

DEPARTMENT OF THE NAVY
COMMANDER NAVAL RESERVE FORCE
NEW ORLEANS, LOUISIANA 70146-5000
and
COMMANDING GENERAL, MARINE RESERVE FORCE
NEW ORLEANS, LOUISIANA 70146-5400

ORIGINAL

COMNAVRESFORINST 1540.10B
FORCE ORDER 1540.4
006/4MED

01 JUN 1994

COMNAVRESFOR INSTRUCTION 1540.10B
FORCE ORDER 1540.4

Subj: NAVAL RESERVE SUPPORT FOR THE SELECTED MARINE CORPS
RESERVE

Ref: (a) COMNAVRESFOR P7300.1E
(b) COMNAVRESFORINST 1570.10
(c) NAVPERS 18068F
(d) BUPERSINST 1616.9A
(e) BUPERSINST 1616.17
(f) COMNAVSURFRESFORINST 3502.2A
(g) COMNAVAIRESFORINST 1500.5C
(h) NAVMEDCOMINST 1500.8
(i) BUPERSINST 1001.39A
(j) COMNAVRESFORINST 1001.5A
(k) COMNAVRESFORINST 1571.7G
(l) NAVEDTRA 10238 (Career Counselor's Manual)
(m) FMFM 4-50
(n) FMFM 3-1
(o) MCO P1610.7C
(p) NTP R-00-8801A
(q) SECNAVINST 6320.23
(r) BUMEDINST 6320.23
(s) COMNAVRESFORINST 1570.9C
(t) OPNAVINST 6110.1D
(u) COMNAVRESFORINST 3060.5

Encl: (1) 4th MarDiv
(2) 4th MAW
(3) 4th FSSG
(4) Logistic Support
(5) MCLO
(6) Procedures to Attain the NEC HM8404/DT8707
(7) National and Regional Billets and Relationships
(8) Fitness Reports/Enlisted Evaluations
(9) AT/Exercise Administrative Responsibilities
(10) SMCR Drill/AT/MORDT/Mobilization Support
(11) SMCR/NAVRES Support Table
(12) Marine Expeditionary Force, Religious (MEFREL)
(13) Reserve Support Unit, Chaplain (East Coast/West Coast)
(14) NAVRES Supporting Activity Checklist

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1. Purpose. To provide policy and outline responsibilities for:

a. The management of Selected Naval Reserve (NAVRES) units to support the Selected Marine Corps Reserve (SMCR) and to meet mobilization requirements of the Fleet Marine Force (FMF).

b. The management of SMCR units, composed of Selected Naval and Marine Corps Reservists.

c. Naval Reserve Activities (NRA) responsible for the administration of NAVRES personnel in support of the United States Marine Corps Reserve (USMCR) to ensure those personnel are properly assigned, managed and trained toward mobilization readiness.

2. Cancellation. COMNAVRESFORINST 1540.10A, Divo 1540.10A, wgo 1540.10A.

3. Information

a. NAVRES Program Nine supports all Marine Reserve Force (MARRESFOR) units/individuals required to meet the Marine Corps Table of Organization (T/O) requirements for the SMCR.

(1) Marine Corps support is one of the highest priorities of the NAVRES program.

(2) Program Nine includes medical and dental, naval gunfire liaison, chaplains and Religious Program (RP) Specialists.

(3) The NAVRES has a responsibility to ensure adequate field support for the SMCR.

b. Organization of Program Nine medical and dental units supporting MARRESFOR are specified in enclosures (1) through (3).

c. The responsibility for individual equipment and organizational clothing is specified in reference (a) and enclosure (4).

d. The functions of Marine Corps Liaison Officer (MCLO) are outlined in enclosure (5).

e. Informational guidance concerning Navy Enlisted Classification (NEC) Hospital Corpsman (HM) 8404/Dental Technician (DT) 8707 certification for Program Nine personnel is contained in enclosure (6) and references (b) and (c).

f. The structure and interaction of special (national or regional) billets for MARRESFOR and its major subordinate commands are delineated in enclosure (7).

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g. The policies for preparation and submission of officer fitness reports and enlisted performance evaluations are in enclosure (8), and references (d) and (e).

h. Administrative responsibilities for Annual Training (AT) and exercises are contained in enclosure (9).

i. Administrative and support responsibilities of Program Nine units/individuals assigned to the SMCR are established by references (f) and (g) and in enclosures (10) and (11).

j. Guidance for in-service training of HM and DTs is provided in reference (h).

k. Administrative direction for personnel management and support of NAVRES is provided in references (i) and (j). Specific attention is drawn to the following policies:

(1) Priority 1A manning is currently directed for Program Nine units.

(2) Billet relocation and cross-assignment between Program Nine units are currently authorized techniques to ensure maximum manning of Program 9 billets.

(3) In Assignment Processing (IAP) personnel must be assigned to Program Nine billets where available locally; secondly, they should be assigned within the Readiness Command (REDCOM) or nationally. Efforts will be made to assign IAP personnel to the same Activity Unit Identification Code (gaining command) as the unit with which they will drill. The gaining command can provide assistance in identifying billets available for assignments.

(4) Maximum effort and administrative flexibility will be used in assigning volunteers who desire Program Nine assignments.

(5) Women are authorized for assignment to MARRESFOR billets per Reserve Functional and Sex (RFAS) codes contained in the Reserve Unit Assignment Document (RUAD).

(6) Administrative billets may be assigned to Program Nine units to facilitate unit administration but are not to be considered a part of the T/O of the Program Nine unit.

(7) Twelve additional paid drills for enlisted personnel are authorized for professional update/clinical training. However, only enlisted personnel are authorized additional pay drills for professional clinical training.

(8) Compliance with 4th Marine Division (4th MarDiv)/4th Marine Aircraft Wing (4th MAW)/4th Force Service Support Group SMCR drill schedules is required. The only exceptions will be

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for chaplains on Sundays for mutually agreed upon Individual Training Plans (ITP), or for those excused by the SMCR unit supported.

(9) A "five-drill weekend" may be required to match drills with the SMCR unit supported. Program Nine personnel should not drill in nonpay status on the Friday of a five-drill weekend. These are regularly scheduled drills and proper drill scheduling, with NRA administrative oversight, will ensure proper pay for Program Nine personnel.

(10) NAVRES personnel will not travel on United States Marine Corps (USMC) memorandum orders since AT/Active Duty Training (ADT) pay and travel claims cannot be processed from USMC memorandum orders. NAVRES personnel shall submit AT/ADT/Inactive Duty Travel Training (IDTT) applications through Navy Reserve Financial Management System (RESFMS) system for training periods with USMCR units to which they are providing direct support. It is understood that short notice evolutions occur (i.e., MORDT), and in such cases Navy memorandum orders may be used. Application and memorandum order procedures are contained in reference (k). They may receive travel and per diem to attend to other USMCR business while in a nonpay drill status. The USMCR may not pay drill pay or active duty pay.

l. Career counseling guidance and direction for Naval personnel are provided in reference (l).

m. The doctrine, procedures, and techniques concerning employment of medical and dental units in support of FMF operations are provided in reference (m).

n. Command and staff procedures for FMF organizations are contained in reference (n).

o. Instructions, procedures, and responsibilities for Marine Corps fitness reports are contained in reference (o).

p. Marine Expeditionary Force Religious (MEFREL) organization and operations are delineated in enclosure (12).

q. RSU Chaplain (East Coast/West Coast) organization and operations are delineated in enclosure (13).

4. Policy

a. An inherent principle of NAVRES training support to the SMCR is identification and assignment of qualified NAVRES to specific SMCR unit billets to ensure full integration and effectiveness with those units. Collocation of the individuals with their SMCR unit is desired, so that they may consistently drill with that unit. Enclosure (14) lists all SMCR unit locations with their supporting NAVRES unit/activity.

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b. The Commandant of the Marine Corps is the Program Nine resource sponsor for all NAVRES units/individuals dedicated to Marine Corps support. The Commanding General (CG), MARRESFOR, is responsible for the overall manning, training, and readiness of the MARRESFOR. The CG of MARRESFOR and its major subordinate commands coordinate and integrate training to ensure mobilization readiness of NAVRES assigned to Program Nine units supporting their commands.

c. The CG, MARRESFOR will exercise operational control of Program Nine units/individuals with the CGs of its major subordinate commands (4th MarDiv/4th MAW/4th FSSG) through scheduling and conducting technical and military training, assigning AT dates and locations, assigning drill dates, schedules and location, and assigning missions and tasks appropriate to the command. The SMCR will have timely access to training, health, dental, and other records of Program Nine personnel and units as required and appropriate. Liaison will be conducted with the NRA Commanding Officer (CO) to establish procedures as needed to overcome difficulties created by dissimilar United States Naval Reserve (USNR) and USMCR drill schedules.

d. Commander, Naval Reserve Force (COMNAVRESFOR) is responsible for the administration and support of NAVRES personnel. In this regard, the Force Medical Officer (COMNAVRESFOR (Code 006)) is the single point of contact for implementing support and administration of Program Nine units, and shall ensure assignment of USMCR support responsibility to the most appropriate NRA, whether surface or air.

e. The Medical Program Managers on the Commander, Naval Surface Reserve Force (COMNAVSURFRESFOR) and Commander, Naval Air Reserve Force (COMNAVAIRESFOR) staffs are responsible for the day-to-day management of NAVRES units within their claimancy that serve in support of the SMCR.

f. COMNAVRESFOR retains administrative responsibility for Program Nine, ensuring unit reporting, personnel maintenance, support, and professional growth requirements are observed and sustained. In no case will administrative requirements take precedence over SMCR support missions or training. Program Nine units will not be assigned to readiness units at NRAs because of their inherent operational control issues. Conflicts which cannot be resolved at the local level will be referred to COMNAVRESFOR and/or MARRESFOR, as appropriate, for resolution.

g. All medical department personnel require continuously updated training in combat casualty care, triage, cardiopulmonary resuscitation, environmental aspects of medicine, survival



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medicine, and chemical, biological and radiological defense. For medical officers, Advanced Cardiac Life Support and Advanced Trauma Life Support training should be emphasized. Mobilization training requirements are per references (f), (g) and (p). Such training is not normally available within SMCR organizational structures and constitutes an individual mobilization vice a unit training requirement. COMNAVRESFOR will serve as technical advisor and provide assistance to ensure required training is accomplished.

h. Credentialing requirements for health care providers must be complied with as specified in references (q) and (r). At present, this is a COMNAVRESFOR responsibility. Timely coordination by the SMCR unit and the supporting NRA is crucial.

i. Program Nine Chaplain and RP Specialist billets are managed nationally by COMNAVRESFOR and MARRESFOR at the headquarters in New Orleans. To support a comprehensive Command Religious Program (CRP) for MARRESFOR, all personnel assignments to billets, orders for mutual support, mobilization readiness training, and career planning will be implemented by the COMNAVSURFRESFOR Chaplain Program Manager (Code 367), with concurrence of MARRESFOR (Code REL).

(1) To the maximum extent possible, personnel will be assigned to NAVRES units collocated with the SMCR unit of their billet. On the chaplain's unit assignment orders, a statement of "Additional Duty to (CO of SMCR unit)" shall be made. The CO of the SMCR unit will be the regular reporting senior and shall submit regular fitness reports per reference (e).

(2) MEFREL chaplains and RPs will perform 36 drills with their MEFREL unit, 6 Inactive Duty Travel Training (IDTT) days (12 drills) at their Mobilization (MOB) activity (coordinated by RSU chaplains), and AT with their specific mobilization gaining command or similar training.

j. Assignment of officers to Program Nine Naval Gunfire Liaison Officer (NGLO) billets will be made subject to the concurrence of CG, 4th MarDiv (A/CS, G-3). To the maximum extent possible, personnel will be assigned to a NAVRES unit collocated with the SMCR unit of their billet. On NGLO unit assignment orders, a statement of "Additional Duty to (CO of the SMCR unit)" shall be made.

k. Some, but not all, SMCR units are organically staffed when authorized by Marine Corps T/O to accomplish intra-unit medical functions (e.g., physical examinations). It is recognized that distribution and manning of Program Nine medical



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personnel may sometimes be inadequate to meet routine and emergent local requirements. In such cases, an advance request for special support should be made in the format of figure 1 of enclosure (9). The supporting NRA will provide requested additional support to the maximum extent feasible and consistent with other program capabilities. When this is not possible, the NRA and the SMCR will coordinate with higher echelons to resolve the shortfall, as appropriate.

l. Program Nine personnel and Marine Corps Support Teams shall be scheduled to drill on the same cycle as the SMCR unit to which assigned, and must drill with that SMCR unit to the maximum extent consistent with accomplishment of mobilization training requirements. To ensure maximum effectiveness, the local SMCR commander will submit an Inactive Duty Training (IDT)/AT plan to the local NRA. This IDT/AT schedule will correspond with the SMCR cycle and will authorize regular drills for NAVRES personnel and preclude the need for rescheduled drills for five-drill weekends. The SMCR unit commander is responsible for scheduling AT. Further details are enumerated in enclosure (10).

m. Enlisted personnel assigned to Program Nine units are authorized 12 additional pay drills annually per references (i) and (j). These drills are intended to be used for professional update/clinical training rather than for Marine Corps support. Additional drills cannot be substituted for regular drills, nor will they be used to provide for extra drills on five-drill weekends.

n. The CG, MARRESFOR, has promulgated and promoted the "REFLEX Drill" rule for physicians assigned to Program Nine as authorized in reference (s).

o. Responsibility for certifying the Navy Physical Readiness Test (PRT) results on Program Nine personnel per existing Navy regulations is now delegated to the respective Inspector-Instructor (I-I), as appropriate. USNR and USMCR PRTs will be run at the same time, with either PRT standard being acceptable, at the USNR individual's option. When PRT is accomplished concurrent with a Mobilization Operational Readiness Deployment Tests (MORDT) it will satisfy the next Navy PRT cycle. In order to maintain compliance with reference (t) regarding advance notification of PRT's when required to be conducted as a result of a MORDT, SELRES members affiliated with Program Nine will complete the OPNAV 6110/2 at the beginning of each quarter during the fiscal year. Individuals who are not current for USNR or USMCR PRT will take the next scheduled PRT for either service. Members may not, during the same test cycle, take the Navy PRT after having failed the Marine Corps Physical Fitness Test (PFT). Failure of the Marine Corps PFT will be counted for official, administrative actions including administrative separation per reference (t).



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p. All CO/Officer in Charge (OIC)/Petty Officer in Charge (POICs) assigned to Program Nine units will be assigned subject to the approval of the appropriate SMCR unit commander.

5. Action

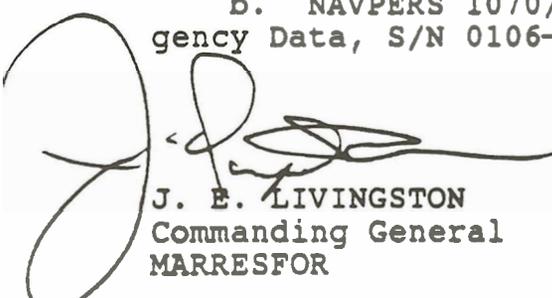
a. All CO/OIC/I-I will comply with the provisions of this instruction/order and references (a) through (u).

b. All supporting NRAs and unit commanders will comply with the provisions of this instruction/order and all references for training, administration, and drill accounting of NAVRES personnel.

6. Forms. The following forms are available in the Navy Supply System. Submit requisitions through normal channels using NAVSUP P2002.

a. NAVRES 1220/1, Inactive Navy Enlisted Classification (NEC) Code Change Recommendation, S/N 0117-LF-012-2008.

b. NAVPERS 1070/602, Dependency Application/Record of Emergency Data, S/N 0106-LF-018-6022.



J. E. LIVINGSTON
Commanding General
MARRESFOR

T. F. Hall
T. F. HALL
Commander
COMNAVRESFOR

Distribution: (COMNAVRESFORINST 5216.1J)
List A (A3 (N095 only), A5 only)
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Commandant of the Marine Corps

Copy to:
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CG, FMFLANT/CG, FMFPAC
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4TH MARDIV

1. Organizational Doctrine for Medical Support. Reference (j) provides detailed discussion of the personnel organization and concept of medical support for units at all levels within the 4th MarDiv.

2. Surgeons

a. At each organizational level within 4th MarDiv, the surgeon functions as a special staff officer to the SMCR commander and will normally drill at the same time and site as the SMCR unit. They will advise the commander regarding manning, state of training, and capabilities of assigned medical personnel to perform their mission. Division, regimental, and battalion surgeons will be required to conduct visits to subordinate unit training sites.

b. The surgeon is under the administrative cognizance of the NAVRES unit to which assigned.

c. The surgeon has overall responsibility for all medical personnel in the unit to which he/she is assigned to ensure mobilization and combat readiness.

(1) The surgeon will coordinate with the CO/OIC/I-I of collocated SMCR units to ensure that Program Nine personnel receive training in Marine Corps essential subjects per reference (m).

(2) The surgeon will provide guidance to the SMCR commander concerning the training of medical personnel.

(3) The surgeon is responsible for the preparation of officer fitness reports/enlisted performance evaluations on all assigned personnel.

d. The surgeon may be required to attend the Planning Board for Training (PBFT) meetings. Additionally, liaison with the supporting NRA will be a routine function. Communication and coordination between collocated Program Nine, Thirty-Two and Forty-Six units are directed.

3. Chaplains. The chaplain is a special staff officer to the SMCR commander and will normally drill at the same time and site as the respective SMCR unit. The chaplain is responsible to that SMCR commander for the conduct of the CRP within the unit per policy and appropriate directives.

4. NGLO. The NGLO is a special staff officer to the SMCR commander and will normally drill at the same time and site as the

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respective SMCR unit. The NGLO will advise the commander regarding naval gunfire support matters and provide naval gunfire liaison, including operational field support as appropriate and directed.



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4TH MAW

1. Fourth Marine Aircraft Wing Medical (MAWMED) Organization

a. Organization. MAWMED units are functional, task-organized medical units under the operational control of CG, 4TH MAW. They provide combat-ready medical and religious personnel to units of the 4th MAW for training and mobilization. Assignment of medical personnel to specific 4th MAW units is per applicable T/O.

(1) Naval Selected Reserve officers and enlisted personnel fill all billets in MAWMED units.

(2) Fourth MAWMED units are task-organized per the specific needs of the supported 4th MAW unit.

(3) The MAWMED unit CO is nominated by the local Naval Air Reserve Commander, with the final approval of the supported 4th MAW unit commander.

b. Mission. MAWMED units supervise and coordinate the training of medical personnel to attain and maintain a high level of combat readiness. MAWMED units ensure qualified personnel are available to fill T/O requirements of the supported SMCR units for purposes of training and mobilization.

c. Tasks

(1) Ensure the qualification of assigned medical personnel.

(2) Provide qualified medical personnel to the supported unit per applicable T/O for monthly drill periods, AT, and Mobilization Operational Readiness Deployment Tests (MORDT).

(3) Provide qualified medical personnel to support additional training deployments. The 4th MAW unit CO is responsible for coordinating this support.

(4) Provide qualified medical personnel upon mobilization to 4th MAW supported units per unit T/O. The MAWMED unit CO must be kept continuously abreast of the mobilization posture of the 4th MAW units the CO supports. Particular attention must be focused on immediate availability of medical personnel for early-deploying units.

d. Training. Training will be conducted per reference (g).

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2. Surgeon. The 4th MAW surgeon is a special staff officer to the CG, 4th MAW, and advises the CG on the usage of the medical assets of the 4th MAW, their training status and support requirements pertaining to the employment and training of those assets. The surgeon has overall responsibility for all medical personnel in the 4th MAW to ensure mobilization and combat readiness.

3. Chaplains. The chaplain is a special staff officer to the SMCR unit commander and will normally drill at the same time and site as the respective SMCR unit. The chaplain is responsible to that SMCR unit commander for conduct of the CRP per policy and appropriate directives.



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b. COs. The COs of 4MEDBN and 4DENBN are Navy Selected Reserve officers who command commissioned units of the Marine Corps Reserve and are responsible to the CG, 4th FSSG, for the training and operations of their battalions. To effectively command and control their subordinate units, these COs are tasked with:

(1) Coordinating support requirements of their subordinate NAVRES unit(s) for IDT and AT.

(2) Coordinating with the Group Surgeon and Health Service Support Unit in determining support requirements for Marine Air-Ground Task Force (MAGTF) exercises.

(3) Determining the task organization to support MAGTF operational requirements.

(4) Conducting liaison and resolving conflicts with supporting NRAs to which subordinate units are assigned on matters pertaining to administration, training and SMCR support.

(5) Preparation of officer fitness reports/enlisted performance evaluations of all personnel per enclosure (8).

3. MEDLOGCO, 4th Supply Battalion

a. Function and Organization. The MEDLOGCO function and organization are per reference (m).

b. Responsibilities. The Company Commander of the MEDLOGCO commands a company of the 4th Supply Battalion. The duties of the MEDLOGCO Company Commander are per reference (m) and includes a close liaison with the Group Surgeon and HSS Officer.

4. HSSU

a. The mission of the HSSU is to coordinate requirements for medical/dental support and class VIII (medical/dental) supply ~~support to MAGTFs and units external to the FSSG, as detailed in~~ reference (m).

b. HSS Officer. The HSS officer reviews medical support requirements of operational plans and supporting logistics and Combat Service Support (CSS) annexes. With the group surgeon, MEDBN/DENBN commanders, and company commander of MEDLOG CO, the HSS officer evaluates needs and develops 4th FSSG medical/dental support responses which will satisfy support requirements beyond the organic capability of Ground Combat Element and Aviation Combat Element of the MAGTF. Specific tasks of the HSS officer include:



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(1) Acting as staff planner to determine medical/dental personnel and equipment required to support specific operational plans.

(2) Serving as OIC of medical support section, Combat Service Support Operations Center in Marine Expeditionary Force (MEF) or FSSG exercises/operations.

(3) Coordinating all medical/dental inter-service support agreements for the FSSG.

5. Medical Detachments (MEDDET)

a. In units having officer billets, the most qualified medical department officer available locally may be assigned as the Detachment OIC. In units having only enlisted personnel, the senior petty officer shall be the POIC. OIC/POICs will be assigned subject to the approval of command tenure limitations of reference (j).

b. The MEDDET OIC/POIC will maintain (as a minimum) the following items: A current recall bill, training plans, plans of the day, requests for support, CO correspondence, copy of individual training records, and a copy of this instruction/Order.

6. Chaplains. The Chaplain is a special assistant to the SMCR unit commander and will normally drill at the same time and site of the respective SMCR unit. The chaplain is responsible to that SMCR unit commander for the conduct of the Command Religious Program (CRP) within that unit per policy and appropriate directives.



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LOGISTIC SUPPORT

1. IDT

a. SMCR Unit Responsibilities

(1) Individual unit CO/OIC/I-Is will provide required individual and organizational equipment (e.g., 782 gear) to supporting NAVRES personnel.

(2) Individual CO/OIC/I-Is will ensure that medical equipment and authorized medical allowances are available to support training of NAVRES personnel. A litter, nonrigid, poleless (NSN 6530-00-783-7510) and a unit one medical kit for each company/platoon corpsman will be included as appropriate medical equipment and supplies.

(3) Individual CO/OIC/I-Is will ensure that appropriate Table of Equipment items to support Command Religious Program (CRP) personnel are provided.

b. Supporting NRA Responsibilities. Upon assignment to a Program Nine unit or unit designated to provide SMCR medical and religious support, officer and enlisted personnel will be issued organizational clothing (e.g., camouflage utilities, boots) as authorized by reference (a).

2. AT

a. SMCR Unit Responsibilities

(1) CO/OIC/I-Is will provide the required items of organizational equipment to NAVRES personnel assigned for AT support. Particular attention must also be given to equipping NAVRES from non-Program Nine units assigned for AT support who do not normally travel to AT with SMCR units. These needs will be addressed and resolved during pre-AT planning conferences.

(2) Medical/dental equipment will be made available for supporting NAVRES from equipment blocks identified at pre-AT conferences.

(3) CO/OIC/I-Is will include supporting NAVRES in unit AT transportation requests. The earliest possible liaison must be effected with the supporting NRA to ensure that NAVRES travel with Marine Corps Reservists to and from the AT site where possible. CO/OIC/I-Is must factor Navy order processing times into their planning to ensure Navy personnel will receive orders in time to travel with the USMCR unit.

Enclosure (4)



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4TH FSSG

1. Medical Support in the 4th FSSG

a. Organization. The medical organization within the 4th FSSG is provided by six organizational components as listed below. These components are discussed in detail in reference (m).

(1) Health Service Support Unit (HSSU) (Group Headquarters).

(2) Group Aid Station, (Headquarters and Service Battalion).

(3) Fourth Medical Battalion (4MEDBN).

(4) Fourth Dental Battalion (4DENBN).

(5) Medical Logistics Company, (MEDLOGCO), 4th Supply Battalion.

(6) Medical Platoon, Headquarters and Service Company, 6th Engineer Support Battalion.

b. Due to the functional responsibilities of the 4th FSSG and its fragmented structure, each detachment of the organizational components listed above, with an officer assigned, will have an OIC designated for NAVRES and SMCR unit management purposes. OICs will be assigned subject to the approval of the SMCR unit commander. FSSG detachments without officer billets will have a POIC. Senior enlisted members will be designated for this position subject to the approval of the SMCR unit commander. OIC/POIC positions are not subject to the command tenure limitations of reference (j).

c. Functions of the Group Surgeon. The Group Surgeon is a special staff officer to the CG, 4th FSSG. He/she advises the CG on the usage of the medical and dental assets of the 4th FSSG, their training status, and support requirements pertaining to the employment and training of those assets. He/she will maintain liaison with the COs of the MEDBN/DENBNs regarding the status of personnel training and availability, training requirements, scheduling of AT, and will conduct visits to medical and dental unit training sites. He/she advises the CG on matters relating to the health of the command, and supervises the operation of the Group Aid Station.

2. 4MEDBN and 4DENBNs

a. Function and Organization. The function and organization of the 4MEDBN and 4DENBN are detailed in reference (m).

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b. Supporting NRA Responsibilities. Commanders will ensure that appropriate items of clothing authorized by references (i) and (j) all personnel supporting Marine Corps units are provided before their departure for AT.



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MCL0

1. Responsibility. Acts as a special assistant to the commander of the supporting NRA to which assigned, to provide advice, consultation and assistance to the commander, staff, and assigned units and activities for all matters relating to the SMCR. Serves as the MARRESFOR regional representative to ensure MARRESFOR units receive the appropriate levels of support from the supporting NRAs.

2. Selection Process

a. The Marine Corps Reserve Support Command (MCRSC) will assist readiness commanders with the selection process of the MCL0. Interested individuals may contact MCRSC to determine billet availability.

b. To ensure a timely selection, the REDCOM should begin the process of selection 180 days prior to the billet becoming available, by notifying: CG, MCRSC, RD-4, MCRSC, 10950 El Monte, Overland Park, Kansas 66211-1408. Phones: 1-800-255-5082 Commercial: (913) 491-7901

c. The Chief of Staff's name as a point of contact along with the address and telephone numbers of the REDCOM should be provided to the CG of the MCRSC.

d. MCRSC will notify the following publications of a pending billet vacancy for a MCL0: Continental Marine, The Word, CMC News Letter, as well as Navy and Marine Corps prior service recruiters.

e. Applicants should submit an Individual Mobilization Augmentee application directly to the REDCOM along with a military resume and current Marine Corps photograph.

f. Applicants shall have the following uniforms (including sword):

- (1) Service Dress "A"
- (2) Service "C"
- (3) Blue Dress "A"
- (4) Blue Dress "D"
- (5) Evening Dress "B"
- (6) White Dress "A"

g. The REDCOM will select the most qualified applicant per existing procedures.

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h. Once the REDCOM has selected an applicant, those not selected will be notified.

i. The organizational sponsor will assist with the selection process and provide for a timely transition. The sponsor will notify MCRSC of the readiness commander's selection with the submission of an Individual Mobilization Augmentee application.

j. The officer selected will contact the local Marine Corps Prior Service Recruiter who will complete the required documents and forward them to MCRSC. MCRSC will then assign the officer to the REDCOM.

k. The MCLO program manager is located at MCRSC. Orders for AT, conferences, and other evolutions will be coordinated through MCRSC.

3. Duties of the MCLO

a. Ensure compliance with this instruction/order in the assignment, management and training of NAVRES personnel supporting the SMCR. This instruction/order is the primary reference for NAVRES training support to MARRESFOR units and should be immediately available to the MCLO.

b. Conduct MARRESFOR site liaison visits to ensure that mutual NAVRES/Marine Corps Reserve support is effective. Specifically, the MCLO will ensure that:

(1) The supporting NRAs are providing MARRESFOR units with required manning and training support.

(2) There is a mutual and effective training plan to increase training readiness.

c. Assist the supporting NRAs in the recruiting of Selected Reserve medical, dental, chaplain and naval gunfire personnel. Because of the impact of a shortage of support personnel, particularly medical personnel, upon MARRESFOR units, it is imperative that the MCLO take whatever steps available to influence the manning of naval billets within MARRESFOR units.

d. Using the MARRESFOR Training Exercise Employment Plan (TEEP), ensure that medical units are aware of support requirements during the Fiscal Year (FY). The MCLO must work closely with the REDCOM's Medical Program Officer and the responsible COMNAVAIRESFOR Program Manager to ensure proper manning is provided. Additionally, the MCLO should ensure proper reporting instructions are entered on AT requests for those personnel supporting MARRESFOR units.



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e. Assist the REDCOM Staff Medical Officer, Staff Dental Officer, Staff Chaplain, and COMNAVAIRESFOR's Program Manager in providing Marine Corps related training and in other activities. The MCLO should ensure these officers are aware of the availability to provide advice and to assist in arranging possible use of MARRESFOR facilities and/or concurrent training with MARRESFOR units. The MCLO who detects hesitancy on the part of staff officers to solicit assistance, should encourage a productive working relationship which allows MCLO input into Marine support training.



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PROCEDURES TO ATTAIN THE NEC HM8404/DT8707

1. Unit COs will submit recommendations for qualified personnel using NAVRES 1220/1 to Naval Reserve Personnel Center (Code 22E) via the chain of command. Service records of prior service HM/DT new accessions to Program Nine should be screened to determine if NEC requirements were previously fulfilled.
2. Completion of 7 weeks Field Medical Service School is the basic requirement for recommending NEC HM-8404/DT-8707 for enlisted members.
3. The HM-8404/DT-8707 NEC may be obtained by participation in the Navy Enlisted Classification Attainment Program in lieu of the method described in paragraph 2 of this enclosure. References (b) and (c) outline the requirement for the program and COMNAVSURFRESFOR/COMNAVAIRESFOR annually announce the training schedules. This training currently requires five IDTTs or equivalent in exportable training followed by a 17 day AT at Field Medical Service School.
4. In certain exceptional instances, demonstrated and well-documented verification of field medical skills may be substituted for formal school attendance. This exception is specifically intended for medical/dental personnel who possess advanced field medical service skill levels, and long SMCR association which might satisfy the school requirement. Individuals may be considered who are called up and serve with a SMCR unit over 90 days during a period of national crisis, are recommended by the Marine Corps Commander or I-I, and receive field medical-related training. These recommendations must be exceptionally well-documented and will be judged on a case-by-case basis by Commandant of the Marine Corps (Code HS) or designated representative.
5. In general, the United States Marine Corps (USMC) needs personnel with the 8404 NEC to fill their field billets. Personnel with the 0000 NEC are allowed to fill 8404 NEC billets while pursuing the 8404 NEC during their training process. These 0000 NEC personnel should train to obtain the 8404 NEC as a priority and then provide medical/dental support if drill time remains. While the ITP allows a maximum of 3 years to obtain billet qualifications, attainment of the 8404 NEC will be the highest priority training goal for new accessions. Personnel who have not obtained the 8404 NEC within 3 years should be transferred. This action should be taken on a case-by-case basis, considering all extenuating circumstances.

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NATIONAL AND REGIONAL BILLETS AND RELATIONSHIPS

1. National Billets

a. The following are designated as national billets:

MARRESFOR Surgeon (currently ADDU)

<u>4th MarDiv (4)</u>	<u>4th MAW (3)</u>	<u>4th FSSG (5)</u>
Division Surgeon	Wing Surgeon	Group Surgeon
Division NGLO	Wing Chaplain	CO, 4 MEDBN
Division Chaplain	Asst Wing Chaplain	CO, 4 DENBN
		Group HSSO
		Group Chaplain

<u>2D MEB (5)</u>	<u>RSU (2)</u>
2d MEB Surgeon	RSU (East), Camp
2d MEB MSC Officer	Lejeune Chaplain
2d MEB Dental Officer	RSU (West), Camp
2d MEB Chaplain	Pendleton Chaplain
2d MEB NGLO	

b. Requirements. These are designated national billets for the following reasons:

(1) Mission. The respective CG requires the incumbent to visit subordinate units throughout the country, attend conferences/meetings in support of assigned missions, and to supervise mission-related tasks at the appropriate headquarters.

(2) Selection

(a) To ensure that each selectee has the highest level of experience and expertise required for the position, all national billet vacancies will be advertised throughout the NAVRES.

(b) The respective CG will select the billet holder from nominees submitted by COMNAVRESFOR. The normal assignment will be 2 years.

(c) The Reserve support unit chaplains (East and West) will be selected by MARRESFOR (Code REL).

c. Assignment. National billet holders will be administratively assigned to the NRA nearest their residence having a Program Nine unit and will receive funded ADT/IDTT orders to the location where their services are required.

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d. Funding. The ADT/IDTT orders will be issued by the respective readiness commander or air site CO in which the billet is located. IDTT funding will be based on the billet holders approved FY Training Plan per references (f) and (g). The mission associated with these billets will require monthly IDTTs. Billet incumbents shall ensure that a FY Training Plan is submitted per references (f) and (g). Billet holders requiring ADT funding must submit ADT requirements to COMNAVSURFRESFOR (Code 3542) or COMNAVAIRESFOR (Code 553) by 15 July for the next FY with quarterly updates submitted as required. Report Symbol COMNAVSURFRESFOR 1570-23.

e. Interaction for Division/Wing/FSSG/MEB/RSU Billets

(1) The COs, 4th MEDBN/4th DENBN are directly responsible to the CG, 4th FSSG.

(2) All other national billet holders serve as special staff officers to their respective CGs.

(3) RSU chaplains are special staff officers to their respective RSU COs.

2. Regional Billets

a. Although not considered national billets regional billets will be advertised and screened by the respective NRA which holds the billet. Nominees will be submitted by the NRF to the respective regional Marine Corps Commander for selection. The normal assignment is 2 years. The following are designated as regional billets:

4th MARDIV

14th Marines

Regimental Surgeon
Regimental NGLO
Regimental Chaplain
Battalion Surgeons (5)

23d Marines

Regimental Surgeon
Regimental Chaplain
Battalion Surgeons (3)

24th Marines

Regimental Surgeon
Regimental Chaplain
Battalion Surgeons (3)



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25th Marines

Regimental Surgeon
Regimental Chaplain
Battalion Surgeons (3)

Battalion Surgeons (7)

4th Amphibious Assault BN
4th Combat Engineering BN
6th Communications BN
4th Light Armored Infantry BN
4th Reconnaissance BN
4th Tank BN
8th Tank BN

4th FSSG

4th Supply Battalion, 4th FSSG

CO, Medical Logistics Company

4th DENBN, 4th FSSG

CO, Headquarters and Service Company
CO, Dental Companies (3)

4th MEDBN, 4th FSSG

CO, Surgical Support Company (2)
CO, Collecting and Clearing Company (4)
CO, Headquarters and Service Company (1)



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FITNESS REPORTS/ENLISTED EVALUATIONS

1. Regular reporting seniors for all personnel assigned to Program Nine units are delineated as follows:

FITREP/EVALUATION MATRIX

<u>Command</u>	<u>Billet</u>	<u>Reporting Senior</u> (regular/concurrent)
MARRESFOR	MARRESFOR Surgeon	CG MARRESFOR (R)
4th MarDiv	National Billets	CG 4th MarDiv (R)
	Headquarter Staff Billets	CG 4th MarDiv (R)
	Regimental Chaplain Billets	SMCR Commander (R)
	Reg Surgeon Billets	SMCR Commander (R)
	Reg Staff Billets	SMCR Commander (R)
	Reg Unit Personnel	SMCR Commander (R)
	Battalion (BN) Chaplain Billets	SMCR Commander (R)
	BN Surgeon Billets	SMCR Commander (R)
	BN Staff Billets	SMCR Commander (R)
	4th FSSG	National Billets
HQ Staff Billets		CG 4th FSSG (R)
Medical BN CO		CG 4th FSSG (R)
Dental BN CO		CG 4th FSSG (R)
BN HQ Staff		MED/DEN BN CO (R)
Company CDR (MED/DEN)		MED/DEN BN CO (R)
CO, MEDLOGCO		Supply BN CO (R)
MEDLOGCO, HQ Staff		CO, MEDLOGCO (R)
Company personnel		CO, MED/DEN Co (R)
Company personnel		Det OIC/POIC (C)

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	SMCR personnel MED/DEN BN	MED/DEN BN CO (R)
	SMCR personnel MEDLOGCO	CO, MEDLOGCO (R)
	SMCR personnel	CO, MED/DEN Co (R)
	MED/DEN Co	
	All Other Billets all other BN	Respective SMCR Commander (R)
	Group Aid Station Personnel	Group Surgeon (R)
	Group Aid Station Personnel	Det OIC/POIC (C)
4th MAW	National Billets	CG 4th MAW (R)
	Group Chaplain	SMCR Commander (R)
	Squadron Chaplain HQ Staff Billets	SMCR Commander (R) CG 4th MAW (R)
	HQ Staff Billets	4th MAW Wing Surgeon (C)
	MAW Unit CO	SMCR Commander (R)
	MAW Unit personnel	NAVRES MAW Unit CO (R)
	All Religious Support Billets	SMCR Commander (R)
2d Marine Expeditionary Brigade	All	CG 2d MEB (R)
All Program Nine MEFREL Commander (R)	All Billets CO Billets	CO of NRA (C) Reserve Center



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AT/EXERCISE ADMINISTRATIVE RESPONSIBILITIES

1. Medical Support Coordination for Exercises

a. The appropriate level Surgeon has overall coordination responsibility for all medical assets for an exercise. Should organic Program Nine assets be inadequate, additional medical support may be requested from the supporting NRA. The format for requesting Naval Reserve Medical Support is provided in Figure 1.

b. Direct liaison with the supporting Naval Reserve REDCOM MCLO is authorized and encouraged.

c. The appropriate exercise surgeon(s) will be identified in each exercise Letter of Instruction and included in appropriate pre-AT planning meetings.

d. The Senior Medical Representative (SMR)/exercise surgeon will coordinate with the CG of the exercise to present credentials for medical/dental personnel to the CO of the local Medical Treatment Facility (MTF)/Dental Treatment Facility (DTF) for privileges. For field exercises, privileging is the responsibility of the exercise CG.

e. A medical annex will be added to the standard exercise Memorandum Of Understanding to arrange for credentials/privileging with local MTF/DTFs. If there is no local military MTF/DTF, the SMR will coordinate with the local civilian MTF as required.

f. The SMR is responsible for ensuring liaison in advance with the local Personnel Support Detachment (PSD) for each exercise.

g. The local NRA will be notified of upcoming USMCR exercises by COMNAVSURFRESFOR/COMNAVAIRESFOR after MARRESFOR provides the information.

h. As soon as an exercise is scheduled, notification must be made to concerned commands (Division, Group, Wing), to ensure the SMR is designated and assets identified. Major supporting commands will, within 30 days of receiving notice of an impending exercise, provide notification of what assets they have identified to meet the needs of the exercise.

i. Active forces must consider Reserve participation (if desired) from the start of the planning process and ensure Reserve medical support providers are information addressees on all planning messages. Late notification of Reserve support requirements may result in nonsupport due to previously scheduled Reserve exercise commitments. While it is realized that many field training evolutions are needed with minimal planning time allowed, lead time must be taken into consideration to allow for

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complete staffing of all required medical assets. Additionally, NRAs encourage their personnel to perform AT early in the FY. This is always a factor with medical availability toward the end of the year.

j. For any exercise requirements identified with less than 60 days of lead time, MARRESFOR will notify COMNAVRESFOR directly for assistance in identifying support assets. Copies will be sent after the fact to all concerned.

2. 4th MAW Independent Exercise Medical Support Coordination

a. The Aviation Combat Element/Squadron Surgeon has overall coordination responsibility of all medical assets for these exercises. Should organic Program Nine assets be inadequate, additional medical support may be requested from the cognizant Naval Reserve Air Site Program Manager in concert with COMNAVRESFOR (Medical Programs). The Program Manager will provide this additional support to the maximum extent feasible and consistent with other medical program capabilities.

b. The Aviation Combat Element/Squadron Surgeon will be identified and included in all appropriate pre-AT planning meetings.

3. Pay Process

a. To ensure that each individual NAVRES receives a paycheck upon completion of AT, the following documents must be presented to the servicing Personnel Support Activity/PSD by the second day of AT:

(1) Original orders.

(2) Command endorsements (reporting and projected detaching times and dates; statement regarding messing and berthing availability).

(3) Certified copies of page 2 (NAVPERS 1070/602).

(4) Medical endorsement stating the member is physically fit for AT.

b. Advance planning and contact with the Personnel Support Activity/PSD by a designated NAVRES unit representative/exercise coordinator will further enhance the pay process. It is ultimately the responsibility of the SMCR exercise commander to ensure NAVRES supporting the exercise are paid.



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4. Uniforms. Field Uniforms (camouflage utilities, boots) for Naval Reserve personnel assigned in support of the SMCR must be procured per reference (a) through the Navy Supply system by the supporting NRA.

5. Individual Field Equipment (782 gear). SMCR unit COs will ensure that 782 gear is issued to Naval Reservists assigned to their units. This equipment is to be stocked, issued, and maintained in the same manner as for Marine Reservists. Pre-AT conference planning should ensure that all Naval Reserve personnel assigned for exercise support are properly equipped prior to the exercise.

6. Exercise checklist. The exercise action checklist which follows is provided as a planning aid.



EXERCISE ACTION CHECKLIST

SECTION I. INITIAL PLANNING

A. SMCR Responsibilities

1. Determine site, dates, scope, and approximate number of personnel participating in advance, main and rear parties.
2. Designate SMR to have overall coordination of medical/dental support.
3. Notify Major Subordinate Commands (MSCs) to allow concurrent planning for support/participation requirements.
4. Prepare a preliminary Letter Of Instruction (LOI), including desired medical play.
5. Notify COMNAVRESFOR of exercise details.
6. Major subordinate commands will designate medical element OICs to coordinate medical support with the SMR.

B. USNR Responsibilities

1. SMR
 - a. Prepare a preliminary medical annex to the LOI indicating where medical play will be included in exercise and to what level, i.e., Command Post Exercise, simulated casualties, medical regulating.
 - b. Develop training requirements to meet exercise requirements as well as unit/individual requirements.
 - c. Coordinate with medical element OICs of MSCs.
 - d. Identify areas where support requirements may exceed unit capabilities, requiring augmentation from within or outside Program **Nine**.

SECTION II. INITIAL PLANNING CONFERENCE (IPC)

A. SMCR Responsibilities

1. Identify all changes in dates, site, mission, scope, or personnel.
2. Provide LOI to all participants.
3. Identify any special requirements, policies, or procedures.

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B. SMR Responsibilities

1. Confirm transportation requirements, i.e., pickup points and times.
2. Make contact with PSD to determine ability to process orders for USNR personnel attending exercise, and level of pre-planning required.
3. Expand and elaborate on preliminary medical annex.
4. Communicate with MSC(s) regarding output of IPC.
5. Provide equipment density list for exercise.

SECTION III. MAIN PLANNING CONFERENCE (MPC)

A. SMCR Responsibilities

1. Provide smooth LOI, identifying all changes since IPC.
2. Provide transportation plan.
3. Identify interaction of medical play in overall exercise scenario.

B. USNR/SMR Responsibilities

1. Provide lists of attendees by name/rank/designator/NEC.
2. Provide medical training plan, including medical/dental play in exercise.
3. Provide input to communication plan for medical regulating play in exercise, as well as emergency frequencies (UHF/VHF/land line).
4. Ensure appendix Ns are requested, and submitted to and acknowledged by local MTF/DTF commanders as well as to SMR/Officer in Charge of Exercise.
5. ~~Initial~~ liaison with MTF/DTF commanders to arrange for use of facilities by Reserve personnel during exercise. Extent of involvement with MTF/DTF to be determined by SMR/Officer in Charge of Exercise.
6. Ensure submission of orders occurs within lead time requirements for COMNAVRESFOR processing.
7. Ensure all Authorized Medical Allowance Lists/Authorized Dental Allowance Lists, consumables and other equipment are ordered through the proper chain of command as early as possible.



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8. Monitor equipment requests to ensure all necessary equipment will be on site.

9. Arrange for Responsible Officer to receive the equipment and conduct Limited Technical Inspection upon receipt and before returning the gear.

10. Ensure adequate berthing is requested for all personnel.

11. Ensure sanitary facilities are available and adequate for personnel and patient needs.

12. Identify Medical/Dental resupply chain.

13. Identify weapons requirements and custody.

14. Ensure adequate drivers (including ambulance drivers) are available to accomplish mission.

15. Ensure medical play is included in the exercise scenario to an appropriate level for the scope of the exercise and the number of people involved.

16. Ensure that concurrent medical/dental training is planned outside the scenario for personnel attending the exercise.

17. Ensure qualified personnel are tasked to monitor and critique medical play.

18. Ensure regular patient care is used as training for less experienced personnel, i.e., do not let experienced personnel take over in the name of expediency unless patient volume demands it.



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FIGURE 1: FORMAT FOR REQUESTING NAVAL RESERVE MEDICAL SUPPORT

1. The following example is provided as a guide:

From: Commanding Officer/Inspector-Instructor (Marine Corps Reserve Unit)
To: Supporting Naval Reserve Activity
Subj: REQUEST FOR NAVAL SUPPORT

1. Naval Reserve personnel training support for training of this unit is requested as follows:

a. INACTIVE DUTY TRAINING:

DRILL DATE:
LOCATION:
TYPE TRAINING:
NUMBER PHYSICALS:
(if required)
PERSONNEL REQUIRED: (Medical Corps (MC)/Hospital Corpman (HM)-Dental Corps (DC)/Dental Technician (DT)-Chaplain Programs (CHF)/Religious Program Specialist (RP))

MARKSMANSHIP

DRILL DATE: 5-6 Oct 93
LOCATION: MARCORRESCEN
TYPE TRAINING: TRAINING
NUMBER PHYSICALS: 15
(if required)
PERSONNEL REQUIRED: 1 MO/2 HM
1 DC/1 DT

DRILL DATE: 11-12 DEC 93
LOCATION: CAMP PENDLETON
TYPE TRAINING: FIELD
NUMBER PHYSICALS: 0
(if required)
PERSONNEL REQUIRED: 1 MO/2 HM

b. ANNUAL TRAINING:

DRILL DATE: 9-22 Jan 94
LOCATION: CAMP LEJEUNE
TYPE TRAINING: Marine Expeditionary Brigade Exercise
NUMBER PHYSICALS: 0
(if required)
PERSONNEL REQUIRED: 1 MO/3 HM

2. (Unit/Center) is the Naval Reserve Unit/Center which normally provides Naval Reserve support to this unit.

