References:

- U.S. Navy NAVMED P-117, Manual of the Medical Department, Article 15, Sections 32 through 61, 102, and 105.
- Army Regulation 40-501, Standards of Medical Fitness, Chapters 5 through 8.
- ACN to OPNAVINST 6400.1C, dated SEP 2009.

Enclosures:

- NSW/SO Exam Checklist
- Sample DD Form 2807-1
- Sample DD Form 2808
- NSW/SO template DD Form 2808

Introduction.

Naval Special Warfare/Special Operator (NSW/SO) duty is characterized by performance of duties in complex terrain under austere conditions. This duty includes military combat diving, basic parachuting, high altitude low opening (HALO) parachuting, military free-fall parachuting, and other types of high risk training. Consequently, naval special warfare and special operations are the most physically and mentally demanding communities within the U.S. military, and only the most physically and mentally qualified personnel should be selected for training.

Who requires an NSW/SO medical examination?

The NSW/SO medical examination is required for anyone serving in or wishing to enter any of the following communities: SEAL, SWCC, Navy EOD, Force Recon and MARSOC. Specifically, all Marines wishing to participate in Assessment and Selection (A&S) at the Marine Special Operations School (MSOS) must have a completed NSW/SO physical prior to reporting for training.

Who can perform an NSW/SO Duty medical examination?

The NSW/SO duty medical examination may be performed by any physician, physician's assistant or nurse practitioner. However, it must be reviewed for completeness and accuracy, and then countersigned by an Undersea Medical Officer (UMO). Independent duty corpsmen are not authorized to perform the exam.

Where can I find a UMO?

There are several UMOs billeted at Naval and Marine Corps bases worldwide. However, at present, there is only one UMO available with 1st Marine Special Operations Battalion (MSOB) at Camp Pendleton, and one UMO available with 2nd MSOB at Camp Lejeune. Consequently, every effort should be made to perform the NSW/SO physical in a timely manner, to ensure that it is reviewed and countersigned prior to the Marine’s departure for RSAS. If the 1st MSOB UMO and other proximal UMOs are unable to complete the physical due to scheduling constraints, then the BUMED Director for Undersea and Special Operations can review and sign physical examinations for accession.
Prerequisites:
A CBC, fasting lipid panel, urinalysis with microscopy, chest x-ray and 12-lead ECG are required for the exam. The applicant’s medical record must also be screened for blood type, G6PD and sickle cell screen, current HIV test, PPD and PHA. Ensure that all appropriate lab chits are included with the exam. Additionally, the applicant must have a current audiogram, eye exam and be dental class I or II. The eye exam must include at a minimum corrected and uncorrected visual acuity, field of vision and color vision testing. If the applicant’s uncorrected visual acuity is less than 20/20 in each eye, then he will also require autorefraction, which can be performed at any optometry clinic. See the attached NSW/SO examination checklist for a list of labs, consultations and studies required for the medical examination.

Step-by-step instructions for documenting the medical history on DD Form 2807-1:
Block 1 – Last name, first name, middle initial
Block 2 – Full social security number, e.g. – 123-45-6789
Block 3 – Date the history was reported by the applicant YYYYMMDD
Block 4 – Home address
Block 5 – The complete mailing address for the place where the examination was performed
Block 6.a, 6.b – Mark as appropriate
Block 6.c – Check “Other,” then write in “NSW/SO DUTY”
Block 7 – Grade, e.g. – “CPL,” or “E-4”
Block 8 – List all medications, including OTC meds and dietary supplements
Block 9 – List all allergies, and any drug reactions, if known
Blocks 10 through 28 – Have the patient check yes for any condition that he currently has or has had previously at any time in his life.
Block 29 – Have the patient explain all yes answers here. Have them annotate their response with the Block number, e.g. – “11.f – I wear contact lenses…14.c – I am currently in good health.”
Block 30 – Write your comments here. Use the applicant’s medical record to furnish supporting data such as dates, hospital locations, or whether he has been released without limitations by a particular specialist. Use MANMED P-117 article 15-105 paragraph 6 to determine if a yes answer is considered disqualifying (CD), or not considered disqualifying (NCD).
Examples:
- “12.n – The patient reports sustaining a right closed wrist fracture while skateboarding in 1998. Treated with short cast. Resolved, no sequelae. –NCD”
- “10.d, 10.f – The patient reports history of asthma and occasionally requires an albuterol inhaler. NHCP Pulmonary medicine categorized him as having moderate, persistent asthma. – CD”
- Sign and date in the blocks on the bottom of page 3.
Step-by-step instructions for documenting the examination on DD Form 2808:
Please pay particular attention to the special instructions for blocks 44, 45, 73, 74, 77 and 83.

Block 1 – Date of examination, YYYYMMDD; the date that it is signed by you

Block 2 – Social Security Number. Full 9-digit number, e.g. 123-45-6789

Block 3 – Last name, first name, middle initial

Block 4 – Home address

Block 5 – Home telephone number

Block 6 – Grade, e.g. “CPL” or “E-4”

Block 7 – Date of birth, YYYYMMDD

Block 8 – Age

Block 9 – Sex

Block 10 – Racial category. Indicate ethnic category, if applicable.

Block 11 – Total years of military service

Block 12 – Agency. Leave blank or write in “N/A.”

Block 13 – Organization and UIC code. Indicate the applicant’s organization and UIC.

Block 14.a, 14.b, 14.c – Leave blank

Block 15.a, 15.b – Mark as appropriate

Block 15.c – Check “Other,” then write in “NSW/SO DUTY”

Block 16 – The complete mailing address for the place where the exam was performed

Blocks 17 through 42 – Mark as appropriate. Leave no item unchecked. Block 41 is the only block where it is acceptable to check “NE.”

Block 22 – Have the patient perform the Valsalva maneuver while you inspect his ears. It is more important that he can equalize pressure in his inner ear than if you can actually visualize his TMs moving.

Block 35 (continued) – Circle all blocks that apply. Even if his arches are normal, indicate whether they are asymptomatic.

Block 37 – A circumcision is a scar. If the patient is circumcised, check “Abnormal.” If he has any tattoos, it is sufficient to describe the size and location of the tattoos, in the event that the subject or content of the tattoos do not reflect Navy or Marine Corps core values

Block 39 – Document the patient’s neurological examination, even if it is normal. The neurologic examination should include the following:

- Mental status (A&O x __)
- Short-term recall
- Serial sevens
- Cranial nerves
- Strength in all extremities
- Sensation to light touch in all extremities
- Cerebellar exam – rapid alternating movement, fine-finger movement, finger-to nose, heel-to shin
- Evaluating for Romberg’s sign
- Gait
- Deep tendon reflexes diagrammed with a reflex man

Block 42 – A thyroid exam is an acceptable endocrine exam

Block 43 – To be filled out by a dentist or dental technician, or transcribed by the medical officer

Block 44 – Document specific findings from blocks 22, 37, and 39 here

Block 45 – Include the date and specific gravity from the urinalysis in block 45. Albumin is the only protein detected by the clinical dipstick used for urinalysis. Record urine protein test result in block 45.a. Record urine glucose test result in 45.b.

Block 46 – Leave blank
Block 47 – You can leave this blank since CBC results should be documented in block 73, anyway.
Block 48 – Enter blood type
Block 49 – Enter date and result of most recent HIV test
Block 50 – Leave blank
Block 51 – Leave blank
Block 52 – Leave blank
Block 53 – Height without shoes in inches
Block 54 – Weight in pounds
Block 55 – Leave blank
Block 56 – Temperature in degrees Fahrenheit
Block 57 – Resting pulse
Block 58 – Resting blood pressure. Note that hypertension is potentially disqualifying and must be commented on.
Block 59 – Leave blank
Block 60 – Leave blank
Block 61 – Transcribe the results of visual acuity testing.
Block 62 – Transcribe refraction results if patient does not have uncorrected 20/20 vision, or better.
Block 63 – Required for Navy EOD candidates, only
Block 64 – Leave blank
Block 65 – Leave blank
Block 66 – Transcribe PIP or FALANT test results. Indicate “PASS,” or “FAIL.”
Block 67 – Required for Navy EOD candidates, only
Block 68 – Indicate a field in degrees, or write “Full OU”
Block 69 – Marked as “NIBH”
Block 70 – Recorded only if the candidate is over age 40
Block 71 – Transcribed from the current audiogram. Ensure that the unit serial number and calibration date are documented
Block 72 – Leave blank
Block 73 – Place all additional data here, including CBC, hepatitis C screen, lipid panel, FBG, G6PD, Sickle cell screen, chest x-ray interpretation and ECG interpretation. Do not write “see attached lab chits,” and leave otherwise blank.
Block 74 – Check whether the applicant is qualified for service, write “PQ / NPQ NSW/SO DUTY,” and circle either “PQ,” or “NPQ” depending on your determination. Again, use standards described in MANMED P-117 article 15-105 paragraph 6 to determine if a condition is CD or NCD.
Block 75 – If the applicant has a disqualifying condition, have him sign and date here. Otherwise, leave this blank.
Block 76 – If a disqualifying condition is discovered, list it here.
Block 77 – List all abnormal findings from blocks 17 through 73 here, no matter how trivial they seem. Then indicate if you think the abnormality is either considered disqualifying (“CD”) or not considered disqualifying (“NCD”). For example, if the applicant is circumcised, then write “37 – MST (short for ‘Marks, scars and tattoos’) – NCD.”
Block 78 – Leave blank
Block 79 – Leave blank
Block 80 – Leave blank
Block 81 – Sign here
Block 82 – Or sign here
Block 83 – Have the dentist sign here, or sign for the dentist by direction
Block 84 – Have the UMO countersign here after reviewing the physical
**Block 85** – Leave blank

**Block 86** – Waiver information, if a waiver is required. Waivers are submitted by the parent command, not the UMO or MARSOC.

**Block 87** – Leave blank