REQUEST FOR RECORD. DISPOSITION AUTHORITY.
(See Instructions on reverse)

TO: GENERAL SERVICES ADMINISTRATION,
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408

1. FROM (AGENCY OR ESTABLISHMENT)
   Department of the Navy
   Chief of Naval Operations

2. MAJOR SUBDIVISION
   Naval Records and Information Mgmt. Division

3. MINOR SUBDIVISION
   Naval Records and Information Mgmt. Division

4. NAME OF PERSON WITH WHOM TO CONFER
   Warren Showalter
   Bureau of Medicine and Surgery

5. TEL. EXT
   254-4132

6. CERTIFICATE OF AGENCY REPRESENTATIVE.
   I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records; that the records proposed for disposal in this Request of ______ page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified.

   [ ] A Request for immediate disposal.
   [ ] B Request for disposal after a specified period of time or request for permanent retention.

C. DATE
   9 SEP 1982

D. SIGNATURE OF AGENCY REPRESENTATIVE
   [Signature]

E. TITLE
   Naval Records & Information Management Division

8. DESCRIPTION OF ITEM
   (With Inclusive Dates or Retention Periods)

   CHAPTER 6
   MEDICINE AND DENTISTRY RECORDS
   SSIC 6000-6999

   The records described in this chapter relate to the administration and performance of medical and dental functions by the Navy Medical Department. They include records of examination, care and treatment of individuals physical fitness, environmental as well as health care program records, accumulated in connection with carrying out Medical Department functions. These records are located at the Bureau of Medicine and Surgery, atBUMED command activities including medical and dental centers, hospitals, medical and dental clinics, health care research activities, education and training activities at Marine Corps Activities, at other medical and dental facilities and units, at area and staff medical and dental offices, and at Federal Records Centers. Exceptions to disposal standards. Regardless of disposal authorizations in this chapter, records directly relating to matters listed below will not be destroyed until final clearance or settlement of the case:

   115-107

   STANDARD FORM 115
   Revised April, 1975
   Prescribed by General Services Administration
   FROM: C. S. A.

   [Handwritten note]
   All changes made with the concurrence of the Navy.
   [Signature]
   [Date]
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HEALTH CARE (MEDICAL AND DENTAL) RECORDS -- GENERAL

(1) PRIMARY PROGRAM AND RELATED ADJUNCT RECORDS:

(a) Bureau of Medicine and Surgery (MO Medical and Dental Program and Planning Records)

Primary Program Records. (Files and records documenting development and execution of medical plans, policies, programs and procedures in performance of the assigned mission of the Navy Medical Department to provide health care, medical and dental support to the naval establishment including the Marine Corps.)

Permanently. Cut off annually. Transfer to Washington National Records Center (WNRC), 6205 Suitland Rd., Suitland, MD 20064 when 4 years old. Offer to National Archives (NARS) when 20 years old.

Destroy when 2 years old.

Administrative

General correspondence files (temporary use adjunct records documenting routine management administration and internal operations of the Bureau of Medicine and Surgery, including general correspondence files, of other temporary use records relating to internal operations (such as office services, space and maintenance, personnel utilization, internal administrative reports, announcements and similar issuances, etc., excluding primary program records covered in par. 6000(1)(a) 11 above.)

Permanent. Cut off annually. Transfer to nearest Federal Records Center (FRC) when 5 years old. Offer to NARS when 20 years old.

Destroy when 2 years old.

(b)BUMEDCommand Medical and Dental Research Activities

Primary program records (records documenting the organization of the research activity, overall development and accomplishment of significant research plans, programs and essential transactions of continuing, long term historical, scientific, legal or administrative interest.

Permanently. Cut off annually. Transfer to nearest Federal Records Center (FRC) when 5 years old. Offer to NARS when 20 years old.

Destroy when 2 years old.

Administrative

General correspondence files (temporary use adjunct records documenting routine management, administration and internal operations of the research activity, including general correspondence, office services, local administrative issuances, etc.) (See also par. 6010(1).)

(c) Other BUMED command activities
1. Logs created at activities in a **non-combat** zone
   a. Smooth logs
   b. Rough logs

2. Logs created at activities in a **combat zone**
   a. Smooth logs
   b. Rough logs

(g) **Medical Department Personnel Professional Development**
and **Training Records Files** (jackets, files and other supportive
records and files for active duty members of the Medical, Dental,
Nurse, Medical Service and Hospital Corps documenting education,
training, credentialling and other accomplishments).

1. Maintained at BUMED

2. Maintained at BUMED Command Activities

(2) **PATIENT CARE ADMINISTRATION**

(a) **General** (morning reports of the sick, binacle lists,
appointment records, outpatient treatment record release files,
patient evacuation manifests, requests for clinical (medical)
(b) **Nonavailability Statements** (such as DD 1251), Patients' Personal Effects and Valuables, Reports of Treatment and Hospitalization Furnished Pay Patients.

(c) **Medical Holding Company Files** (Reports, messages and related correspondence concerning individual patients assigned to medical holding companies)

(d) **Medical/Dental Treatment of Military Personnel** by Non-Federal Facilities (case files documenting diagnosis, circumstances and use, etc.)

(e) **Medical Care Evaluation-Quality Assurance Program Files** (working files documenting patient care audit, utilization review, staff appointment and credentialing functions incident to JCAH accreditation)

(f) **Inpatient and Outpatient Workload and Morbidity Reports** (source documents (forms, adjunct records and related data, and automated records) used to report and statistically summarize inpatient, outpatient, and medical services workload and morbidity data at medical centers, hospitals, and naval medical treatment facilities.)

1. At Naval Medical Data Services Center, Bethesda, MD

   (1) **Original records**

   (2) **Punched cards**

   (3) **Computer tapes and discs**

2. At medical centers, hospitals and Navy health care treatment facilities.

   (g) **Medical Records** (documenting medical disposition of Navy and

   dental) follow-up information, serious/very seriously ill lists, deaths on wards, similar temporary use forms, journals and logs).
HEALTH CARE ADMINISTRATION RECORDS

(1) GENERAL ADMINISTRATION

(a) Staff Locator Records, Liberty/Leave Lists and Similar
Temporary Use Locally-Devised Administrative Forms and Journals
Destroy when purpose is served, or when 2 years old, whichever is first.

(b) General Correspondence Files, Inspection and Survey Files, Hospital and Health Care Staffing Reports (records documenting the management, administration and internal operations of the medical/dental activity, including general correspondence files, records and copies of reports of administrative and management on-site surveys, military and other surveys and inspections and copies of reports forwarded toBUMED.)
Destroy when 2 years old.

(c) Hospital Accreditation (JCAH) Survey Files, Applications for survey, JCAH reports of survey and related correspondence.
Destroy when 5 years old.

(d) Housekeeping, Linen, Laundry and Food Management Service Files (consisting of internal operating records, files and adjunct data pertaining to the scope and cost of services, manpower requirements, work loads, contractual service documents and related supportive materials for the provision of hospital housekeeping, linen, laundry, and food management functions in Naval Medical Treatment Facilities.)
Destroy when 5 years old.

(e) Administrative Committees/Boards Files and Records (documentation of the actions of appointed boards/committees at medical and dental centers and hospitals (executive, budget, medical records, library, education and training, etc.) together with related records and data)
Destroy when 5 years old.

(f) Medical and Dental Officer-of-the-Day Logs (chronological records of events such as damage, destruction/loss of Medical
(h) Register of Patients (such as DD 739, APP or other media documenting admission of individuals to inpatient care facilities).

1a Numeric Sections

2a Alphabetic Sections. (See also par. 6150(2)(a))

(f) Risk Management Records; Incident reports relating to patients, staff, and others documenting accidents, injuries or other types of incidents, together with follow-up reports, supportive correspondence and statements, including statistical displays and summaries at BUMED and BUMED command activities.
PHYSICAL FITNESS RECORDS

HEALTH AND MEDICAL RECORDS

(1) MILITARY HEALTH CARE TREATMENT RECORDS
(medical and dental treatment record jackets, (file folders such as NAVMED Forms 6150/10 through 19) providing complete individual chronological records of all medical and dental examinations evaluations and treatment afforded active duty Navy and Marine Corps members throughout their service careers. The contents of military health care treatment records, medical and dental are prescribed by the Manual of the Medical Department (MANMED), Chapters 6 and 16.)

(2) INPATIENT (CLINICAL) RECORD FILES (Individual inpatient treatment record jackets containing a multiplicity of standard Federal, DOD, NAVMED and other medical forms reports and records prescribed or authorized for use in documenting health evaluations, care and treatment for any health or medical condition/problem provided eligible persons admitted to and discharged from naval medical treatment facilities providing inpatient care. The records also contain discharge summaries of inpatient care afforded and adjunct forms such as privacy act statements. The contents of inpatient clinical records files are prescribed by current BUMED directives)

Transfer to NPRC (MPR) in accordance with MANMED and current BUMED, NAVMILPERSCOM, and MARCORPS directives. Disposition will be in accordance with that provided for the Military Personnel Service Jacket. See also Chapter governing disposition of medical service jackets.

Transfer to NPRC (MPR) 2 years after the calendar year in which treated. At the time of records transfer, screen the inpatient (clinical) record and separate clinical records for personnel from the records of dependents and other supernumerary patients. Handle each of the following records series as indicated in par. (2)(a) through (2)(d) below. (A records "series" (group) is a block of records having the same disposal authority and the disposal date. Ship as one
(NOTE: Fetal monitoring strips (machine printouts) are a component part of the inpatient record. The fetal monitoring strip shall be transferred to the records center concurrent with the corresponding inpatient record. The monitoring strip may be included in the same box as the corresponding inpatient record or in a separate box. If boxed separately, a separate alphabetic locator must be included with the fetal monitoring strips.)

(b) Inpatient (Clinical) Record Files - Dependents and Others

Ship as one record series (group). (Include dependents of military/uniformed service personnel, Federal Government employees, civilian humanitarian and other nonmilitary.) Do not include records for American Red Cross, foreign personnel (military and other) and their dependents covered in pars. 6150(2)(c) and 6150(2)(d), below. Destroy when 25 years old.

(Note: Fetal monitoring strips (machine printouts) are a component part of the inpatient record. The fetal monitoring strip shall be transferred to the records center concurrent with the corresponding inpatient record. The monitoring strip may be
included in the same box as the corresponding inpatient record or in a separate box. If boxed separately, a separate alphabetic locator must be included with the fetal monitoring strips.)

(c) Inpatient (Clinical) Record Files - American Red Cross Personnel

(d) Inpatient (Clinical) Record Files - Foreign Personnel (Military and Other) and Their Dependents.

(3) OUTPATIENT TREATMENT RECORD FILES (Individual outpatient treatment record jackets containing original records and copies of records of health examinations, care and treatment provided for eligible persons on an outpatient basis. The jackets contain standard Federal and other medical forms, reports and records prescribed or authorized for use by BUMED in documenting the provision of outpatient care by naval medical treatment facilities.

Transfer to Medical Director, American Red Cross, Washington, DC, 20226, 2 years after the date of last admission.

Give custody of inpatient records and x-rays to foreign personnel (military member/spouse) at the time of the patient's return to the parent country. Deliver records and x-rays in a sealed envelope to the member/spouse or, as applicable, to the senior member of the military group. Alternatively, if not given to the individual, transfer to BUMED 2 months after the patient's discharge. Annotate the patient's nationality on the inpatient record jacket and group the records by country for eventual transfer to the cognizant foreign government.

Transfer to NPRC (MPR), 2 years after the calendar year in which last treated. At the time of records transfer, screen the outpatient treatment record file and separate the outpatient treatment records for records for retired military personnel from the records of dependents and other supernumerary
(a) **Retired Military Outpatient Treatment Record Files**

Transfer as one records series (group). Include outpatient treatment records for retired military personnel listed in par. 6150(2)(a). Do not include Health Care Treatment Records for active duty Navy and Marine Corps members. Destroy when 50 years old.

(b) **Outpatient Treatment Record Files—Dependents and Others**

Transfer as one records series (group). Include dependents and other patients as described in par. 6150(2)(b). Destroy when 25 years old.

(c) **Outpatient Treatment Record Files—American Red Cross Personnel**

Apply par. 6150(2)(c), above.

(d) **Outpatient Treatment Record Files—Foreign Personnel (Military and Other) and Their Dependents**

Apply par. 6150(2)(d), above.

(4) CIVILIAN EMPLOYEE OUTPATIENT TREATMENT RECORD FILES

(a) **Individual, Industrial/Occupational Health Care Treatment Records Jackets** (containing original, or copies of various forms), reports and records documenting health evaluations, examinations, care and treatment provided on an outpatient status for Federal Government employees, including chronological records of medical care, reports of laboratory and x-ray findings, consultations, records of occupational exposure to environmental stress: noise, radiation, hazardous, or potentially hazardous, substances such as asbestos, pesticides, suspected carcinogens, etc.; also hearing records, vision records, immunizations, reports of medical history, physical condition and similar records reflecting treatment furnished, and absences from work caused by illness and injury; together with supportive records and ad-

**Withdrawn**

Transfer jackets of individuals separated from naval service employment for over 30 days to NPRC (CPR), shipped as a separated records series (group). If separation date is unknown, transfer jacket 2 years after the calendar year in which last treated. Destroy when 25 years.

Disposition to be determined.
(b) Employee Health Qualification, Disability and Separation Records (original records documenting placement (health qualification records dated prior to June 1970, and SF 78 Parts D, E, and F after this date), physical examinations conducted incident to disability retirement, separation for disability related correspondence and documentation of medical history)

(5) INDIVIDUAL DENTAL HEALTH CARE TREATMENT RECORDS (dental jackets containing dental examination and treatment forms, consultation and laboratory reports, dental health questionnaires, periodontal screening examinations, and related records and data)

(a) Dental Health Care Treatment Record Files for Retired Military Personnel.

(b) Dependents Dental Health Care Treatment Records (documents reflecting dental treatment provided to dependents of military personnel and other non-military individuals, except for civilian DOD employees)

(c) DOD Civilian Employees Dental Health Care Treatment Records (documents reflecting dental treatment provided to civilian employees of the Department of Defense (DOD)).

(6) NON-RECORD COPIES OF HEALTH AND MEDICAL RECORD FILES (all non-record copies of forms, reports, records, and other data for which a record copy is either filed or transcribed into any of the treatment records listed in paras. 6150(1) thru 6150(5) above).

**SSIC 6200-6229**

**PREVENTIVE MEDICINE RECORDS**

**SSIC 6200**
(1) COMMUNICABLE DISEASE CASE FILES (copies of records documenting control/prevention of communicable diseases; maintained for reporting to cognizant military, federal, state/local health authorities)

(a) Formal Reports

(b) Working Files

(2) OCCUPATIONAL HEALTH, INDUSTRIAL AND ENVIRONMENTAL CONTROL RECORDS (see also par. 5100)

(a) Program Records (industrial hygiene program records accumulated by NATNAVMEDCEN Bethesda, naval regional medical centers, navy environmental and preventive medicine units and NAVENVIRHLTHCEN Norfolk documenting occupational industrial, toxicological and environmental stresses affecting health, and preventive medicine services provided by the activity. Included are consultation reports, environmental monitoring records, surveys, measurements and exposure analyses, control logs (chronological histories) of unusual incidents and hazardous conditions, evaluations and recommendations concerning work practices, personal protective equipment, etc. together with related supportive records, except records covered in par. 6200(2)(b), below.)

(b) Medical Surveillance Records (original records documenting medical surveillance of individuals exposed to occupational, industrial and environmental health hazards (noise, radiation, asbestos and other contaminants), including medical histories, initial (baseline) medical examinations, and subsequent examinations, care treatment provided.)

(c) Work Project (Case) Files (consisting of copies of directives, standards, guides and procedures used, extra copies of reports of compliance, status reports, statistical summaries etc. submitted to higher authority, notes, worksheets, interim calculations, equipment calibrations, and similar non-record materials.)

Destroy when 5 years old.

Destroy when data is summarized in formal reports.

Destroy when 5 years old, or earlier if individual case files and records are superseded or technically obsolete.

Cut off annually. Retain 5 years then transfer to the nearest FRC. Destroy when 75 years old.

File in the individual's health care treatment record. (For military personnel see par. 6150(1); civilian personnel par. 6150(4)).

Destroy when 5 years old, or earlier if individual files and records are superseded or technically obsolete.
GENERAL MEDICINE RECORDS

TREATMENT AND HOSPITALIZATION RECORDS

(1) ELECTROENCEPHALOGRAM TRACINGS
   (a) Normal tracings
   (b) Abnormal tracings

(2) EMERGENCY ROOM LOGS (CONTROL REGISTERS)

(3) FAMILY ADVOCACY CASE FILES. (case files, copies of medical records, investigative reports, committee findings, correspondence and related supportive records documenting abuse, neglect, maltreatment of naval family members)
   (a) Central registry records at HeadquartersBUMED
   (b) Working files at BUMED command activities

(4) GYNECOLOGY MALIGNANCY DATA (data sheets, copies of medical records, punched cards, magnetic tapes and discs).
   (a) Input documents
   (b) Punched cards

Destroy when
1 year old.

Destroy when
5 years old.

Retain at activity.
Transfer to nearest FRC with other primary program records when activity is decommissioned and then destroy 25 years after last 25 years. Destruction at the FRC.

Destroys when
1 year old.

Destroys when
5 years old.

Retain at activity.
Transfer to nearest FRC with other primary program records when activity is decommissioned and then destroy 25 years after last 25 years. Destruction at the FRC.

Cut off annually.
Transfer to WNRC when 4 years old.
Destroy when 25 years old.

Destroy 5 years after the calendar year in which last incident reported.

Destroy when
1 year old.

Withdrawn

Disposition to be determined.
(5) NURSING RECORDS

(a) Nursing Care Plans, Medication and Treatment Cards, Stat/Daily Orders, Patient Intake and Output (such as DO 792).

(b) Ward Reports, Day Books and Nursing Service Reports

(6) PATHOLOGY AND CLINICAL LABORATORY RECORDS

(a) Tissue Examinations
   1 Pathology Laboratory copies
   2 All other copies

(b) Tumor Registries (maintained at hospitals and medical centers conducting cancer programs).

(c) Autopsy Reports (autopsy protocols, authorizations for autopsy and tissue donation, toxicological examinations (requests and reports), and related, supportive records).

(d) Surgical and Autopsy Specimen Reference Records (pathology laboratory indexes, ledgers, alphabetic name cards, AFIP contributor's lists and similar records used for reference purposes (patient name - specimen number).

(e) Physical, chemical and bacteriological examinations of food and water

(f) Clinical Laboratory Workload Data (statistical reports of procedures performed with summary data and related records).
(g) Laboratory Information System (LABIS) (At NNMC, Bethesda, MD; test results for patients at NNMC and specimens referred to NNMC and system generated subsidiary records).

1. Computer Stored
   - On-line registration file, by activity, of current patients.
   - Laboratory findings for inpatients.
   - Laboratory findings for outpatients.
   - Operational, quality control and statistical accumulations.

2. Printed reports
   - Interim reports.
   - Final reports.
   - Subsidiary records such as workload reports.
   - Laboratory logs.
   - Short term census reports.

Destroy when:
- 1 year old.
- 30 days after discharge/last result entry.
- 90 days after last result entry.
- 90 days old.
- Patient's treatment is completed.
- 5 years old.
- 1 year old or earlier if purpose served.
- 5 years old.
- 7 years old.

(h) Blood Transfusion Reaction Records (case files documenting the clinical investigation of transfusion reactions, including transfusion ledgers (patient-donor-crossmatch), individual reports of patient reaction, and supportive records maintained by the laboratory transfusion service).

(i) Blood Donor and Blood Donor Center Records (Blood donor record cards (SF 572), blood donor ledgers and related records, including records of designated blood donor centers (donor record charts, blood identification tags, copies of reports of bleedings, shipping inventories, etc.).)

(7) PHARMACY RECORDS

Destroy when:
- 3 years old.
- 1 year old on discontinuance of function.
(a) Prescriptions, Formularies and Drug Lists

1. Prescription forms including "polyprescription" forms

2. Formularies and drug lists (reference publications listing medicinal substances, formulas, etc., and locally prepared listings of drugs)

(b) Narcotics, Alcohol and Controlled Drug Inventory and Accounting Records

(C) Psychiatry, Psychiatric Social Work and Clinical Psychology Records

(a) Neuropsychiatric Inpatient and Outpatient Workload Statistics, and Psychiatric Unit Evaluations

(b) Clinical Psychology Case Files (Documentation of the clinical psychological evaluation of individuals such as examination records of intelligence, personality, achievement, aptitude; test results; notes and observations of patient's behavior; abstracts/copies of pertinent medical records and similar materials.

1. Active duty and retired military personnel

2. All other patient categories

(c) Psychiatric Social Work Case Files (Notes of interviews with patients, family and other individuals relative to the patient's adjustment; evaluations of personal and social data and similar materials)

(9) Surgery Records (Operation schedules, electrical conductivity test records, anesthetic data records, etc.)

(10) Vision Records

(a) Eyewear prescriptions

(b) Occupational Optometry Case Files (Accumulated by medical centers, hospitals and branch clinics incident to the practice of occupational optometry)

Destroy when 3 years old.

Destroy when 3 years old or earlier if outdated, superseded or no longer needed for reference.

Destroy when 3 years old.

Destroy when 2 years old.

Transfer as a separate records series (group) to NPRC, (MPR) 2 years after date of last admission/treatment.

Destroy when 50 years old.

Destroy when 25 years old.

Destroy 2 years after date of last admission/treatment.

Destroy when 2 years old.

Destroy when 1 year old.

Destroy when 5 years old, or earlier if purpose is served.

SSIC 6900-6522
AVIATION MEDICINE RECORDS

(1) AVIATION PHYSICAL EXAMINATION AND EVALUATION CASE FILES (flight jackets documenting fitness for admission to or retention in aviation training programs and as base-line medical data for follow-up during the individual's flying career).

Retain locally. Cut off annually. Destroy when 30 years old.
Alternatively, transfer inactive records to the nearest FRC for interim storage and disposal if storage space is not available locally.

Apply par. 6410(1) above.

(2) AEROSPACE MEDICAL TRAINING RECORDS. (Individual case files documenting training and education in aerospace medicine and allied disciplines).

Apply par. 6420(1) above.

(3) AVIATOR PHYSIOLOGY TRAINING RECORDS. (Copies of reports and records at naval aerospace physiology training units and activities using aerospace physiology training devices).

Destroy when 5 years old.

SUBMARINE AND DIVING MEDICINE RECORDS

(1) DIVING AND HYPERBARIC MEDICINE RECORDS. (Case files, forms, reports, related records and data accumulated incident to the medical management of diving and hyperbaric casualties and diseases maintained by medical centers and hospitals having an undersea medicine service).

Transfer to nearest FRC for interim storage when 4 years old. Destroy when 25 years old.

Apply par. 6420(1) above.

(2) SUBMARINE MEDICINE RECORDS (documenting underwater work not in the hyperbaric state and liaison dealing in submarine matters).

Destroy when 6 years old.

(3) NAVY EXPERIMENTAL DIVING UNIT RECORDS (General correspondence files).

RADIOPHYSICIAN MEDICINE RECORDS
(1) ENTRANCE AND SEPARATION X-RAYS OF MILITARY PERSONNEL (all X-ray films exposed in conducting medical and dental examinations for entrance into and separation (discharge or release) from active duty service.

(a) **Entrance Dental X-Rays** (panoramic/full mouth X-rays)

(b) **Entrance and Separation X-rays** (as prescribed by MANMED, Chapter 15).

Identify films as **Entrance X-rays** maintain in individual's dental health care treatment record.

Transfer on a current basis to NPRC (CPR), (See Note for shipping instructions.) Film files may be transferred weekly or monthly depending on the rate of accumulation. Do not hold X-rays longer than 3 months in addition to the accumulating month. Ship the films in weekly or monthly increments with the oldest week or month transferred first. Transfer X-rays to NPRC (CPR) in straight alphabetic or numeric (film number) order.

**Exception:** Separation X-ray of military personnel may be retained locally until the individual has been separated or retired, then shipped in accordance with procedures set forth above.

**Note:** NARS packing and identification instructions. Do not bend, roll or fold film. Type, print, or stamp the individual's SSN and name, in that order, on the front of each jacket (film folder) or envelope used for enclosing X-rays. Retain all films for examiners.
taken as a part of the entrance physical examination).

1a Accepted candidates

2a Rejected candidates

(d) Disability Separation X-Rays (for active duty military patients transferred to the Veterans Administration incident to disability separation).

(e) X-Rays of Rejected Applicants for Military Service

1a By reason of pulmonary tuberculosis

2a For medical reasons other than disease of the chest.

(2) DIAGNOSTIC X-RAY FILM (x-rays taken incident to examination, care and treatment of patients on an inpatient and outpatient status).

(a) Medical X-Rays - All Patient Categories (except entrance and separation x-rays of military personnel, and x-rays of foreign personnel (military and other) and their dependents covered in par. 6470(2)(a) 1a , below). X-rays are maintained in terminal digit-SSN filing order in color-coded medical x-ray film jackets (including finding (alphabetic cross reference) media, index cards, pertinent sections of x-ray logs, etc.).
not assigned an SSN until the SSN is issued. Enter the SSN on the film jacket and ship to NPRC (CPR). Requisition film jackets through normal supply channels; standard stock items NSN 7530-00-612-3950, envelope, photographic negatives (4 3/8" x 10 3/8") and NSN 7530-00-612-4000, do., 14 1/2" x 17 1/2". Use negative jackets measuring 4 3/8 x 10 3/8 inches for all 4 x 10 inch and smaller size film, if any are exposed. Do not use larger size jackets for these films. Place individual identifying data parallel with and no lower than 1 1/4 inches below the front open end of the jacket. Do not enter data in the preprinted space provided on the jacket.

Enclose all film larger than 4 x 10 inches in 14 1/2 x 17 1/2 inch jackets. However, if 14 1/2 x 17 1/2 inch jackets are not available, use envelopes of the same size. Place the individual's SSN, name, grade/rate and branch of service (Navy, Marine Corps, Army, Air Force, etc.) in the space provided in the upper left corner of the 14 1/2 x 17 1/2 inch jackets. If the envelopes are used, fold the flap so that the glued surface does not come in contact with the film. Place the individual's identifying data in the upper left corner parallel with the front top edge of the envelope.

Use GSA standard cartons, NSN 8115-00-290-3386 (18" x 15" x 5 1/2") when shipping records such as x-ray film. Reinforce the corners of shipping cartons or packages with pres-
Entrance X-rays consisting of chest X-rays exposed in conducting the medical examination preliminary to an individual's entry into, or reenlistment for extended active military service in either an officer or enlisted status which include:

a. Applicants accepted for reserve or regular enlistment for extended active duty or active duty for training, including applicants for aviation cadet training, officer candidate school, and flying service on enlisted status.

b. Applicants accepted for appointments for as officers, and Navy Cadets.

c. Members of the Reserve ordered to active duty for training or extended active duty under the Reserve Forces Act, as amended.

d. Former members who reenlist for additional periods of extended active duty.

e. Students and graduates of officer candidate school.

Separation X-rays (vice radiology records) consisting of chest and other X-rays made as part of the medical examination for release or discharge from extended active military service for all military personnel.

(c) U.S. Military Service Academies (X-rays of candidates
Foreign Personnel (Military and Other) and Their Dependents

(b) Dental X-Rays — All Patient Categories (except entrance x-rays of military personnel).

(c) Unidentified Medical and Dental X-Rays (films that can not be identified with patients to whom they pertain).

(3) X-Rays of civilian employees (medical diagnostic x-rays taken incident to occupational/industrial health programs for U.S. civilian employees including adjunct records, and cross reference media (index cards, pertinent sections of x-ray logs, etc.).

(a) Negative X-Rays

(b) Positive X-Rays — with pathological findings that are not static in nature, and one representative X-ray of pathological findings that are static in nature.

storage and disposal.
Transfer X-rays in terminal digit - SSN filing order; finding media in alphabetic order.
Give custody of of x-rays to the individual at time of return to the parent country. Otherwise, destroy when 5 years old.
Maintain in the individual's dental health care treatment record. Destroy by salvaging when new x-ray is taken.
Destroy by salvaging, if economically feasible.

(b) Dental X-Rays — All Patient Categories (except entrance x-rays of military personnel).

(c) Unidentified Medical and Dental X-Rays (films that can not be identified with patients to whom they pertain).

(3) X-Rays of civilian employees (medical diagnostic x-rays taken incident to occupational/industrial health programs for U.S. civilian employees including adjunct records, and cross reference media (index cards, pertinent sections of x-ray logs, etc.).

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storage and disposal.
Transfer X-rays in terminal digit - SSN filing order; finding media in alphabetic order.
Give custody of of x-rays to the individual at time of return to the parent country. Otherwise, destroy when 5 years old.
Maintain in the individual's dental health care treatment record. Destroy by salvaging when new x-ray is taken.
Destroy by salvaging, if economically feasible.

(b) Dental X-Rays — All Patient Categories (except entrance x-rays of military personnel).

(c) Unidentified Medical and Dental X-Rays (films that can not be identified with patients to whom they pertain).

(3) X-Rays of civilian employees (medical diagnostic x-rays taken incident to occupational/industrial health programs for U.S. civilian employees including adjunct records, and cross reference media (index cards, pertinent sections of x-ray logs, etc.).

(a) Negative X-Rays

(b) Positive X-Rays — with pathological findings that are not static in nature, and one representative X-ray of pathological findings that are static in nature.
(4) Radioisotope records (copies of dosage records, scan sheets, tracings, consultation reports and similar records accumulated by Medical Department facilities having diagnostic/therapeutic radioisotope services).

(a) License Applications - Radioisotopes/By-Product Materials (such as AEC Form 313 and related documents).

(b) Accountability and Inventory Records (documenting receipt, use, disposal of isotope/by-product materials).

(c) Radioactive Material - Accident, Theft and Loss Reports (copies of messages, forms, correspondence and related records documenting accidents, thefts, and loss of radioactive material and/or release into the environment reported by Medical Department facilities).

(5) RADIATION EXPOSURE RECORDS. (Original records documenting exposure of individuals to external radiation, e.g., alpha, beta, gamma, neutron, etc., including negative and positive results, skin and nasal contamination incidents, contaminated injuries, decontamination and treatment are maintained in the health care treatment record. (See par. 6150.).)

(a) Photodosimetry Records (copies of photodosimetry records for personnel exposed to ionizing radiation including reports of audit discrepancies, errors in film exposure/interpretation and dosimeter readings, defective materials, etc., related records and summary reports and listings).

(b) Dosimetry Film (processed photodosimetry film and related film logs, worksheets, etc.).

of civilian employees separated from the naval service over 30 days. If separation date is unknown, transfer 2 years from the date of last X-ray examination. Destroy 10 years after transfer to non-service Retention period to be determined. Destroy when 5 years old.

Destroy 5 years after expiration of license.

Retain records until zero balance (no material on hand) is achieved and the data is inspected and certified. Destroy records with zero balance only.

Destroy when 5 years old, provided investigative and corrective actions have been completed.

Destroy when 2 years old.
(c) **Special Reports - Personnel Exceeding Exposure Limits**  
(case files documenting personnel exceeding radiation exposure limits; medical evaluations/determinations of radiation exposure related illness/injury; advisory board findings, together with supportive records).  

1d. Copies of records maintained by ships and stations.  

2d. Files maintained by the Bureau of Medicine and Surgery.  

(d) **Electromagnetic Radiation (EMR) Records** (documenting biological effects of and potential health hazards to military and civilian personnel from exposure/over-exposure to EMR including microwave, lasers, radar, etc.).  

(e) **Radiation Exposure Reports** (summary reports of personnel and related exposure data, including periodic and situational reports such as MED 6470-1, Personnel Exposure to Ionizing Radiation, together with related forms, work sheets, punch cards, microfiche, and supportive files and records).  

**SSIC 6500**

**RESEARCH RECORDS**

(1) **MEDICAL AND DENTAL RESEARCH AND DEVELOPMENT PROJECT FILES**  
(consisting of a complete history of each approved project/task from initiation, through the RDT&E process to completion or termination with original manuscripts of technical reports and supportive records).  

(a) **Accumulated by the activity/project office having primary responsibility for the R&D effort**  

1c. Preliminary, interim and final reports.  

Permanent. Transfer to [nearest FRC] when 5 years old.  
Offer to NARS when 20 years old.
2a Supporting records (excluding reports).

(b) Research Proposals: (health care research projects and contracts received from individuals, commercial firms, private institutions and others)

1a Approved proposals solicited and unsolicited.

2a Disapproved proposals.

(c) Non-Record Copies of Research Project Files (at the project office and other participating and supporting activities.)

(2) CLINICAL INVESTIGATIONAL DRUG PROJECT RECORDS (reports and project files, forms, records and related data documenting use of new drugs in health care delivery, including description of the drug, dosage, uses, actions, side effects and inventories and prescription records which are maintained in accordance with federal regulations and other authority for Navy sponsored clinical investigations and research studies.

(a) Preliminary, interim and final reports.

(b) Project files (excluding reports)

(c) Disapproved and terminated projects

SSIC 6600-6699

DENTISTRY RECORDS

SSIC 6600

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DENTISTRY RECORDS - GENERAL
(1) DAILY DENTAL SERVICE RECORDS (documentation by individual dental officers of procedures and services accomplished; used to compile dental service reports).

(2) DENTAL SERVICE REPORTS
   (a) Quarterly dental statistical reports at BUMED

   (b) At dental field activities

(3) DENTAL EQUIPMENT AND FACILITIES REPORTS (annual reports of dental spaces, equipment, prosthetic data and utilities).

(4) DENTAL METALS (issue records, and statements and inventories of precious and special dental metals).

(5) PROSTHODONTIC WORK REQUESTS AND PRESCRIPTIONS (records of dental prostheses fabricated and metals used; maintained alphabetically by patient name).

SSIC_6700-6829

EQUIPMENT AND SUPPLIES

SSIC_6700

EQUIPMENT AND SUPPLIES - GENERAL

(1) EQUIPMENT INVENTORY RECORDS (reports and records documenting medical/dental equipment acquisition, replacement and budget requirements, including adjunct data as to age, condition, degree of obsolescence, etc., on forms/formats, computer listings, punched cards, tapes, etc., at BUMED command activities).

(2) IONIZING RADIATION EQUIPMENT (surveys of equipment, including evaluations of shielding, safety procedures, discrepancies, recommendations, etc., including copies of reports, forms, worksheets, letters, memoranda and similar nonrecord materials documenting the formal survey program accumulated by Medical Department facilities).

(3) EQUIPMENT MAINTENANCE AND REPAIR RECORDS (at BUMED command activities)
activities, and medical and dental departments of the operating forces; consisting of forms, reports and related records documenting administration and operation of medical/dental equipment and repair facilities in the Navy.

(a) **Equipment Maintenance Work Orders, Work Management and Control Records**: Files and records documenting frequency of servicing/down-time of individual equipment items, personnel assigned servicing-repair duties, manhours expended, costs generated, etc.

(b) **Medical/Dental Equipment Maintenance Service Manuals**: (files maintained on equipment requiring recurrent technical maintenance service, including detailed instructions/manuals for operating and servicing parts, lists, wiring diagrams, pictorials, etc.)

(4) LOCAL PURCHASE RECORDS (forms/punched cards documenting open market purchases of medical/dental material obtained in quantities sufficient to warrant consideration for standardization, central procurement and stocking; together with related supportive records (usage data, recommendations, etc.))

(a) **AtBUMED_command_activities**

(b) **Master_Transaction_Tapes** (at the Naval Medical Materiel Support Command, Philadelphia, PA).

(5) OTHER EQUIPMENT AND SUPPLY RECORDS (copies of supply workload summaries, shelf life records, excess and surplus equipment and supply records—such as SF 120, materiel improvement, and complaint records—such as DD 1899, credit plans and similar records at medical/dental treatment facilities).

- 5 years old.
- Destroy when 5 years old.
- Retain throughout the life cycle of the equipment item.
- Destroy after equipment disposal (replacement, salvage, scrap).
- Destroy when 2 years old, or earlier if purpose served.
- Destroy when 5 years old.
- Destroy when 2 years old or earlier if disposition action has been completed.