

(3) Insufficient information to provide an assessment

e. In the case of "Processing warranted", see Chapter 4 for application submission guidance.

f. In the case of "Processing not warranted", the NAVCRUITDIST will inform the applicant of N3M's initial assessment. As courtesy review risk assessments do not constitute field rejection criteria, the NAVCRUITDIST will ask the applicant if they still wish to proceed with processing. If the applicant decides to complete processing, see Chapter 4 for application submission guidance.

g. In the case of "Insufficient information to provide an assessment", the NAVCRUITDIST has two options:

(1) The applicant can seek, at the applicant's own expense, additional civilian medical documentation to assist N3M in making a medical risk assessment. If the applicant chooses to do so, the NAVCRUITDIST will resubmit all documents included in the initial courtesy review request, any new documents obtained by the applicant and a new Officer Applicant Courtesy Review Cover Sheet (checklist).

(2) The applicant may submit an Application to Board. See Chapter 4 for Application to Board submission guidance. Physical at MEPS should not be completed until after the applicant is RECPRO "Y". Forward Final Documents when completed as required.

h. Courtesy Reviews do not replace processing of the official physical. NAVCRUITCOM (N3M) courtesy review risk assessments are only preliminary recommendations and do not constitute Final Documents submission or final medical finding.

020813. MEDICAL WAIVER PROCEDURES. All officer program applicants will have their Medical Documents reviewed by NAVCRUITCOM (N3M). The following procedures apply:

a. Requests for medical waivers shall be sent to and processed by NAVCRUITCOM (N3M) only after HIV and DAT results are obtained and documented on DD Form 2808.

b. The applicant is found to be Physically Qualified (PQ) or Not Physically Qualified, waiver approval (NPQRW).

c. If an applicant is found to be Temporarily Not

Physically Qualified (TNPQ), NAVCRUITCOM (N3M) will forward a letter directly to the NAVCRUITDIST stating the additional information that is needed prior to a final determination of physical qualification.

d. If an applicant is Not Physically Qualified (NPQ), a letter stating the reason for physical disqualification will be forwarded to the NAVCRUITDIST from NAVCRUITCOM (N315) and the applicant will be processed for non-selection.

(1) Medical Conditions Not Generally Waiverable:

(a) Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC), HIV Antibody, or history of any of the above.

(b) Single kidney - regardless of cause.

(c) Loss of an arm or leg.

(d) Seizure disorder with seizure and/or medication within five years.

(e) History of Cancer with treatment within five years (except basal cell carcinoma).

(f) Diabetes Mellitus Type I or Type II.

(g) Loss of one eye.

(h) History of Cataract surgery.

(i) History of any Keratoconus (protrusion of the cornea).

(j) History of Glaucoma.

(k) Refractive Surgery: Radial Keratotomy.

(l) History of Aphakia (lens replacement of the eye).

(m) Severe Allergic reaction (Anaphylaxis) to insects or food.

(n) Cirrhosis.

- (o) Corneal transplant history.
- (p) Crohn's Disease and Ulcerative Colitis (Intestinal ulcers).
- (q) Severe deformities of the mouth, throat, or nose that interfere with speech or mastication of ordinary food.
- (r) Severe Scoliosis (spine curvature) or Kyphosis ("hunchback").
- (s) History of eating disorders: Anorexia Nervosa and Bulimia.
- (t) Headaches (recurrent and severe), which require prescription medication or interfere with daily activity.
- (u) Hepatitis, chronic: Hepatitis B or Hepatitis C carrier.
- (v) Malignant Hyperthermia/Hyperpyrexia (adverse reaction to anesthesia).
- (w) Multiple Sclerosis (nerve disease involving muscle weakness and un-coordination) and Muscular Dystrophy (progressive atrophy/wasting of the muscles).
- (x) Severe orthopedic injuries that result in functional limitations secondary to residual muscle weakness, paralysis, or marked decreased range of motion.
- (y) Otitis Media (middle ear infection/inflammation), chronic or currently active.
- (z) Pes Cavus (abnormally high arches of the feet with increased extension of the toes), severe, symptomatic (other than routine orthotic use).
- (aa) Pneumonectomy, removal of entire lung.
- (bb) Pregnancy (except for prior service processing for affiliation).
- (cc) Prosthetic replacement of joints.
- (dd) Psychiatric Conditions: Schizophrenia; Major Depression, recurrent; Bipolar Disorder; Panic disorders; Sexual

disorders; and Personality disorders, severe.

(ee) History of Retinal disease or detachment.

(ff) Un-descended testicle unless surgically removed or confirmed to be congenital absence.

(gg) Chronic skin disorders. Atopic dermatitis; Eczema; Psoriasis.

(hh) Spinal Fusion, greater than two vertebral spaces, congenital or surgical involving any number of vertebrae, by any method.

(ii) History of drug and/or alcohol abuse or diagnosed substance dependence.

(jj) History of Neurofibromatosis.

(kk) Congenital (birth) heart defects that have not been repaired.

(ll) History of intestinal bypass or stomach stapling.

(mm) Severe head injury within the past five years.

(nn) Latex allergy.

(oo) Anabolic Steroid Use. Any applicant admitting steroid use within the previous two months is not enlistment eligible. The Chief Medical Officer at MEPS may consider waivers on an individual basis after attaining internal medicine consultation or appropriate history. If a waiver is recommended, request must be forwarded to COMNAVCRUITCOM (N3M). Send the following test results for waiver consideration:

1. microscopic urinalysis and

2. liver function study. Dosage strength of steroids used must also be documented. Use of steroids longer than two months before enlistment application is not medically disqualifying; however, any indication of high steroid dosage and/or chronic use must have internal medicine consultation to evaluate late or residual steroid effects.

(2) Medical Conditions Generally Considered Waiverable.

Applicants who appear to be, in all other respects, qualified for enlistment but reveal a history of one or more of the following common conditions must be advised that treatment records or a summary from their private or attending physician will be of value to the examining MEPS physician during the pre-enlistment physical examination and may reduce the possibility of temporary medical disqualification.

Note: This list is not all-inclusive.

(a) History of Ophthalmologic Disorders such as excessive refractive error: +/- 8.00 diopters sphere, +/- 4.00 diopters cylinder. LASIK and PRK surgery to include preoperative refractive measurements.

(b) History of Respiratory disorders such as childhood Asthma, Reactive Airway Disease or Exercise-Induced Asthma, pneumothorax (traumatic or spontaneous).

(c) History of Orthopedic surgery or injury (ORIF, retained hardware, ACL or Arthroscopic, Bankhart repair, bunionectomy).

(d) History of Gynecological disorders such as Endometriosis, Cervical Dysplasia, or abnormal PAP smear.

(e) History of Cardiovascular disorders such as repaired congenital heart malformation or conductive disorder (WPW) treatment.

(f) History of Abdominal/Gastrointestinal disorders such as Hernia repair (must be 60 days postoperative with release from care statement), GERD, hemorrhoids.

(g) History of Neurological disorders such as back pain, surgery or asymptomatic mild Scoliosis, sleepwalking, childhood epilepsy, concussion.

(h) History of Urinary disorders such as kidney stones, proteinuria, or childhood enuresis.

(i) History of Psychiatric disorders such as mood, personality, conduct, or behavior disorder. History of ADD/ADHD with medication use. (Must provide medical treatment records/transcripts regarding work or school performance after discontinuation of medication. Applicant must have been off medication for one year).

(j) History of Dermatological disorders such as mild skin disorders (i.e., acne, pilonidal cyst, contact dermatitis, urticaria, and warts).

(k) Hearing. Pure tone hearing loss at 500, 1000, 2000 Hz of not more than 30 db on average with no individual level greater than 35 db at these frequencies in either ear. Pure tone hearing loss at 3000 Hz of not more than 45 db and 4000 Hz not more than 55 db in either ear.

Note: The NAVCRUITDIST may request a physical profile reconsideration from N3M when NEW additional medical/physical information is obtained.

Note: NAVCRUITDIST OPs will ensure the N3M determination letter is uploaded into OTools and forwarded to N315 for Next Action.

020814. FLAG REVIEW PROCEDURES. Requests for Flag Review of an NPQ applicant are only to be completed following acceptance of a non-selection letter due to NPQ. The following procedures apply:

a. The NAVCRUITDIST CO must write a formal request for flag review endorsing the applicant.

b. The NAVCRUITDIST CO's formal request and all **NEW** additional medical documentation will be forwarded to NAVCRUITCOM N3M via 00S secretariat.