniform allowance of $400.00.

5-12. **Navy Grooming Standards.**

1. While on AT, on campus or at a Navy facility, you must conform to Navy dress and grooming standards. Official Navy standards are located in the Uniform Regulations. In addition, you must comply with the directives and orders of officers acting in an official military capacity who are appointed as your superiors.
https://buperscd.technology.navy.mil/bup_updt/508/unireg/uregMenu.html

5-13. **Entitlements.**

1. While on AT, you are entitled to all the rights and privileges of a commissioned officer. Whether you perform this training at school or at a military medical facility, you and your dependent family members are eligible for Navy Exchange and Commissary privileges, and military medical care. The active-duty member is also eligible for dental care.

a. Pay

(1) Base Pay. You will receive the basic pay of an Ensign (0-1) with less than 2 years of service. Students who have established prior service entitlements will be paid at a higher rate (see the military pay scale for more details). Base pay is taxable.

(2) Basic Allowance for Housing (BAH). BAH is nontaxable. It will be paid to you at the married or single rate, depending on what you are entitled to, during your AT tour. Single officers serving tours at Navy facilities where Bachelor Officer Quarters (BOQ) are available are not entitled to receive the full BAQ allowance, but will receive the partial rate per month. Married officers serving their AT at a Navy facility with a BOQ will receive the full allowance.

Normally, family quarters are not available, so if your family accompanies you, be prepared to pay for their quarters with private funds.

(3) Basic Allowance for Subsistence (BAS). You will receive BAS, also nontaxable, at the officer rate.

(4) Per Diem. Per Diem is a daily food and lodging allowance paid when you are on official government travel away from your permanent duty station. When in receipt of travel orders, you must use Government quarters and messing, when available. You are not entitled to full per diem at military installations where both Government quarters and meals are available, such as at Officer Indoctrination School. **If quarters are not available at your duty station, you must obtain a certification of non-availability from the BOQ or housing manager.** This certification must be attached to your travel orders and your travel voucher (DD Form 1351-2) and submitted at the end of your AT tour.

b. Medical care for the active-duty member. While on AT, you are entitled to routine and emergency medical and dental care at the nearest Military Treatment Facility (MTF). Your family is also authorized routine and emergency medical care at the nearest MTF during your AT tour. Dental care for dependents is limited to emergency treatment only. While in transit to and from a Navy base during the period covered by your AT orders, you are authorized emergency care from civilian sources if it is not readily available from an MTF. If you are required to use a civilian facility while in transit, notify Code OH or Tricare immediately so that billing procedures can be established with the proper Navy facility.

c. Family medical care. Your family may receive care from Tricare at civilian medical facilities if a military facility is not readily available while you are on AT. **Before using Tricare, contact the Health Benefits Advisor's office at the nearest MTF.** Information about Tricare can be accessed at **http://www.tricare.osd.mil/**. Some key things to remember about Tricare are:

(1) Tricare is only available for your dependents when you have active duty orders for a period longer than 30 days.

(2) Health care beneficiaries must normally use a military facility (life and limb emergencies excepted) if there is one available which can provide the required inpatient care. A facility is normally considered available if you live in certain zip codes around a service hospital.

(3) Family members must be enrolled in the Defense Enrollment Eligibility Reporting System (DEERS) at Navy Personnel Support Detachments (PSD) to be eligible for Tricare. It is the active-duty member's responsibility to accomplish this at the start of each AT.

(5) For more information, contact the Health Benefits Advisor's office at the nearest military medical facility.

d. You will accrue four days of leave while on AT. Since your assignment is designed to accomplish a great deal in a short time, **you will not be authorized to take this leave during your AT assignment.** You will however, be paid for that leave via Direct Deposit. Prior active duty members who have already been paid for 60 days accrued leave cannot be paid for their leave.

5-14. **Servicemen's Group Life Insurance (SGLI) and Veteran's Group Life Insurance (VGLI).**

1. SGLI offers military personnel up to $250,000 value. The monthly premium is automatically deducted from the member's AT paycheck.

2. After release from AT, coverage under SGLI continues for an additional 120 days without premium charges. Students may extend this coverage by converting their SGLI to VGLI. The method of payment is by coupon. The length of participation is limited to five years, but is renewable.

3. You cannot apply for VGLI unless you were previously insured under SGLI during AT. After release from AT, you will have 120 days to convert to VGLI for an amount not to exceed your SGLI coverage. Once the 120-day period has passed, you have an additional year to apply for VGLI, but evidence of insurability may be required.

VGLI must be purchased in $10,000 increments. For further information about this coverage, contact the office listed below.

4. How to apply for VGLI:

a. Within 120 days after release from AT:

(1) Obtain VA form 29-8714, Application for VGLI, from any Department of Veteran's Affairs office or from Office of Servicemen's Group Life Insurance (OSGLI), 213 Washington St., Newark, NJ 07102. OSGLI's toll-free number is: 1 800-419-1473.

(2) Mail the completed VA form and a fully endorsed copy of your AT orders and the first month's premium (as stated) on the Rate Schedule on the application to OSGLI. Upon approval of your application, you will receive a certificate and a supply of monthly premium payment coupons. If you prepay 11 months of premiums you will receive the twelfth month free of charge as a discount incentive. Due dates will be shown on the monthly coupons.

b. Within one year, but after 120 days after release from AT:

(1) Obtain VA Form 29-8714-2, Application for VGLI Veterans Separated More than 120 days, from any VA office or OSGLI.

(2) Follow the same instructions given above. The basic difference between the two forms is the inclusion of a health information section on VA form 29-8714-2. OSGLI may also request additional medical information of further proof of insurability, if warranted by your answers in the health information section.

5. You may cancel your VGLI to take advantage of the 120-day SGLI free premium each time you report on AT. However, once you report for extended active duty after graduation, you must cancel your VGLI policy and take the SGLI. You will again become eligible for the VGLI 5-year renewable policy after your release from active duty.

CHAPTER SIX
PROFESSIONAL AND CAREER PLANNING

6-1. **Professional and Career Planning.**

1. Questions regarding Graduate Medical Education should be directed to the OH Registrar at **OH@nmetc.med.navy.mil**. The Registrar will forward the questions to the appropriate individuals and be responsible for the answers.

2. Questions should be directed as follows:

a. General professional career counseling: Department Head, Professional and Career Planning; or Director, Medical Department Accessions Directorate.

b. GME-1 (Internship) application process: Professional and Career Planning Department (Code OH4)

6-2. **Graduate Medical Education (GME) Internship Application Procedures.**

1. In January of your junior year Medical Corps AFHPSP students will receive from the Professional and Career Planning Department an information/instruction package regarding scheduling your Navy clerkships in preparation for submitting an application for first year of Graduate Medical Education (GME-1). Questions regarding the GME-1 application process may be addressed to Code OH4 or **OH@nmetc.med.navy.mil**

6-3. **Graduate Medical Education Medical Corps Board (GMEMCB).**

1. The Navy Surgeon General convenes a Graduate Medical Education Selection Board (GMEMCB) each November/December. During your senior year, your application for GME-1 (internship) will be considered by the Intern Selection Committee of the GMEMCB.

6-4. **Factors Considered by the GMEMCB.**

1. Applicants are evaluated on the basis of the following:

a. Medical school performance (pre-clinical and clinical years).

b. Standardized test scores.

c. Evaluations such as Dean's letter, letters of recommendation, clerkship reports, and interviews at Navy training sites.

d. Potential as an intern and military adaptability.

NOTE: In the selection process, clerkship evaluations and interview reports from Navy hospitals are very important. You must make every possible effort to serve your Annual Training periods, or at least interview at the Navy hospital where you would like to receive your GME-1 training. The Navy cannot fund travel for interviews, so you should schedule interviews during you annual trainings.

6-5. **Selection for GME.**

1. All Medical Corps AFHPSP recipients are required to submit a Navy GME-1 application. The Navy application enables a student to submit a preference list (in descending order) of their choices for GME. An applicant may apply for Navy training for their GME-1 year, for permission to do a civilian GME-1 year (a 1-year deferment of active duty obligation), or for permission to complete a civilian residency (a full deferment of active duty obligation until residency completion). Because there usually are more Navy AFHPSP medical corps graduates each year than Navy GME-1 positions, not all AFHPSP Medical Corps graduates are selected for Navy GME-1. Graduates not selected for a Navy GME-1 year are selected for a 1-year deferment or a full deferment.

2. Full deferments are granted based on the needs of the Navy. A student requesting a full deferment but not selected for one could be selected for a Navy GME-1 year or a 1-year deferment. Because any student could be selected for a 1-year deferment, all graduating students must also apply to civilian preliminary programs.

6-6. **Notification of GMEMCB Results.**

1. Students will be notified in mid-December of the results of the Intern Selection Committee. That provides adequate notice for continued participation in the civilian match if necessary.

CHAPTER SEVEN
GRADUATE DENTAL EDUCATION

7-1. **Professions Liaison.**

1. Questions regarding Graduate Dental Education should be directed as follows:

a. PGY-1 (AEGD/GPR) process: Director, Dental Corps Programs of the Graduate programs Directorate (Code OGDC), Professional Career Counseling Department (Code OH4).

b. Post Graduate Dental Specialty Residency application process: Director, Dental Corps Programs of the Graduate Programs Directorate (Code OGDC).

c. General professional career counseling: Director, Dental Corps Programs of the Graduate programs Directorate (Code OGDC), Department Head, or Professional and Career Counseling.

2. Direct all administrative questions, including scholarship extension, delays in graduation or Leave Without Pay to Code OH3.

7-2. **Graduate Dental Education (GDE) Application**

1. **Procedures.** **PGY-1 (AEGD/GPR)** - In August of your senior year you will receive an application package with complete instructions. The Chief of the Navy Dental Corps will convene a selection Board in mid December with notification of selection in early January.

2. Postgraduate Dental Specialty Residency Programs - In January of your junior year you should review the Dental Corps Graduate Education Announcement (1520) posted on the Dental Corps Home page. This will indicate which postgraduate dental programs are available and instructions on how to complete the application process. Questions regarding the Duty Under Instructions (DUINS) application process may be addressed to the Director, Dental Corps Programs of the Graduate Programs Directorate (Code OGDC) by e-mail or call (301) 295-0650.

7-3. **Duty Under Instructions Selection Board (DUINS).**

1. The Navy Surgeon General (SG) convenes a Graduate Dental Education Selection Board (DUINS) every June. During your senior year, your application for Post Graduate Dental Specialty Residency training will be considered by the DUINS Selection Committee. The Chief of the Navy Dental Corps is the President of the Board.

7-4. **Factors Considered by the PGY-1/DUINS selection boards.**

1. Applicants are evaluated on the basis of the following:

a. Dental school performance (preclinical and clinical years).

b. Standardized test scores.

c. Evaluations such as Dean's letter, letters of recommendation, clerkship reports, and interviews at Navy training sites.

d. Potential as a PGY-1 resident or dental specialty resident and military adaptability.

NOTE: In the selection process, clerkship evaluations and letters of recommendation are very important.

7-5. **Selection for PGY-1 and Dental Specialty Residencies.**

1. The Navy Dental Corps application enables a student to submit a first and second choice for the PGY-1 (AEGD/GPR) as well as Postgraduate Dental Specialty Residency training.

a. An applicant may apply for permission to do a civilian Dental specialty Residency in a deferred status (NADDS) with a full deferment of active duty obligation until residency completion.

b. The Financial Assistance Program (FAP) is another way to pursue dental specialty residency training with Navy financial assistance. See your local recruiter for more information on the NADDS and FAP programs or contact the Director Dental Corps Programs (Code OGDC) at NMETC.

7-6. **Notification of PGY-1 and Dental Residency Selection Results.**

1. Students will be notified in early January of the results of the PGY-1 Selection Committee and late June for the Postgraduate dental specialty residency selections.

CHAPTER EIGHT
GRADUATION AND PROGRAM COMPLETION

8-1. **Orders and Superseding Appointment.**

1. Upon graduation, all AFHPSP members will supersede to the rank of Lieutenant at the Naval Recruiting District (NRD) that is responsible for your school (this may not be the same district that recruited you). **It is critical that you supersede at your earliest eligibility date (the date on your diploma). This date becomes your date of rank, and will affect your active-duty pay and benefits.**

2. Upon proof of graduation, you will be reappointed a commissioned Officer in the Medical Corps or Dental Corps, US Naval Reserve. Code OH cannot change the NRD to which you are assigned; however, the NRD may be able to ship your orders to one of its subordinate processing stations closer to your school. This decision lies with the NRD, not with Code OH.

3. Code OH usually receives your original orders 30 to 60 days prior to your graduation. You will be mailed an "advance copy" of your orders with a cover letter informing you which NRD to contact. It is very important that you contact the NRD prior to your graduation so that you can schedule your re-commissioning and shipment of household goods.

4. If you were selected for a Navy internship or dental GPY-1 Program, Code OH2 will forward your original orders, service, medical, and dental records to your NRD. You will execute your orders and assume custody of your service record on your commissioning date. You will retain custody of your orders and your service record until you report to the duty station specified in your orders.

5. If you were deferred from active duty to obtain graduate medical or dental education at a civilian facility, Code OH will retain your service record until you are recalled to active duty. Code OH will forward only your superseding appointment to the NRD.

GLOSSARY TERMS

The following terms and acronyms are explained to assist you in understanding terms found in this booklet and in the Navy medical community.

1. Accredited Institution. A College or University in the United States or Puerto Rico listed as accredited in the latest issue of the Education Directory, Part 3, "Higher Education," published by the US Department of Health and Human Services (HHS). This includes institutions that have received provisional accreditation.

2. Annual Training (AT). A 45-day period designed to provide scholarship recipients an opportunity to experience the responsibilities of a Naval officer and to familiarize them with the operations of Naval Medical Department activities. If there is a conflict with academic schedules, all or part of an AT may be performed at a Naval Reserve Center near your school.

3. The Armed Forces Health Professions Scholarship Program (AFHPSP). Created by Public Law 92-426 on 21 September 1972.

4. Program Director. The Program Director is either a Navy Medical Service Corps officer or a senior civilian assigned to NMETC, Code OH, who has direct management responsibility for the administration, support and supervision of the and its scholarship recipients.

5. BUMED. Bureau of Medicine and Surgery, Department of the Navy, Washington, DC.

6. Clinical Clerkship. A clinical tour at a Navy Medical Department activity designed for recipients who are interested in receiving elective credit toward graduation from their school, and who desire clinical exposure before making a final decision on specialty training.

7. CONUS. Continental United States.

8. Defense Systems Network (DSN). Telephone communications system within the Department of Defense (DOD). Official calls can be made from most Reserve Centers, NROTC units and military installations.

9. Dental Corps (DC).

10. DFAS. Defense Finance and Accounting Service (DFAS), Cleveland, Ohio.

11. Direct Deposit System (DDS). A pay system in which funds are electronically transferred from the Navy to the financial institution.

12. Ensign. The rank held by Navy students while they are in the program. The corresponding Army and Air Force rank is "Second Lieutenant".

13. Fiscal Year (FY). The accounting period for US Government finances, from 1 October of one year to 30 September of the following year.

14. GMESB. The Navy Surgeon General's Graduate Medical Education Selection Board, held each fall (usually late November or early December) to select Medical Department officers for Graduate Medical Education (GME) programs such as internships and residencies.

15. Leave Without Pay (LWOP). A period of leave from the Armed Forces Health Professions Scholarship Program in which the member is eligible for no tuition, stipend, reimbursement, or periods of Annual Training.

16. Medical Corps (MC). Physicians within the United States Navy.

17. Medical Service Corps (MSC). Healthcare providers within the United States Navy.

18. Naval Hospital (NH). Medical treatment facility in the Federal Government.

19. NMETC. Naval Medical Education and Training Command. 8901 Wisconsin Ave. Bethesda, MD 20889-5612.

20. Nurse Corps (NC). Nurse within the United States Navy.

21. Per Diem. Money allotted for living expenses and incidentals while on official orders. Per diem varies depending on geographical location and availability of US government quarters and messing (meals).

22. Professional School Liaison Officer (PSLO). An Inactive/Active Reserve Medical Officer who holds a faculty or administrative appointment at a medical school, and who serves as the official representative of the Surgeon General of the Navy at the school.

23. Research Clerkship. AT assignments designed primarily for 1st year and 2nd year medical students, performed at Naval medical research facilities to allow students to participate in research projects.

24. Scholarship Recipient. Inactive Reserve officer holding a 1975 (medical), 1985 (dental), or 1995 (optometry) designator participating in the AFHPSP.

25. Shipboard Orientation. AT designed for students who have completed Officer Indoctrination School and who desire to participate in an operational tour aboard a combat ship, usually an aircraft carrier. This assignment includes working as a line officer in all aspects of shipboard life.

26. Social Security Number (SSN). A nine digit identification number assigned by the Federal Government.

27. Surgeon General of the Navy (SG). Chief, Bureau of Medicine and Surgery for the United States Navy.

APPENDIX A

INSTRUCTIONS FOR COMPLETING A CLAIM FOR REIMBURSEMENT FOR EXPENDITURES WHILE ON OFFICIAL BUSINESS (SF-1164)

Block 1 - Medical Department Accessions Directorate
NMETC, Bethesda (Code OH)
8901 Wisconsin Ave
Bethesda, MD 20889-5611

Blocks 2 & 3 - Leave blank.
Block 4(a) - Last name, then first name and middle initial.
Block 4(b) For security/privacy ***LAST 4 digits ONLY*** *of your SSN.*
Block 4(c) Full mailing address
Block 4(d) Insert a telephone number where you can be reached during business hours if a question arises regarding your claim.
Block 5 - Leave blank.
Block 6 – each individual item claimed requires input in blocks (a), (c-d) and (f), and maybe in (e), (g) and/or (i) of block 6.
Block 6(a) - Show date of purchase. Display as day, month in letters, and year. Example: 12 SEP 84.
Block 6(b) - Leave blank.
Block 6(c) FROM - Use this column (and extend into 6 (d) if necessary) for description of each individual authorized item purchased as outlined in chapter 3. List items separately in order shown on original receipts. Give text title and author.
Block 6(d) TO – Blank or extended item description from 6 (c).
Block 6(f) MILEAGE - Insert the individual ***item cost*** *of each item in this block NOT including any tax or discount. The tax goes in block 6 (g), discount in block 6 (i).*
Block 6(g) FARE or Toll – List ***tax*** *charged for each item.*
Block 6(h) - Leave Blank
Block 6(i) TIPS or MISC – List ***discount*** *applied to each item.*
SUBTOTALS - Insert the ***column totals*** *of the items listed on the back of the SF 1164 (6. EXPENDITURES - Continued) in the* ***subtotal blocks*** *as needed in columns (f), (g) and (i).*
Block 7 - AMOUNT CLAIMED - Total entire claim by adding down columns (f), (g) and (i) into the total block at the bottom of each column, then add the total of (f) and (g) and subtract (i).
Block 8 - Leave ***Blank*** *– this is for Code OH reviewer signature*
Block 9 - Leave ***Blank*** *– this is for the Comptroller's signature*
Block 10 – YOU (THE CLAIMANT) - Sign and date. NO OTHER SIGNATURE WILL APPEAR ON THE FORM AT TIME OF SUBMISSION.
Block 11 Leave Blank
Block 12 - leave blank.

APPENDIX B
HEIGHT/WEIGHT TABLE
OPNAVINST 6110.1G
10 October 2002

MAXIMUM WEIGHT FOR HEIGHT SCREENING TABLE
Maximum Weight in Pounds

Men Maximum Weight (pounds)	Member's Height	Women Maximum Weight (pounds)
97	51	102
102	52	106
107	53	110
112	54	114
117	55	118
122	56	123
127	57	127
131	58	131
136	59	136
141	60	141
145	61	145
150	62	149
155	63	152
160	64	156
165	65	160
170	66	163
175	67	167
181	68	170
186	69	174
191	70	177
196	71	181
201	72	185
206	73	189
211	74	194
216	75	200
221	76	205
226	77	211
231	78	216
236	79	222
241	80	227
246	81	233
251	82	239
256	83	245
261	84	251
266	85	257
271	86	263

NOTE: Height will be rounded up to the nearest whole inch, weight will be rounded down to the nearest whole pound.

APPENDIX C
ORGANIZATIONAL BREAKDOWN

DEPARTMENT	CODE
MDAD Director	OH
MDAD Assistant Director	OHA
MDAD Deputy Director	OHB
Financial Management - Tuition - Reimbursements - Annual Training - Financial Analyst - Budget Analyst	OH1
Systems Management - Medical/Dental Records - Service Records - Pay Research - Bonuses - Stipend	OH2
Military Liaison - LWOP - Dental Programs - Medical Issues - Security Clearances	OH3
Professional and Career Planning - GME-1	OH4

APPENDIX D
NAVY UNIT IDENTIFICATION CODE (UIC)

57110	COMNAVSPECWAR GROUP ONE	CA
00074	COMNAVSPECWARCOM	CA
0608A	NATNAVDENCEN BETHESDA MD	MD
00168	NATVAVMEDCEN BETHESDA	MD
62128	NAVAIRESCEN SAN JOSE CA	CA
68326	NAVDENCEN GREATLAKES IL	IL
62753	NAVDENCEN MIDLANT NORFOLK VA	VA
66022	NAVDENCEN SW SAN DIEGO CA	CA
68095	NAVHOSP BREMERTON WA	WA
68094	NAVHOSP CAMP PENDLETON CA	CA
00211	NAVHOSP GREATLAKES IL	IL
00232	NAVHOSP JACKSONVILLE FL	FL
00203	NAVHOSP PENSACOLA FL	FL
62092	NAVMARCORESCEN AKRON OHIO	OH
62116	NAVMARCORESCEN ALAMEDA CA	CA
61861	NAVMARCORESCEN ALBANY NY	NY
62108	NAVMARCORESCEN ALBUQUERQUE NM	NM
61959	NAVMARCORESCEN AMARILLO TX	TX
61915	NAVMARCORESCEN ATLANTA GA	GA
61910	NAVMARCORESCEN AUGUSTA GA	GA
61963	NAVMARCORESCEN AUSTIN TX	TX
62111	NAVMARCORESCEN BAKERSFIELD CA	CA
61897	NAVMARCORESCEN BALTIMORE MD	MD
61940	NAVMARCORESCEN BATON ROUGE LA	LA
62084	NAVMARCORESCEN BATTLE CREEK M	MI
61942	NAVMARCORESCEN BESSEMER AL	AL
62139	NAVMARCORESCEN BOISE IDAHO	ID
61843	NAVMARCORESCEN BRONX NY	NY
61842	NAVMARCORESCEN BUFFALO NY	NY
61911	NAVMARCORESCEN CHARLESTON SC	SC
61917	NAVMARCORESCEN CHARLOTTE NC	NC
61934	NAVMARCORESCEN CHATTANOOGA TN	TN
62094	NAVMARCORESCEN CINCINNATI OH	OH
62095	NAVMARCORESCEN COLUMBUS OH	OH
62055	NAVMARCORESCEN DAYTON OH	OH
62130	NAVMARCORESCEN DENVER CO	CO
62044	NAVMARCORESCEN DES MOINES IOWA	IA
62080	NAVMARCORESCEN DETROIT MI	MI
61886	NAVMARCORESCEN EBENSBURG PA	PA

61980	NAVMARCORESCEN EL PASO TX	TX
61878	NAVMARCORESCEN ERIE PA	PA
61984	NAVMARCORESCEN EVANSVILLE IND	IN
62082	NAVMARCORESCEN GRAND RAPIDS MI	MI
61989	NAVMARCORESCEN GREEN BAY WI	WI
61921	NAVMARCORESCEN GREENSBORO NC	NC
61935	NAVMARCORESCEN GULFPORT MS	MS
61877	NAVMARCORESCEN HARRISBURG PA	PA
61968	NAVMARCORESCEN HOUSTON TX	TX
62031	NAVMARCORESCEN INDIANAPOLIS	IN
61926	NAVMARCORESCEN JACKSONVILLE FL	FL
61948	NAVMARCORESCEN KNOXVILLE TN	TN
62085	NAVMARCORESCEN LANSING MI	MI
61880	NAVMARCORESCEN LEHIGH VALLEY	PA
62077	NAVMARCORESCEN LEXINGTON KY	KY
61970	NAVMARCORESCEN LITTLE ROCK AR	AR
62102	NAVMARCORESCEN LOS ANGELES CA	CA
62078	NAVMARCORESCEN LOUISVILLE KY	KY
62100	NAVMARCORESCEN MADISON WI	WI
61809	NAVMARCORESCEN MANCHESTER NH	NH
61927	NAVMARCORESCEN MIAMI FL	FL
62035	NAVMARCORESCEN MILWAUKEE WISC	WI
61945	NAVMARCORESCEN MOBILE ALA	AL
62114	NAVMARCORESCEN MORENO VALLEY	CA
61904	NAVMARCORESCEN MOUNDSVILLE WV	WV
61866	NAVMARCORESCEN NEW HAVEN CT	CT
61998	NAVMARCORESCEN OMAHA NEBRASKA	NE
61929	NAVMARCORESCEN ORLANDO FL	FL
62037	NAVMARCORESCEN PEORIA IL	IL
62109	NAVMARCORESCEN PHOENIX AZ	AZ
61835	NAVMARCORESCEN PLAINVILLE CT	CT
62145	NAVMARCORESCEN PORTLAND OR	OR
61821	NAVMARCORESCEN PROVIDENCE	RI
61923	NAVMARCORESCEN RALEIGH NC	NC
61881	NAVMARCORESCEN READING PA	PA
62127	NAVMARCORESCEN RENO NEVADA	NV
61900	NAVMARCORESCEN RICHMOND VA	VA
61905	NAVMARCORESCEN ROANOKE VA	VA
61839	NAVMARCORESCEN ROCHESTER NY	NY
61996	NAVMARCORESCEN ROCK ISL IL	IL
62119	NAVMARCORESCEN SACRAMENTO	CA
62126	NAVMARCORESCEN SALT LAKE CITY	UT
61982	NAVMARCORESCEN SAN ANTONIO TX	TX
62106	NAVMARCORESCEN SAN DIEGO CA	CA
61944	NAVMARCORESCEN SHREVEPORT LA	LA
62075	NAVMARCORESCEN SOUTH BEND IN	IN

62146	NAVMARCORESCEN SPOKANE WA	WA
62038	NAVMARCORESCEN SPRINGFIELD MO	MO
62058	NAVMARCORESCEN ST PAUL MN	MN
61999	NAVMARCORESCEN TOLEDO OH	OH
62107	NAVMARCORESCEN TUCSON AZ	AZ
61938	NAVMARCORESCEN TULSA OK	OK
61894	NAVMARCORESCEN WASH DC	DC
61931	NAVMARCORESCEN WEST PALM BEACH	FL
61916	NAVMARCORESCEN WILMINGTON NC	NC
61815	NAVMARCORESCEN WORCHESTER MA	MA
62098	NAVMARCORESCEN YOUNGSTOWN OH	OH
62115	NAVMARCORESREDCEN TREASURE ISL	CA
00183	NAVMEDCEN PORTSMOUTH VA	VA
00259	NAVMEDCEN SAN DIEGO CA	CA
32398	NAVMEDRESCHCEN BETHESDA MD	MD
0751A	NAVOPMEDINST PENSACOLA FL	FL
62021	NAVPHIBASE CORONADO	CA
61920	NAVRESCEN ASHEVILLE NC	NC
61805	NAVRESCEN BANGOR ME	ME
62138	NAVRESCEN BILLINGS MONT	MT
61987	NAVRESCEN CEDAR RAPIDS IA	IA
61901	NAVRESCEN CHARLESTON WVA	WV
62142	NAVRESCEN CHEYENNE WYO	WY
61912	NAVRESCEN COLUMBIA SC	SC
61919	NAVRESCEN COLUMBUS GA	GA
61978	NAVRESCEN CORP CHRISTI TEX	TX
61988	NAVRESCEN CP GIRARDEAU MO	MO
62062	NAVRESCEN DECATUR ILL	IL
62047	NAVRESCEN DUBUQUE IOWA	IA
62057	NAVRESCEN DULUTH MINN	MN
62144	NAVRESCEN EVERETT WASH	WA
62091	NAVRESCEN FARGO ND	ND
62121	NAVRESCEN FRESNO CA	CA
61979	NAVRESCEN FT WORTH TX	TX
62046	NAVRESCEN GARY IN	IN
61845	NAVRESCEN HONOLULU HI	HI
61834	NAVRESCEN HORSEHEADS NY	NY
61903	NAVRESCEN HUNTINGTON W VA	WV
62054	NAVRESCEN KANSAS CITY MO	MO
62066	NAVRESCEN LA CROSSE WISC	WI
62069	NAVRESCEN LINCOLN NEB	NE
61962	NAVRESCEN MEMPHIS TN	TN
61955	NAVRESCEN MERIDIAN MS	MS
61971	NAVRESCEN NASHVILLE TENN	TN

61954	NAVRESCEN NEW ORLEANS	LA
61965	NAVRESCEN OKLAHOMA CITY OK	OK
61949	NAVRESCEN PENSACOLA FLA	FL
62105	NAVRESCEN PORT HUENEME CA	CA
61804	NAVRESCEN PORTLAND ME	ME
62088	NAVRESCEN SAGINAW MICH	MI
62134	NAVRESCEN SEATTLE WA	WA
62043	NAVRESCEN SIOUX CITY IOWA	IA
62068	NAVRESCEN SIOUX FALLS SD	SD
61930	NAVRESCEN ST PETERSBRG FLA	FL
61863	NAVRESCEN SYRACUSE NY	NY
62135	NAVRESCEN TACOMA WA	WA
61933	NAVRESCEN TAMPA FLA	FL
61952	NAVRESCEN TUSCALOOSA ALA	AL
61851	NAVRESCEN WATERTOWN NY	NY
61822	NAVRESCEN WHITE RIVER JCT VT	VT
61876	NAVRESCEN WILMINGTON DEL	DE
61992	NMCRC ST LOUIS MO	MO
62040	NMCRS WICHITA KS	KS
68336	USUHS BETHESDA MD	MD

APPENDIX E
ANNUAL TRAINING APPLICATION ON NROWS DIRECTION

1. Sailor Menu

a. General Information. This is the Sailor's menu option, within the NROWS Web Main Page, allowing the Navy Reservist the option of requesting a set of orders and track all requested orders through the order processing life-cycle.

b. How do I get here? After successfully logging in from the NROWS **Login Screen**, the NROW **Main Page** is displayed. Choose the **Sailor** option to display the Sailor menu options.

c. Options Available.

Sailor :

1. New Applications – Choose this option to request a set of orders.

2. My Inbox – Choose this option to view and pull back all applications that have been forwarded and being processed to you.

Utilites:

3. My Account – Choose this option to view user phone number, email, question, answer, and set email notification.

4. Change Password – Choose this option to change user password.

5. Change Profile – Choose this option to change user profile.

6. System Comments – Choose this option to link to NROWS help desk web link.

7. Print Orders – Choose this option to print user orders.

8. Print Labels – Choose this option to print labels.

9. Print PMA – Choose this option to print PMA.

2. New Applications

a. General Information. This is the New Applications Menu option within the NROWS Web Main Page primary navigation.

b. How Do I Get Here? Starting with the NROWS Main Page, select the **Sailor** option and choose **New Applications.**

c. Options Available. (After selecting New Applications).

1. Type of Duty: Annual Training- HPSP or FAP
2. Start Date: 0000/00/00
3. Report Date: Same as start date
4. End Date: 0000/00/00
5. Total Days: HPSP: 45 days, FAP: 14 days
6. Duty Location:
   a. Unit – Indicate Clerkship site or School
   b. Duty with – Medical department or school orders
   c. UIC – Unit Identification Code (see Appendix D)
7. Travel:
   a. Government Transportation – Air or Train
   b. Privately Own Vehicle – Travel no more than 450 miles
   c. Rental Car – Must have justification from clerkship site
8. Supporting Information:
   a. Justification: You must forward a Dean's letter for school orders or Clerkship letter for clerkship orders to Code OH
   b. Billet Control Number: Not Set
9. Government Travel Card: Not Applicable

3. **My Inbox**

a. General Information. This is the Navy Reservists, My Inbox, Menu option under the Sailor's Menu within the NROWS Web Main Menu. This brings up a list of all applications available to the Navy Reservist for the purposes of reviewing, deleting, and updating.

b. How Do I Get Here? Starting with the NROWS Main Menu, select the **Sailor** option then select **My Inbox** from the side menu.

c. Options Available. (After selecting My Inbox).

1. Line Selection: To select an order tracking #, use your cursor and double-click on the specific number you want to display/update.

2. Delete Order: Select the tracking number check box you want to delete and press the Delete button.

3. Pull Back Order: Select the tracking number check box you want to pullback and press the Pull Back button.

d. Routing Options.

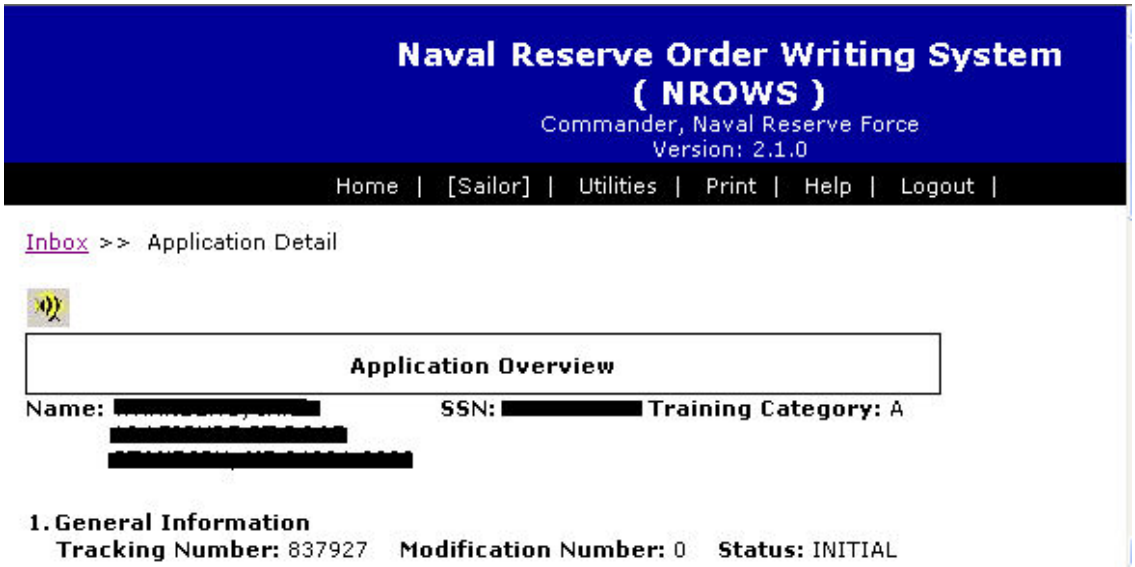
1. After selecting the Tracking # line, you will be routed to the same display screens as the New Applications with update capabilities beginning with Step 1: Type of Duty. If a request is approved by CO/TO then the request will have an instant tracking button to track the request.

4. Order Tracking Application

The selected request from My Inbox within the Sailor's menu is displayed in summary format if the request is approved by the sailor's CO/TO.

HOW DO I GET HERE?

Starting with the **NROWS Main Menu**, select the **Sailor** option then select **My Inbox** from the side menu option. Choose a tracking # row link from the **Inbox List** to receive this **Application Summary** display.



5. Order Tracking Order Detail

This is the selected application request from My Inbox list, and the order details are displayed.

HOW DO I GET HERE?

Starting with the **NROWS Main Menu**, select the primary navigation **Sailor** option then on the side navigation select **My Inbox.** Choose a tracking # row link from the **Inbox Selection List** to receive an **Application Summary.**

Then click on the instant tracking icon option on top of the Application Summary page to receive the pop up, **Order Detail** (default), display page.

.:: NROWS - Order Detail ::. - Microsoft Internet Explorer

Control Tracking #: N/A
Tracking #: 837927/0
SSN: [redacted]

Name: [redacted]
Start Date: 2003/08/15
End Date: 2003/08/29

Order Type: AT
Status: CO
Total Days: 15

Display Section: Order Detail

Print Latest Modification

Name	[redacted]
SSN	[redacted]
RUIC	83655
Grade	O4
Tracking #	837927
Current Modification	0 (In Process)
Duty Dates	2003/08/15 - 2003/08/29
Status	CO
Gaining Command	SUPER UNIT 101
Gaining Command POC	007 BOND
Gaining Command POC Phone #	
NRA Orders Specialist	NRC BRUNSWICK, ME
NRA Orders Specialist Phone #	
Order Approver	
Order Approver Phone #	
SDN(s)	
Hard Holds	

Back to Application | Close this Window