Chapter 1 - Logistics Division Introduction

Paragraph

Chapter 2 - Equipment Management Branch

Section I:
- General Purpose
- Equipment Management Branch Services
- Customer Assistance

Section II: Requisitioning Procedures
- General Instructions
- Equipment Acquisition
- Requesting Status on Purchase Requests

Section III: Property Management Procedures
- Receipt and Issue of Equipment
- Criteria of Accountable (Hand Receipt) Property
- Instructions for Primary Hand Receipt Holders
- Turn-in of Excess and Unserviceable Equipment
- Lateral Transfer of Accountable Property
- Lost, Damaged, or Destroyed Property

Section IV: Non-Medical Equipment Repair
- Obtaining Non-Medical Repair Support
- Turn-In Procedures for Equipment Repair

Section V: Contract Service Support
- Definition
- Procedures

Section VI: Maintenance of Medical Equipment and Instrument Recycling
- Purpose
- Scope

Explanation of Responsibilities

Appendix A - Maintenance Support Procedures
- Equipment User/Operator Maintenance
- Scheduled Maintenance
- Unscheduled Maintenance
- Disposition Instructions for MEDCOM FORM 643
- Maintenance Related Programs

*This regulation supersedes MEDDAC Regulation 40-61, dated 8 August 2008*
Loaned/Leased Equipment 16
Alteration of Medical Equipment 16
Maintenance Related Parts/Supplies 16

Appendix B - Receipt, Turn-In, and Disposition of Medical Equipment
  Technical Inspection (TI) 18
  Types of Technical Inspections 18
  Maintenance Expenditure Limits (MEL) 18
  Policy Regarding Waivers 18

Appendix C - Equipment Failures/Recalls/Alerts/Operator Errors
  Equipment Failures/Serious Incident 20
  Medical Device Recalls/Alerts 20
  Operator/User Related Equipment Errors 20

Appendix D - Medical Material Complaints
  Complaint Policy 25
  Types of Material Complaints 25
  Definition 25
  Submitting Material Complaints 25

Appendix E - Medical Instrument Recycling Program (MIREP)
  Definitions 27
  Establishing Service Support 27
  Accountability of Serviced Instruments 27
  Disposal of Unserviceable Instruments 27

Chapter 3 - Facilities Management Branch
  Scope 3-1
  Repair and Utilities Section (R&U) 3-2
  Housekeeping 3-3
  Vehicle Coordination and Control 3-4
  Facilities Maintenance and Repair 3-5

Chapter 4 - Materiel Management Branch
  Section I: General
    Purpose 4-1
    MMB Services Include 4-2
    Customer Assistance 4-3
    Definitions 4-4
    Authorization to Request or Receive Supplies 4-5
    Use of Priority Designators (PD) 4-6
  Section II: Supply Support
    Requesting Supplies and Equipment 4-7
    Emergency Requests (PD 03) 4-8
    Requesting Supplies After Normal Duty Hours 4-9
    Status of Due Out and Transaction History 4-10
    Requesting Items to be Stocked in the Warehouse 4-11
    Turn-In Procedures 4-12
    Medical Materiel Complaints 4-13
    Dummy Department of Defense Activity Address Codes 4-14
    Medical Gas Support 4-15
    Linen Support 4-16
APPENDIX A - Definitions and Acronyms
APPENDIX B - Federal Supply Classes
APPENDIX C - Unit of Issues

Figure List:
4-1. Notice of Delegation of Authority, DA Form 1687, Example and Instructions
4-2. Customer Reorder List Example and Instructions
4-3. Request for Issue or Turn-In, DA Form 2765-1, as a Request for Issue Example and Instructions
4-4. Request for Issue or Turn-In, DA Form 2765-1, As A Request for Turn-In Example and Instructions
4-5. Purchase Request and Commitment, DA Form 3953, Example and Instructions
4-6. Continuation Sheet, OF Form 336, Example and Instructions
4-7. Request for Stockage Example and Instructions
4-8. Customer Transaction Register Example and Instructions
4-9. Customer Due Out Report Example and Instructions
4-10. Medical Materiel Complaint, SF Form 380, Memorandum Example and Instructions
4-11. Signature Card, DD Form 577, Example and Instructions
4-12. Request for Issue or Turn-In, DA Form 3161, for Destruction Example and Instructions

Chapter 5 - Optical Fabrication Laboratory
Section I: General
  Purpose 5-1
Section II:
  Instructions 5-2
  Priority 5-3
  Returns 5-4
Figure List 5-1

DD Form 771 Spectacle Order Form
1-1. Purpose. This regulation prescribes policies and procedures by which all activities and units at Fort Sill and in the supported Health Services Area can receive medical logistics support.

1-2. General. This regulation provides guidance for how to obtain support and assistance from all areas that fall under this logistics division. This regulation should be maintained or electronically accessible at each activity that requires Class VIII support.

1.3. Mission. The mission of the Logistics Division is to provide high quality, responsive materiel supply, equipment maintenance, facility support, property accountability, optical fabrication, technical assistance and other logistical services to all customers including the Dental Command and Veterinary Services within a specified support area.

   a. Advises and informs the hospital commander on all logistic issues and maintains the command in a high state of readiness and is prepared to execute all contingency and mobilization mission on order.

   b. Establishes and maintains a formal, documented Command Supply Discipline Program and conducts annual logistics reviews of all supported activities within the MEDDAC.

   c. Conducts studies, evaluates and analyzes directives, policies, procedures, reports and statistics for the purpose of improving efficiency and economy within the MEDDAC and its subordinate activities.

1-4. References.

   a. AR 5-9, Area Support Responsibilities

   b. AR 40-61, Medical Logistics Policies and Procedures

   c. AR 708-1, Logistics Management Data and Cataloging of Supplies and Equipment

   d. AR 710-2, Inventory Management Supply Policy below the Wholesale Level

   e. AR 740-1, Storage and Supply Activity Operations

   f. DA Pam 710-2-1, Using Unit Supply System (Manual Procedures)

   g. DA Pam 710-2-2, Supply Support Activity Supply System (Manual Procedures)

1-5. The Logistics Division is organized into four major branches.

   a. Equipment Management Branch (EMB). The EMB is responsible for equipment acquisition, property accountability, and maintenance of medical and nonmedical equipment. Additionally, the EMB provides contract service support. (Refer to chapter 2)

   b. Facility Management Branch (FMB). The FMB provides a variety of hospital services to include: work orders, repair and utilities, transportation coordination, and housekeeping services. (Refer to chapter 3)

   c. Materiel Management Branch (MMB). The MMB is the primary source for all Class VIII medical/surgical
expendable and durable materiel requirements for all units within the service area and SSSC supply item requirements for the MEDDAC. MMB provides distribution services within the MEDDAC command as well as for the DENTAC and Veterinary Services. Materiel Distribution Services provides par level resupply of consumable medical materiel in patient care areas. (Refer to chapter 4)

d. Optical Fabrication Lab. Optical Fabrication Lab provides single vision optical fabrication support to the MEDDAC. (Refer to chapter 5)
CHAPTER 2
EQUIPMENT MANAGEMENT BRANCH

SECTION I. General

2-1. Purpose. To inform all supported activities of the functions, policies, and procedures relative to acquisition, accountability, and maintenance of equipment and processing of non-personal services contract requirements.

2-2. Equipment Management Branch Services.

a. Equipment acquisition and non-personal services contracts.

(1) Capital Equipment Expense Program (CEEP) – Items that cost less than $100,000.00.

(2) Medical Care Support Equipment (MEDCASE) – Items that cost more than $100,000.00.

(3) Contract service support.

b. Property accountability.

(1) Accountable property book records and individual hand receipts.

(2) Requisition processing.

(3) Excess equipment turn-in.

c. Maintenance and repair of non-medical equipment.

(1) Computer hardware and telecommunications equipment - FIXX Center.

(2) Non-medical repair service.

d. Maintenance and repair of medical equipment.

(1) In house and contract services.

(2) Leased/rental equipment.

(3) Medical Instrument Recycling Program (MIREP)

(4) Consultative support on medical equipment procurement.

2-3. Customer Assistance. The EMB is located in the basement of building 4300. Normal duty hours are from 7:30 to 4:30 weekdays except for holidays. Telephone numbers are commercial (580) 458-2126/2184 and DSN 866-2126/2184. Contact the NCOD for emergency repairs of medical equipment after normal duty hours at (580) 458-2800.
SECTION II. Requisitioning Procedures

2-4. General Instructions.

   a. All Purchase requests for equipment are submitted to the EMB Property Book Section for processing.

   b. Authorization to request and receive equipment for persons other than the hand receipt holder must be designated in writing and on file in the Property Book Section.

2-5. Equipment Acquisition.

   a. Requests to purchase CEEP items will be submitted to the Property Book Section on a CEEP Form Utilizing Department Dollars, FSMEDDAC 817, for departmentally funded items or Purchase Request and Commitment, DA Form 3953, for centrally or Command funded.

      (1) Departmentally funded CEEP requests will be processed through the Property Book Section for purchase.

      (2) Command or centrally funded CEEP and MEDCASE requests will be processed through the Property Book Section to be purchased by the CEEP/MEDCASE manager. Refer to the CEEP/MEDCASE Handbook for detailed instructions.

   b. Initiating officer’s signature for the purchase request will be verified against the Notice of Delegation of Authority, DA Form 1687, and then processed according to the method of funding. Refer to figure 4-1.

   c. CEEP requests for computer hardware, software, peripheral equipment or telecommunication equipment such as radio pagers, beepers, telephones, facsimiles or copy machines, must be routed through the Information Management Division (IMD) for approval prior to submission to the EMB for purchase.

   d. All requisitions will be submitted with a routine priority of “13”. If the urgency of need for the equipment requested requires an urgent priority of “06”, you must submit a memorandum to the Chief, Logistics Division for approval of the priority upgrade.

2-6. Requesting Status on Requisitions.

   a. Copies of CEEP requests should be maintained with your department budget files until all items requested are received.

   b. Routine requests are normally received within 30 days.

   c. If you need to check the status on a CEEP or MEDCASE purchase request, contact the EMB Property Book Section.

SECTION III. Property Management Procedures

2-7. Receipt and Issue of Equipment.

   a. The EMB receives all equipment from the main warehouse and secures it in the EMB cage area of the warehouse. All shipments are inventoried for completion and damage. Any shipment damage to equipment is noted and submitted to the warehouse supervisor for immediate action.

   b. Equipment requiring property book accountability is issued after a Medical Materiel Control Number
(MMCN) is applied to the equipment and proper accountability is established. A hand receipt transaction register is generated and a signature by the hand receipt holder or official designee is required prior to issue of any equipment.

c. Medical equipment must be processed through medical maintenance prior to issue. The customer will be notified when equipment is ready for pickup.


a. Medical equipment with a unit price of less than $2500 that does not require maintenance will not be accounted for on the property book. Any medical equipment with a unit price of $5000 or more will be put on the activities hand receipt as accountable property.

b. Non-medical equipment with a unit price of $2500 or more will be put on the activities hand receipt.

c. Any item considered highly pilferable or sensitive, regardless of the unit price, may be put on individual hand receipt at the discretion of the Commander and Property Book Officer (PBO).

2-9. Instructions for Primary Hand Receipt Holders.

a. Primary Hand Receipt Holders will perform an important role in the accountability, management, control, and utilization of medical and non-medical equipment located in your area of responsibility. It is important to understand these responsibilities.

b. Primary Hand Receipt Holders have direct responsibility for government property, which has been entrusted to them and specifically charged with the care and safekeeping of that property, whether such property is in their possession, in use, or in storage. A signed hand receipt for property is prima facie evidence of property responsibility. With direct responsibility they can be held pecuniary liable, if property is lost, damaged, or destroyed due to negligence or willful misconduct.

c. Culpability.

  (1) Simple Negligence is the absence of due care, by an act or omission of a person which lacks that degree of care for the property that a reasonably prudent person would have taken under similar circumstances, to avoid loss, damage, or destruction to the property.

  (2) Gross Negligence is an extreme departure from due care resulting from an act or omission of a person accountable or responsible for Government property which falls far short of that degree of care for the property that a reasonably prudent person would have taken under similar circumstances. It is accompanied by a reckless, deliberate, or wanton disregard for the foreseeable loss or damage to the property.

d. Specific Instructions.

  (1) Physical Inventory. After the initial 100 percent physical inventory, Primary Hand Receipt Holder’s are required to conduct a 100 percent physical inventory and hand receipt update semi-annually. Random spot-checks should be made of the location and physical condition of your property between inventories.

  (2) Sub-Hand Receipting. Sub-hand receipting on a Hand Receipt/Annex Number, DA Form 2062, of hand receipted property is encouraged as a means of maintaining accountability. Temporary Hand Receipts, DA Form 3161, are only valid for 30 days. Update sub-hand receipts before updating the master hand receipt with the Property Book Section.
(3) Loaning Equipment. Do not loan or temporarily hand receipt property to another organization unless the PBO or Commander approves the action.

(4) Physical Security. Report any circumstances that make it impossible to secure property from loss or theft.

(5) Absent or on Leave. If the primary hand receipt holder will be away from the duty station in excess of 30 days, a temporary hand receipt holder must be appointed to assume the hand receipt during that time. Do a joint inventory before leaving and again upon return.

(6) Hand Receipt Update and Verification. During the hand receipt update verify all hand receipt transactions have been posted to the new hand receipt. It is the hand receipt holder’s responsibility to ensure that all gains and losses pertaining to equipment for which they are responsible are processed through the PBO in a timely manner. When the hand receipt is signed and updated destroy all previously posted transactions.

(7) Notification of Release from Duty Assignment. Upon notification of PCS, ETS or release from your duty assignment, coordinate with the PBO. A 30-day notice is required to ensure the hand receipt is cleared. A transfer of property responsibility to the successor must be completed before leaving your duty section or receiving clearance from the PBO.

2-10. Turn-In of Excess and Unserviceable Equipment.

a. Serviceable medical and non-medical equipment that is excess to your section may be transferred to another section by doing a Hand Receipt Transfer, DA Form 3161. Serviceable equipment excess to your section should be promptly turned in to the EMB.

b. Unserviceable medical and non-medical equipment should be promptly turned in to the EMB. With regard to unserviceability – this equipment would be rendered unserviceable through fair wear and tear (FWT) or deemed uneconomically repairable or non-repairable by the appropriate maintenance and repair support facility.

c. Turn-in procedures.

(1) The hand receipt holder or authorized designee of the excess or unserviceable equipment prepares a Request for Issue or Turn-In, DA Form 3161, in 4 copies, for turn-in to the Property Book Section. The documents will be reviewed for accuracy, verification of equipment ownership and signature.

(2) Computer hardware and telecommunications equipment will be signed for by a representative from the FIXX Center, located beside the EMB. The excess manager in the Property Book Section will sign for all other excess equipment. The hand receipt holder will receive a signed copy of the Request for Issue or Turn-in, DA Form 3161, turn-in transaction to keep with their hand receipt files until their next update.


a. Occasionally hand receipt holders may want, or be directed, to transfer accountable property between installations or property books.

b. The Property Book Section will contact hand receipt holders in the event of any directed lateral transfers and advise them accordingly.

c. Any equipment requests for lateral transfer to this facility by the hand receipt holder must receive approval from the PBO. The Property Book Section will prepare appropriate documents.
2-12. Lost, Damaged, or Destroyed Property.

   a. In the event of damage or loss to government property, immediately notify the PBO. After duty hours notify the Noncommissioned Officer of the Day (NCOD). Conduct a thorough search and question any individuals with access to the area. If the item is not found contact the Military Police. An announcement of the loss should also be sent on the hospital’s electronic mail system.

   b. Hand receipt holders of accountable property that is lost, damaged, or destroyed must initiate a Report of Survey, DA Form 4697, and forward it to the PBO within 14 days from the date the item is first discovered missing.

   c. An individual or hand receipt holder who admits liability for property lost, damaged, or destroyed can sign a Statement of Charges/Cash Collection Voucher, DD Form 362. The individual can have the money deducted from his/her paycheck or annotate cash collection and make cash payment to the Finance and Accounting Office. Requests for these actions are coordinated with the PBO.

SECTION IV. Non-Medical Equipment Repair


   a. Repair of non-medical equipment is coordinated through either the Property Book Section or the FIXX Center.

   b. Procedures for repairs will vary depending on the type of equipment.

      (1) Computer hardware and telecommunications equipment is repaired through the FIXX Center.

      (2) Computer hardware repair is supported by the FIXX Center located beside the EMB.

      (3) Repair on all other nonmedical equipment will be handled by the Property Book Section. Questions on any of these procedures should be referred to the PBO.


   a. If non-medical equipment must be turned in for repair, prepare a DA Form 3161, and bring the equipment to the property book section.

      (1) The requestor will be given a signed copy of DA Form 3161 temporary hand receipt/request for repair for their hand receipt file. Keep this form until the equipment is repaired and returned to you.

      (2) If you are notified that the equipment cannot be repaired, the DA Form 3161 will then be your receipt for turn-in and the equipment will be deleted from your hand receipt.

   b. If medical equipment must be turned in for repair, the medical maintenance work order clerk will initiate a work order and the hand receipt holder maintains a copy.

SECTION V. Purchase Requests for Contract Services

2-15. Contract service support is provided for customers. Contract service requests include but are not limited to the following services: maintenance contracts for equipment, guest speakers, professional development seminars, registration fees, professional consultation, equipment rental, lease and/or loan agreements, etc.
2-16. Procedures.

a. Prepare and submit a DA Form 3953 to the Property Book Section along with a description of the service being requested. The delivered to address should state: Reynolds Army Community Hospital (RACH), 4301 Mow-Way Road, ATTN: Property Book Officer, Fort Sill, OK 73503-6300. Forward the purchase request to the Property Book Section.

b. The requestor will provide a Statement of Work (SOW) if necessary.

c. The requestor must ensure that adequate lead-time is given before the service is scheduled to begin. You cannot permit the start of a service before a contract has been awarded. To do so causes an irregular procurement action for which the requestor can be held pecuniary liable. A routine request for a service should be submitted at least 60 days prior to the desired start date of the service. An urgent request for a service should be submitted as a “06” request with a justification for the urgent need.

d. As with other purchase requests, the requestor will be forward a copy of the SF Form 1449 (Contract). The requestor is responsible for providing partial or final receiving reports on the SF Form 1449 or on DD Form 250 to Property Book Section to ensure prompt payment to the vendor providing the service. Any discrepancies with the performance of the vendor should be explained in the receiving report.

SECTION VI. Maintenance of Medical Equipment and Instrument Recycling

2-17. Purpose: To establish the Commander's policies, principles, and procedures for an integrated Medical Maintenance Program which will result in safe, reliable, maintainable, and supportable medical equipment within activities of RACH, Fort Sill, Oklahoma.

2-18. Scope: This regulation is designed to cover the broad scope of medical equipment maintenance for activities within USAMEDDAC, DENTAC, and all other authorized activities within the geographical area of responsibility. It provides uniform guidance and direction to standardize operation procedures.

2-19. Explanations of Responsibilities

a. The Commander will analyze the maintenance operation based on the following eight factors affecting maintenance: command, personnel, time, tools, repair parts, records, publications, and training. The Commander will provide, from available resources, funds essential for the EMB to accomplish its missions.

b. The Deputy Commander for Clinical Services (DCCS) will ensure that:

   (1) Clinical services and departments establish user maintenance programs that include initial orientation, periodic training, and standing operating procedures for regular equipment maintenance.

   (2) Monthly evaluation of user maintenance performance is implemented.

c. Chief, Logistics Division will ensure that:

   (1) Requested tools and test equipment are given adequate priority on CEEP and MEDCASE procurement actions based on true urgency.

   (2) Medical equipment repairers perform routine and additional duties, which are performed by other hospital staff. These duties will be discontinued if the long-term maintenance mission will be affected.
(3) Training objectives are established for medical equipment maintenance personnel and that tuition and TDY estimates are included in annual Logistics Division budget.

(4) Submission of Medical Material Complaints is coordinated with Quality Services Division and Risk Management Officer.

d. Chief, EMB will ensure that:

(1) The maintenance of Army-owned medical equipment is effectively performed throughout its life cycle.

(2) Medical equipment is inspected and tested upon receipt, and periodically during each year.

(3) Memorandums are prepared identifying situations involving equipment, which is received for repair, when the problem is caused by user error. Copies of memorandums will be furnished to the Safety Manager, Quality Services Division/Risk Management Coordinator, and the DCCS or the Deputy Commander for Administration (DCA).

(4) Training objectives and justifications for funding courses associated with training objectives are prepared.

e. The chief of each department or service will analyze his/her maintenance programs with emphasis on equipment availability for patient care. An evaluation of user maintenance programs shall be included in annual performance evaluations of all supervisors.

f. User level maintenance is a supervisory responsibility. Identifying equipment shortages and malfunctions is the responsibility of supervisors at every level.

(1) Each ward, clinic, department, and division NCOIC will ensure maximum availability of properly functioning medical equipment and accessory components to meet mission requirements.

(2) Hand receipt holders of medical equipment shall develop standing operating procedures which outline user-level maintenance such as performance testing, accessory replacement, user orientation and training.
1. EQUIPMENT USER/OPERATOR MAINTENANCE. The quality of all medical equipment is directly related to the extent of user care provided.

   a. Users are responsible for:

      (1) Ensuring all medical equipment is correctly identified on property hand receipt, and property bar code is prominently displayed.

      (2) Each hand receipt holder will maintain one copy of manufacturer's operating literature for each type of medical equipment on the hand receipt. Continuous effort will be made to acquire missing copies.

      (3) Each department will conduct user orientation and periodic training as required by JCAHO Standard EC.1.6. Training will emphasize use, as well as care, of medical equipment. All training will be documented in the employees CBO folders.

      (4) Performing monthly operational checks and serviceability inspections of all medical equipment. Emergency equipment (defibrillators, crash carts, narcotic cabinets, life support monitors, etc.) will be tested and inspected during each change of shift. Ensure clinical alarms are audible.

      (5) Performing before, during and after operational and post operational checks and service. Services include verifying operation, cleaning exterior surfaces, cleaning air filters, removing tape, dirt, and lint; replacing light bulbs and accessories that are removable without the use of tools.

      (6) Checking battery-operated equipment performance while equipment is not plugged into receptacle, and visually inspecting user-replaceable batteries for leakage.

      (7) Checking electrical power cords for cracks or tears in insulation and for physical displacement of cords from plug receptacles.

      (8) Checking equipment for safe fluid levels.

      (9) Verifying that all accessories are present in proper working order, and stored so as not to cause damage.

      (10) Tagging equipment that needs repair to ensure that it will not mistakenly be used prior to repair by EMB.

      (11) Ensuring that sufficient quantities of spare user-replaceable accessories are kept on hand as a precaution against unnecessary failure rendering the medical equipment useless. User-replaceable parts include: batteries, light bulbs, electrodes, filters, and accessory items that are replaceable without the use of tools. Users can obtain information on user responsibilities from the manufacturer's literature, which should be kept on hand in every department as required by Joint Commission Accreditation on Healthcare Organization (JCAHO).

2. SCHEDULED MAINTENANCE.

a. All accountable medical equipment received will be processed through Property Book Number 22. Equipment will be completely inventoried and tested prior to issue. Equipment will be scheduled for periodic maintenance by EMB in accordance with recommendations from the equipment manufacturer, Army, MEDCOM, JCAHO, and other pertinent regulations and directives.

b. The following three types of services may be scheduled:

   (1) Preventive Maintenance (PM). PM covers all actions performed in an attempt to retain an item in a specified condition by providing systematic inspections, detection, and prevention of incipient failures.

   (2) Electrical Safety Testing (ST). Safety tests provide information to the repairer that describes electrical current flow characteristics of the equipment. Deteriorated power cords are the most common cause of failed electrical safety test. The test verifies that the path of least resistance for current flow is through the power cord rather than the human body.

   (3) Calibration/Verification/Certification (CL). Calibration/verification/certification is the comparison of a medical instrument of unverified accuracy with a test instrument of known and greater accuracy, which is traceable to National Institute of Standards and Technology, to detect and correct any discrepancy in the accuracy of the unverified instrument.

c. Verification of Calibration Labels:

   (1) Medical Equipment Verification/Certification, DD Form 2163. The purpose of this label is to inform equipment users as to whether or not equipment is within calibration. Users are responsible for inspecting this label prior to each use of the equipment. If a label is found to be past the review date posted on the label, the user must remove the equipment from use and notify the EMB.

   (2) Defibrillator Energy Output Certification, DA Label 175. The purpose of this label is to inform the equipment user of the actual defibrillator output at a given setting. Users are responsible for inspecting this label prior each use of the Defibrillator. If a label is found to be past the review date posted on the label, the user must remove the equipment from use and notify the EMB.

d. Not Located Equipment (NL): Items, which cannot be located by the medical equipment repairer during services, will be reported to the hand receipt holder and the Property Book Officer (PBO). The hand receipt holder will have five working days in which to notify the EMB of the location. If after five days the hand receipt holder has not located the item(s) the hand receipt holder and PBO will prepare a report of survey.

3. UNSCHEDULED MAINTENANCE.

a. It is the responsibility of the equipment user to inform the EMB when equipment has failed to function. Portable equipment will be delivered to the EMB. Non-portable equipment will be repaired on-site. Upon receipt of the maintenance information (MMCN number i.e., F0001), the work order clerk will assign a work number to the request and the receipt copy, MEDCOM Form 643, will be returned to the requestor. On-site repair request will be made by telephone. Be specific when describing the equipment malfunction.

b. Like items, which do not appear on the users hand receipt, may be grouped on one request using the group managed “Z” material management control number (MMCN).
c. Work order priorities for repair and services have been established in accordance with the Army Medical Department Property Accounting System (AMEDDPAS), ADSM 18-HL3-RPB-IBM-UM. Each hand receipt holder is provided a listing of priorities assigned to their equipment. It is the responsibility of the hand receipt holder to inform the EMB of equipment requiring high priority repair consideration based on the use of equipment to sustain life, level of patient care for the clinic/unit and importance of the equipment regarding the mission of the unit or clinic.

4. DISPOSITION INSTRUCTIONS FOR AUTOMATED MAINTENANCE REQUEST, MEDCOM FORM 643:

   a. Receipt Copy. The copy previously returned to the user as a receipt for the equipment, is destroyed by EMB, when equipment is returned to the user. If the receipt copy cannot be located the hand receipt holder or designated representative will be required to enter a statement to that effect in section 2 of the MEDCOM Form 643 at the time the equipment is picked up.

   b. The file copy will be retained by the EMB for a period of 360 days after the work order close date.

   c. The organization copy will be retained by the activity requesting the repair for a period of 90 days after the receipt, except for the Department of Pathology, which will retain them during the life of the equipment.

5. MAINTENANCE RELATED PROGRAMS.

   a. Maintenance provided by EMB. Normal hours of operation are 7:30-4:30 Monday through Friday. After normal duty hours emergency repairs shall be accomplished by calling the NCOD at 458-2800.


      (1) The Equipment Maintenance Manager will establish and maintain a system for monitoring contract service. Contract service will be used in accordance with the mission requirements of the EMB, and its manpower capabilities.

      (2) Users of hospital-owned medical equipment will not make service calls directly to vendors for the purpose of establishing or coordinating maintenance services. All service calls will be initiated by the EMB.

      (3) Services may be requested by designated individuals from departments with medical equipment under reagent/rental agreement. This equipment will be placed on the Property Book. Periodic services required by the manufacturer will be scheduled on the maintenance database as if the equipment were Army-owned. A copy of each service report provided by the vendors will be provided to Chief, EMB. Department of Army personnel will ensure the service report contains a clear description of the problem, corrective action, and number of hours to perform the service, replacement part description, part number, part price, hourly labor rate, and the name of the visiting service person performing the work. College of American Pathologists (CAP), JCAHO, and AR 40-61 require this action, in order to develop a complete maintenance history for each item.

      (4) When contractual services are performed on site, the equipment users will ensure the integrity of the service performed, and may sign the service report indicating a service was performed to their satisfaction.

      (5) EMB must be provided the service report for payment purposes. All service performed will be captured in the maintenance database.

      (6) The Equipment Maintenance Manager will initiate all service contracts required on either an annual or one-time basis. Annual contracts will be identified in the maintenance database Warranty/Contract Report.
c. Warranty Service.

(1) The Equipment Maintenance Manager will ensure that medical equipment warranties are identified in the Warranty/Contract Report. A warranty service report file will be established for monitoring service problems.

(2) Equipment users will not make warranty service calls to vendors for on-site service or send equipment to them. EMB will make contact with the vendor, make arrangements for service, and inspect service rendered upon completion. This is required to ensure that a complete maintenance history is developed and to track persistent failures in new equipment.

(3) In-house repairs will not be performed on equipment under warranty without prior approval from the warrantor.

d. Medical Stand By Equipment Program (MEDSTEP).

(1) MEDSTEP items are selected major components or stand alone items that are used to temporarily replace existing like items that are in repair to prevent downtime on mission essential equipment.

(2) The following guidelines will be followed when evaluating eligibility for MEDSTEP additions:

(a) Equipment must be mission essential. When the equipment is not operational, the section's operation ceases.

(b) Equipment must not be under an annual service contract.

(c) In-house MEDSTEP assets will not duplicate those maintained by U.S. Army Medical Material Agency (USAMMA).

(d) MEDSTEP assets will not be used to replace uneconomically repairable items or to fill in from equipment shortages.

6. LOANED/LEASED EQUIPMENT. At no time shall loaned or leased equipment be introduced into this activity without first receiving a complete functional and electrical safety inspection. All loaned or leased equipment shall meet the electrical safety standards set forth by NFPA 99. MEDDAC Memorandum 40-60, Medical Equipment Demonstrations, Examinations and Evaluations, outlines the requirements for medical equipment used for demonstrations.

7. ALTERATION OF MEDICAL EQUIPMENT. The Medical Maintenance Manager will ensure that alteration or modification, which changes medical equipment function, does not occur without proper prior approval (i.e., manufacturer's notice of modification, or as recommended in Department of the Army Supply Bulletins). Modification will be documented through the use of a modification work order. Modifications will not be implemented until they have been reviewed and approved by the AMEDD National Maintenance Point.

8. MAINTENANCE RELATED PARTS/SUPPLIES.

a. Maintenance-Related Supplies. Two types of maintenance-related supplies are authorized in accordance with DA PAM 710-2-2, chapter 24, for support level maintenance as follows:

(1) Bench Stock: Bench stock are low cost, consumable non-medical class items (e.g., nuts, bolts, screws, shrink tubing, wire, ice chips, resistors, etc.) used by repair persons, at an unpredictable rate, in the process of repair of medical equipment.
(2) Shop Stock (demand supported stock): Shop stock parts are select items for stockage based on three
demands within 180 days in the process of repairing medical equipment. These supplies are consumed by the EMB
during the course of repair of medical equipment and are not provided as user-replaceable parts.

b. User-Replaceable Parts.

(1) It is the responsibility of every equipment user to maintain consumable supplies as needed to ensure
continued use of medical equipment. Consumable supplies include detachable patient cables, light bulbs; probe tips,
air filters, electrodes, etc.

(2) User-replaceable supplies with a stock class of 6500 will be ordered by the user through Materiel Branch.

(3) Other user maintenance supply items with non medical class stock or part numbers, such as light bulbs
and alkaline batteries, will be ordered through GSA. If items are not available through the GSA catalog, request will
be processed through the Materiel Branch.
APPENDIX B
RECEIPT, TURN-IN, AND DISPOSITION OF MEDICAL EQUIPMENT

1. TECHNICAL INSPECTION (TI). Technical inspections of medical equipment involve analysis of equipment with regard to serviceability standards and performance tests.

2. TYPES OF TECHNICAL INSPECTIONS. The following types of TIs will be performed by a medical equipment repairer (MER) in accordance with AR 750-1, TB MED 7, and manufacturer’s literature.
   a. Acceptance/Pre-issue. This is inspection of newly procured medical equipment prior to acceptance and issue into the health care delivery system.
      (1) Medical equipment is delivered to the Medical Maintenance Section with a request for TI work order.
      (2) EMB will TI the equipment to ensure the delivered equipment is complete in accordance with the specifications of the contract, operational, and safe for patient use. Attention to detail shall be given to this process to take advantage of vendor installation and avoid loss of warranty due to unauthorized handling.
      (3) Vendor installed equipment will be accounted for by Materiel Branch and not issued to Property Book Section, EMB, until it has been installed per contract specifications. Payment for said equipment will be in accordance with contract requirements.
      (4) Property Book Section will assign the equipment to the Property Book and hand receipt it to the requesting activity.
      (5) No equipment should be delivered directly to the end user without processing through the PBO. However, should such delivery occur, the end user/hand receipt holder is required to notify the PBO immediately.
   b. Turn-in (used equipment). This is inspection of used medical equipment to identify serviceable condition for future use. The Property Book Section, EMB or Materiel Branch may only request the TI for serviceability.
      (1) Inspection is to ensure serviceability or reparability of an item removed from service. Functioning equipment turned in to the PBO by a ward or clinic need not be routinely technically inspected for reissue to another activity within the medical treatment facility (MTF). However, if the PBO determines that a TI is required prior to reissue, the request for coding will be in accordance with AR 40-61.
      (2) Inspection of used medical equipment to be reported as excess will be in accordance with AR 40-61. The PBO will indicate the following in section 2 of the Automated Maintenance Request: Request T1 (Classification) for Reporting Excess, MEDCOM Form 643.

3. MAINTENANCE EXPENDITURE LIMITS (MEL). TB MED 7 contains guidance for determining maintenance expenditure limits for medical equipment. Maintenance is not authorized when the estimated cost one-time cost of repair would exceed the MEL unless the Commander or the Chief, Logistics Division have approved a waiver.

4. POLICY REGARDING WAIVERS.
   a. Existing policy and implementing instructions concerning one-time repair limitations are specific. These policies are outlined in AR 40-61 and TB MED 7. Implementing guidance is in a variety of technical bulletins. Policy in this area consistently emphasizes the personal attention of commanders in the management of maintenance operations. Guidance recognizes that the need for a medical item is clinically driven; however, the method used to
satisfy that identified need is resource driven. While a clinician may be in the best position to determine the need, the clinician is not in the best position to decide how the need will be satisfied.

b. The basic philosophy of the waiver policy is to provide for controls to preclude the routine use of repair funds on equipment that should be replaced rather than repaired.

c. The policy governing repair waivers as stated in AR 40-61 and TB MED 7 is clear. Granting waivers is a command function, not a clinical function. Equipment users are responsible to ensure replacement equipment is ordered in a timely manner to prevent the use of waivers due to excessive expenditures.

d. The EMB has the responsibility for coding medical equipment and notifying the user (ward, clinic, service, etc.) when the item is unserviceable or uneconomically repairable.

e. Users will be notified by memorandum routed from the Chief of EMB, through the Chief of Logistics, to the equipment user. The waiver will identify the shortcoming that prevents repair from being performed.

f. The equipment user must make the determination whether the equipment is required or whether the section can wait for a new one to be purchased.

(1) If the repair is not desired, the user must complete the first endorsement and return the correspondence to EMB.

(2) In the event the repair is needed because the equipment is essential to mission performance, the user must complete the first endorsement, and forward the correspondence to the Commander or Chief, Logistics for approval/disapproval. Chief, Logistics Division will approve all waivers where the unit price falls below the Medical Care Support Equipment (MEDCASE) threshold. The Commander will approve waivers above the MEDCASE threshold. A brief justification is necessary. Reference should be made to the MEDCASE or CEEP case number showing a replacement has been requested.

g. Equipment users will review equipment requirements and schedule the purchase of replacement equipment annually. The use of waivers reflects poor equipment requirements forecasting.
APPENDIX C

EQUIPMENT FAILURES/RECALLS/ALERTS/USER ERRORS

1. EQUIPMENT FAILURE/SERIOUS INCIDENT. Anytime a piece of medical equipment fails to operate while in support of a patient, the user is required to submit Quality Assurance/Risk Management Document, DA Form 4106, along with a work order request to EMB. Medical Equipment Repairer must investigate the cause and report findings IAW the Safe Medical Devices Act (SMDA). DO NOT change any control settings on the equipment or allow anyone access to the equipment until proper investigative procedures are initiated with all appropriate personnel present. Ensure that all accessories and consumables remain with the equipment.

2. MEDICAL DEVICE RECALLS/ALERTS. EMB is responsible for informing hand receipt holders of any medical device recalls/alerts pertaining to equipment on their hand receipt. EMB must also report all recalls/alerts to the Environment of Care Committee on a monthly basis. Samples of such notices are found in appendix C, figure 1 of this regulation.

3. OPERATOR/USER RELATED EQUIPMENT ERRORS. EMB is responsible for conducting monthly reviews of all completed work orders. When evidence of possible operator/user related equipment error is found to have contributed to the cause of the equipment malfunction, a notice is sent to the hand receipt holder owning the equipment. Samples of such notices are found in appendix C, figure 1 of this regulation. Hand receipt holders are required to respond to such notices IAW appendix C, figure 2 and 3 of this regulation.
MEMORANDUM FOR Environment of Care Committee

SUBJECT: Medical Equipment Management Program EC.1.6

1. The following information is provided for the Environment of Care Committee Minutes:

   a. Selecting and Acquiring Medical Equipment:

      **Issue:** FY 00 CEEP/MEDCASE Listing

      **Action/Recommendation:** New equipment requirements (unfunded) for FY 00 are 1,711,435.80 ($371,435.80/$1,340,000.00) See enclosure.

      **Status:** None.

      **Evaluation:** Issue is on going.

   b. Inspection, Testing, and Maintenance:

      **Issue:** Monthly Maintenance Summaries

      **Action/Recommendation:** Listed below is a maintenance summary for the month of February 2002.

      | February 2002 | Scheduled Maintenance |
      |---------------|-----------------------|
      | Actions       | Actions               | Completed Percentage | Minimum Acceptable Performance Level |
      | Scheduled     | Performed             |                      |                                     |
      | PMCS          | 254                   | 245                  | 96.46%                              | 95.0%                               |
      | ST            | 212                   | 206                  | 97.17%                              | 95.0%                               |
      | CL            | 110                   | 105                  | 95.45%                              | 95.0%                               |

      19 ACTIONS WERE NOT PERFORMED ON 6 items

      Not Located Actions: 11
      In Repair Actions: 8
      In Use Actions: 0
      Work Center Cancel Actions: 0
      System Cancel Actions: 0
SUBJECT: Medical Equipment Management Report

Unscheduled Maintenance
Work Orders

<table>
<thead>
<tr>
<th>On Hand</th>
<th>Received</th>
<th>Completed</th>
<th>Canceled</th>
<th>Balance</th>
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</thead>
<tbody>
<tr>
<td>113</td>
<td>243</td>
<td>277</td>
<td>5</td>
<td>74</td>
</tr>
</tbody>
</table>

c. Medical Equipment Hazard Alert/Recalls:

**Issue**: Voluntary Manufacture Recall on Siemens Servo Ventilator 900.

**Action/Recommendation**: Received a voluntary manufacture recall on 9 February 2002 for a potential problem with a non-return valve. The recommended parts were placed on order the same day. Received the new non-return valves on 8 March 2000 and completed the recall/work-orders on 11 March 2002. Listed below are the Medical Management Control Numbers (MMCN) and location:

<table>
<thead>
<tr>
<th>MMCN</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>C4316</td>
<td>Respiratory Therapy</td>
</tr>
</tbody>
</table>

**Status**: Completed

**Evaluation**: Item is closed

d. New Equipment Failures/User Error Reports: None

e. Medical Equipment Orientation and Education: None

2. Point of contact for this memorandum is the undersigned at 458-2126/2469.

XXXXXXXX X XXXXX
CW3, USA
Chief, Equipment Management Branch
MEMORANDUM FOR NCOIC ________________________

SUBJECT: Operator/User Related Equipment Errors

1. The enclosed listing indicates that one or more equipment related failures occurred as a result of operator/user error within your clinic/activity during the month of September 2002. This listing is based on an evaluation of the equipment for which you submitted a work order.

2. Each incident resulting in equipment failure from operator/user error needs to be documented to determine the cause. The cause of the error may be the lack of documentation such as operator manuals, or lack of training on the use or maintenance of the specific piece of equipment. However, in each case equipment failures affect the safety of the patient and operator. Action must be taken to preclude a reoccurrence.

3. All equipment failures are required to be documented and submitted to the Environment of Care Committee.

4. A sample checklist is provided for your information on how to properly respond.

5. Point of contact for this memorandum is the undersigned at 458-2126/2469.

Encl

XXXX X. XXXXXX
CW2, USA
Chief, Equipment Management Branch

CF:
QSD
Safety Officer
Operator/User Related Equipment Errors Checklist

Request response in writing to the EMB answering the questions listed below. These requirements are consistent with the 2001 JCAHO Standards (EC 1.6.).

This checklist should be used to address each of the following areas:

a. Enter the work order and incident number pertaining to the attached incident report:

   Work Order number: __________ Incident number: ______________

b. Discussion of the problem. (Complaint)

   (1) What was the equipment failure?

   (2) Describe how the equipment failed and the operator's immediate action to correct the malfunction.

2. Did the operator have a copy of the operator's manual? Yes  No

3. Was the operator trained on the piece of equipment as part of the Competency Based Orientation? Yes  No

4. Did the operator follow the instructions in the user's manual? Yes  No

5. Was operator maintenance being performed in accordance with the instructions included in the operator's manual? Yes  No

   c. Prior to implementing any corrective action, confirm that the corrective action is appropriate to the equipment failure.

What action has the section initiated to preclude a reoccurrence of the equipment failure?

1. Do you need an operator's manual? Yes  No

2. Did your investigation identify a need for training? Yes  No

3. Is training documented in the employee's CBO? Yes  No
1. **COMPLAINT POLICY.** According to the Safe Medical Device Act (SMDA) of 1990, medical device user facilities are required to report incidents that reasonably suggest there is a probability that a medical device has caused or contributed to the death, serious injury or serious illness of a patient, effective September 1991. Material found to be injurious or unsatisfactory will be reported on Reporting and Processing Medical Material Complaints/Quality Improvement Report, SF Form 380. See AR 40-61, figure 3-1 for a completed sample of SF Form 380. The items will be thoroughly evaluated before submitting the complaint.

2. **TYPES OF MATERIAL COMPLAINTS.**

   a. **Type I Complaints.** Complaints submitted on supplies or equipment determined by use or testing to be harmful or defective to the extent that it's use has or may cause death, injury or illness.

      (1) Immediate action must be taken to report such items and suspend their use.

      (2) Only a chief medical or dental officer familiar with the details can initially classify a Type I complaint.

   b. **Type II Complaints.** Complaints used to report material other than equipment that is suspected of being harmful, defective, deteriorated, or otherwise unsuitable for use.

   c. **Type III Complaints.** Complaints relating to equipment determined to be unsatisfactory because of malfunction, design, workmanship or performance. A Type III Complaint does not require suspension of the item.

3. **DEFINITIONS.**

   a. A medical device is an article that is:

      (1) Recognized in the official national formulary, or the U.S. Pharmacopedia, or any supplements.

      (2) Intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment or prevention of disease, in man or other animals.

      (3) Intended to affect the structure or any function of the body of man/animal, and which does not achieve it's principles intended purposes through chemical action on the body of man/animal and which is not dependent upon being metabolized for the achievement of any of it's principles intended purposes.

      (4) Examples include: Anesthesia machines, defibrillators, pacemakers, catheters, thermometers, patient restraints, hearing aids, blood glucose monitors, x-ray machines, etc.

   b. Serious injury or serious illness:

      (1) Is life threatening.

      (2) Results in permanent impairment of a body function or permanent damage to a body structure.

      (3) Necessitates immediate medical or surgical intervention to preclude permanent impairment of a body function or permanent damage to a body structure.
4. SUBMITTING MATERIEL COMPLAINTS.
   
   a. Complaints will be submitted to the Quality Improvement Coordinator, Materiel Branch, Logistics Division.

   b. When submitting complaints on SF Form 380, the routing identifier code of the complaint will be shown in the "NO" block (upper right hand corner).

   c. Complaints on nonstandard items procured through DSCP will cite the purchase order number and document number.

   d. Type III complaints will include photographs and drawings of equipment when they will help describe the complaint.

   e. Contact the U.S. Army Medical Materiel Agency, Fort Detrick, MD 21701-5001, for additional guidance on the submission of Materiel Complaints, SF Form 380.
1. DEFINITIONS.

a. Medical instrument recycling is a program initiated to extend the useful life of durable medical instruments through reconditioning.

b. Durable instruments are those that cost more than $8.00 each and are listed on the Army Master Data File (AMDF) with accounting requirements code (ARC) of "D." Similar nonstandard items are also accepted for recycling.

c. Recycling is the restoring of instruments to a like-new condition. The process includes repair, adjustment, redefining hatches, sharpening, cleaning, and polishing instruments as required.

2. ESTABLISHING SERVICE SUPPORT.

a. A service contract will be established with a company that provides mobile instrument service to perform as much of the recycling process on site as possible.

b. Periodic visits will be scheduled by Central Material Supply (CMS), through EMB, when there are more than 40 instruments on hand to recycle. Instruments that require immediate service will be delivered to EMB and subsequently mailed to the vendor for service.

3. ACCOUNTABILITY OF SERVICED INSTRUMENTS.

a. Operating Room (OR)/CMS will record the instruments that are submitted for recycling indicating nomenclature, quantity, and date turned over to the vendor for service.

b. EMB will compare the vendor’s service report against the list prepared by CMS to ensure payment is made only for the service performed.

4. DISPOSAL OF UNSERVICEABLE INSTRUMENTS. Instruments that are identified as unserviceable will be grouped according to type and submitted to EMB on work request MEDCOM Form 643. One MEDCOM Form 643 will be submitted for each type of instrument. The blue copy of MEDCOM Form 643 will be used by CMS as justification to order new instruments of similar type. The equipment will then be turned in IAW DA Pamphlet 710-2-2.
1. Follow these procedures only when ordering a single item. When ordering two or more items follow instructions (figure 3-3).

2. DA Form 3953 Preparations.

   a. A sample Purchase Request and Commitment, DA Form 3953, is provided with these instructions. Only complete the blocks below. Leave all other blocks blank. Prepare a separate purchase request for each suggested vendor. If additional space is needed, use Continuation Sheet, OF Form 336, (figure 3-4).

   b. DATE: Enter the date the purchase request is prepared.

   c. PAGE_____OF_____PAGES. If only the DA Form 3953 is used, put Page 1 of 1 Pages. If OF Form 336 is needed, put Page 1 of 2 Pages, (or Page 1 of 3 Pages, etc., depending on how many continuation sheets are used). This information helps keep track of all documents in your request.

   d. PURCHASED FOR: Enter your clinic/ward/service, Z account number, and hand receipt number.

   e. DELIVERED TO: Enter as shown in example.

   f. NOT LATER THAN (Date):

      (1) Enter the date the item is required. On a routine request (IPD "13") this date should be no sooner than 30 days from date of request. On a high priority request (IPD "06" or "03"), indicate the date you must have the item by.

      (2) On a routine request, enter "13" next to the date in this block. If the request is a high priority, enter a "06" or "03" next to the date. NOTE: f the request is an "06", route it through Chief, Logistics Division, for approval in the COMMANDING OFFICER OR DESIGNEE block at the bottom right of the form. If the request is a "03" (emergency), you must obtain the Commander's signature in the COMMANDING OFFICER OR DESIGNEE block at the bottom right of the form.

   g. LOCAL PURCHASE AUTHORIZED BY: Place an X in the block and enter the following: AR 40-61, AR 710-2.

   h. ITEM: Sequentially list items being requested, starting with number "1."

   i. DESCRIPTION OF SUPPLIES OR SERVICES:

      (1) Enter the description of the item being ordered. Leave three clear spaces above and five spaces below the description.

      (2) Provide a complete description of the item to be procured to include nomenclature and catalog number/stock number/part number from vendor catalog. If available, provide a copy of the page from the vendor's catalog. This helps ensure that the correct item is ordered.

      (3) When requesting a service, explain in detail the service being requested.

      (4) If labels are being requested furnish examples of the type desired. If measurements are required for proper sizing ensure that they are accurate.
(5) Provide complete name, address, and telephone number (if known) for source of supply.

(6) Use OF Form 336 if insufficient space is available on the DA Form 3953.

(7) If operator and/or maintenance manuals are required include a request for two copies of all required literature.

j. QUANTITY: Self-explanatory.

k. UNIT: Enter the unit of issue in which the item is available.

l. ESTIMATED UNIT PRICE: Self-explanatory.

m. ESTIMATED TOTAL COST: Self-explanatory.

n. AMOUNT: Enter the total amount of the order.

o. THE FOREGOING ITEMS ARE REQUIRED PURPOSE: Enter a brief justification for why the item/service is being requested.

p. INITIATING OFFICER: Enter the name, grade, and telephone number of the person authorized to request/receipt for supplies as listed on the activity's DA Form 1687. Date and sign before bringing to EMB.
Figure 3-5. Sample DA Form 3953 for Multiple Item Request

1. Use OF Form 336 whenever there is not enough room on the DA Form 3953 to enter all required information or when more than one item or service is being ordered. Use as many OF Form 336 as necessary to place your entire order from a single vendor.

2. As with the DA Form 3953, leave three clear spaces at the top of the first item description on this sheet and leave 5 spaces in-between items.
   a. The first OF Form 336 will always be page 2. The next will be page 3, and so on.
   b. Put the source of supply on the OF Form 336.
   c. If any additional explanatory information is required about your request (for example, delivery schedules), include information of this type on the continuation sheet.
3-1. Scope. Facilities Management Branch (FMB) provides logistical support to all MEDDAC, DENTAC, and Veterinary Services activities in the following areas.


b. Housekeeping.

c. Vehicle Coordination and Control.

d. Facility Maintenance and Repair.

e. Sharps and Biohazard Container Collection.

3-2. R&U Section. FMB, 458-3501, provides R&U services such as making and mounting interior signs, clip-on pocket badges, engraving awards and plaques, mounting bulletin boards, pictures, diplomas, clocks, paper towel holders and soap dispensers, sharps containers, replacing ceiling tiles, mounting small medical equipment, fabrication of counters and shelves, and vehicle dispatch. These services require an informal memorandum, or electronic message detailing the work to be done, and a POC with date required and phone number.

3-3. Housekeeping.

a. MEDDAC, DENTAC, and Veterinary Services are supported by contract housekeeping services. Any problems encountered with the service should be reported verbally or in writing to the housekeeping inspector.

b. Verbal Complaints. Verbal complaints will be checked immediately. All calls should be placed to the housekeeping inspector at 458-2167 or 458-2141. Calls will be answered promptly and the situation examined and corrected. The inspectors are located in the basement of building 4300, room GE142.

c. Written Complaints. Problems may be submitted in writing by completing a DA Form 5105 (Figure 3-1) and sending it to FMB, Station 10. In order for written complaints to be valid, the particular problem must be checked off against the areas on the form, comments made, and signed by the OIC/NCOIC. Upon receipt, the housekeeping inspector will inspect the situation, confirm the complaint, and take all necessary corrective action. For same day action, the written complaint should be delivered to building 4301, room GE142, by 0900.

d. Staff members are not authorized to personally deal with any member of the housekeeping staff to correct a deficiency in housekeeping service, unless there is an emergency situation posing an immediate hazard to staff or patients. An example would be a spill on a vinyl or tile floor, which could cause someone to slip and fall. This procedure requires a follow-up phone call to the housekeeping supervisor at 458-2175 or 458-2169.

e. FMB personnel provide the pick-up service for the sharps and biohazard containers utilized in the patient treatment areas. Scheduled collection of the items is Monday through Friday only. If containers become full and present a safety hazard to staff members, call FMB at 458-2141 during routine duty hours.

f. Proposed moves are presented at Space Committee meetings, where the MEDDAC move checklist (Figure 3-2) is initiated. FMB cannot do any move-related work for an activity unless the Space Committee has approved the move, and the MEDDAC move checklist has been routed through all pertinent activities.
3-4. Vehicle Coordination and Control.

   a. To obtain use of a vehicle (sedan, truck, van) for a short period of time (1 to 5 days) for local or out-of-town travel, complete FS Form 833 (Figure 3-2) and submit it to the Transportation Coordinator, FMB, building 4300, room GE142 AT LEAST THREE DAYS BEFORE THE VEHICLE IS NEEDED. The justification written in block 12 must be thoroughly detailed. For out-of-town travel, the requestor prior to departure must sign for a gas credit card and PIKEPASS. This should be done the day before your travel begins.

   b. To obtain a vehicle for longer than 5 days or on a permanent basis, you must submit an FS Form 833 (Figure 3-2) to the Transportation Coordinator, along with a memorandum detailing the need.

   c. Activities with temporary or permanently assigned vehicles should pick them up from the MEDDAC Submotor Pool, located at the west (back) loading dock of building 4300, between 0600 and 0800 daily. The telephone number for the sub-motor pool is 458-2141.

   e. FS Form 833 is available through the Forms Warehouse, 458-2239, located in the basement of 4300 near the Distribution/Reproduction Center.

3-5. Facilities Maintenance and Repair.

   a. Facilities maintenance is performed by a dedicated group of skilled maintenance personnel who support MEDDAC, DENTAC, and Veterinary Services buildings. To turn in requests for service, contact the FMB work order clerk at 458-3501. After hours contact 458-2194 or page 115-130. You should have the following information when making a trouble call: room number, exact nature of problem, POC, and phone number.

   b. The following should be used when determining who to call for repair: Heating, air conditioning, leaking or broken plumbing, key locks, electrical items, broken glass, ice machines, water fountains, steam, suction/vacuum lines, door knobs, hinges, replacing windows, keys broken in door, refrigerators, kitchen equipment, water leaks, pest and insect control, dead animal carcass removal, elevators, status lights outside exam and treatment rooms, ABC cart (Translog) distribution system, water pressure and temperature problems, automatic doors, parking lot lights, mechanical locking security gates, wall papering, calibration, and changing combinations on vault doors. These types of services can be obtained by calling the work order clerk at 458-3501.

   *NOTE* Information Management Division (IMD): computers, keyboards, pagers and paging system, printers, telephones, televisions, cable service, nurse call system, FAX machines, copiers, "help" lights in restrooms. IMD is also responsible for setting up new telephone service. They can be reached at 458-2265.

   c. Activities requesting minor construction or modification to facilities or signs must submit a memorandum to Chief, FMB, along with drawings or diagrams of the work to be done. If an area is to be modified in any way, the drawings must include the present and proposed arrangements. Signs must include the size of the sign, size of lettering, mounting instructions, color, and an example of what is to be engraved. A POC and phone number are required.

   d. FMB will install, repair, and maintain the new card locks throughout the facility. Repair and maintenance problems should be called in to 458-3501. New installation requires a memorandum to Chief, FMB. Security issues should be called in to PMETS at 458-2090.

3-6. For assistance or information on any subject not covered in this chapter, please contact FMB at 458-2141.
# Janitorial Standards Checklist

<table>
<thead>
<tr>
<th>Building</th>
<th>Janitorial Employee</th>
<th>Supervisor/Foreman</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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**CUSTOMER SERVICES**

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<tr>
<th>Areas and Operations</th>
<th>Rating Standard</th>
<th>Areas and Operations</th>
<th>Rating Standard</th>
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<tbody>
<tr>
<td></td>
<td>Above Average</td>
<td></td>
<td>Below</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Floors**
  - Mopping
  - Sweeping
  - Main Doors
  - Hallway
  - Restrooms
- **Toilets**
  - Soap Dispenser
  - Towel Dispenser
  - Sanitary Napkin Dispenser
  - Mirrors
  - Stall Partitions
  - Tissue Dispenser
  - Sanitary Napkin Disposal
  - Walls
  - Fixtures
  - Lighting
  - Fixtures
- **Doors**
- **Walls**
- **Ceilings**
- **Windows**
- **Fixed Equipment**
- **Dustbins**
- **Dust**
- **Accessories**
- **Washing**
- **Dust**
- **Kitchens**
- **Lighting**
- **Closets**
- **Rack/Perch**

**REMARKS:**

- First column to which particular column should be focused.
### COORDINATION CHECKLIST:

(Please Initial)

- MCBAD
- Facility Management Branch (LOC)
- Safety Officer
- Equipment Management Branch (LOG)
- Medical Material Branch (LOG)
- Personnel Office
- Information Management Division

---

<table>
<thead>
<tr>
<th>10. Estimated Mileage</th>
<th>11. Estimated Daily Trips</th>
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<table>
<thead>
<tr>
<th>12. Justification (Explanation of mission Requirements in Detail)</th>
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<table>
<thead>
<tr>
<th>13. Signature of Requester</th>
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### TRANSPORTATION OFFICE ACTION

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<th>Disapproved</th>
<th>If Assets Avail</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Reimbursable</td>
<td>Non-Reimbursable</td>
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</tbody>
</table>

Transportation Officer: ________________________________

---

FS Form 833

Previous edition is obsolete.
**SPACE/RELOCATION FORM**

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<tr>
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<tbody>
<tr>
<td>Beeper #:</td>
<td>__________________________</td>
</tr>
<tr>
<td>Proposed Move Date:</td>
<td>__________________________</td>
</tr>
<tr>
<td>New Location:</td>
<td>__________________________</td>
</tr>
<tr>
<td>Old Location:</td>
<td>__________________________</td>
</tr>
<tr>
<td>Movement Control Number:</td>
<td>__________________________</td>
</tr>
<tr>
<td>(Assigned by Space Committee)</td>
<td>__________________________</td>
</tr>
<tr>
<td>Movement Control Number:</td>
<td>__________________________</td>
</tr>
<tr>
<td>(Assigned by the Space Committee)</td>
<td>__________________________</td>
</tr>
<tr>
<td>Date Approved:</td>
<td>__________________________</td>
</tr>
<tr>
<td>Date Returned to Action Officer:</td>
<td>__________________________</td>
</tr>
<tr>
<td>Estimated Total Cost of Move (Total estimates from FMB and IMD):</td>
<td>$ __________________________</td>
</tr>
</tbody>
</table>

**NOTE:** FMB requires a minimum of 4 weeks advance notice of move in order to accomplish all possible required actions on customer requests.

Is the move within building 4300/4301?  
- [ ] YES  
- [ ] NO  
If NO, what building? __________________________

1. **CADD DRAWINGS**
   - Has a written request for a CADD drawing been requested from FMB?  
     - [ ] YES  
     - [ ] NO  
     - Date: __________________________
   
   (Note: Check location of utilities (electric, water, phones) shown on CADD drawing. Clearly detail any necessary changes on CADD drawing and submit to FMB.)

2. **LOCKS**
   - TYPE:  
     - [ ] CARD  
     - [ ] KEY

   Are new locks needed?  
   - [ ] YES  
   - [ ] NO  
   If YES, How many? __________________________

   Are any keys missing?  
   - [ ] YES  
   - [ ] NO  
   If YES, What are the Numbers? __________________________

   (Note: Requests must be routed through PMETS for authorization before FMB can support customer lock requests.)

3. **SIGNS**

   Customers must provide a detailed list that includes sign size, location, content, correct spelling and other descriptive and pertinent information. It is recommended that customers provide sketches detailing special signs needs. If signs need to be removed, the removal date has been scheduled with FMB for: __________________________.

4. **ESTETICS:**
   - Painting:  
     - [ ] YES  
     - [ ] NO  
   - Floor Cleaning:  
     - [ ] YES  
     - [ ] NO

   Do personal and/or professional items need hanging or removed?  
   - [ ] YES  
   - [ ] NO

   POC: __________________________  
   Phone Number: __________________________

   Room Number(s): __________________________

   (Note: Per Commander's Policy #98-42 No more than 5 items will be hung in each office.)

5. **HOUSEKEEPING**

   Will this move alter housekeeping services?  
   - [ ] YES  
   - [ ] NO  
   - [ ] UNKNOWN (contact FMB for guidance)

6. **SPACE USE**

   Are new areas going to be used for a purpose other than original intent (i.e., patient room will now be used for office space)?  
   - [ ] YES  
   - [ ] NO  
   If YES, what type of changes are needed (by room number)? __________________________

7. **SAFETY OFFICER**

   Date walkthrough with Safety Officer scheduled: (8-2432) __________________________

For answers to questions, please contact the Chief, Facilities Management Branch, at 8-2141.
**EQUIPMENT MANAGEMENT BRANCH CHECK LIST**

<table>
<thead>
<tr>
<th>Medical Equipment</th>
<th>Property Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Location:</td>
<td>New Phone Numbers:</td>
</tr>
<tr>
<td>Electrical</td>
<td>New Section/Department</td>
</tr>
<tr>
<td>Requirements:</td>
<td>Name:</td>
</tr>
<tr>
<td>Voltage</td>
<td>Requirements for new</td>
</tr>
<tr>
<td>Amps</td>
<td>hand receipt:</td>
</tr>
<tr>
<td>Water: Hot</td>
<td></td>
</tr>
<tr>
<td>Cold</td>
<td></td>
</tr>
<tr>
<td>Medical Gasses:</td>
<td>Oxygen</td>
</tr>
<tr>
<td></td>
<td>Vacuum</td>
</tr>
<tr>
<td></td>
<td>Med Air</td>
</tr>
<tr>
<td></td>
<td>Nitrous</td>
</tr>
<tr>
<td></td>
<td>Turn-in of Excess</td>
</tr>
<tr>
<td></td>
<td>Property:</td>
</tr>
<tr>
<td></td>
<td>Hand Receipt Number:</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MEDICAL MATERIEL BRANCH CHECK LIST**

<table>
<thead>
<tr>
<th>Current Supply Room #</th>
<th>Shelving Issues:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Future Supply Room #</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notified Medical Materiel Branch of movement date?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Linen Storage Room #</th>
<th>Future Linen Storage Room #</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SSSC Storage area adequate?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinate use of dollies, etc., necessary?</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

**MILITARY & CIVILIAN PERSONNEL OFFICE CHECK LIST**

<table>
<thead>
<tr>
<th>Pre-move coordination with Chief, Civilian Personnel Officer?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Union coordination completed:</th>
<th>Rating Scheme Reviewed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

**INFORMATION MANAGEMENT DIVISION CHECK LIST**

<table>
<thead>
<tr>
<th>LOCATION FROM (Include ALL Existing Room and Phone Numbers):</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Use additional sheets of paper if necessary) (Est. $150 per phone drop)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Room #</th>
<th>Current Occupant/Use</th>
<th>Phone Type</th>
<th>Single/Multi Line</th>
<th>Existing Jack?</th>
</tr>
</thead>
</table>

| LOCATION TO (Include ALL Future Room Numbers): |

<table>
<thead>
<tr>
<th>Room #</th>
<th>Proposed Occupant/Use</th>
<th>Phone Type</th>
<th>Single/Multi Line</th>
<th>Existing Jack?</th>
</tr>
</thead>
</table>

**LOCAL AREA NETWORK (LAN)**

<table>
<thead>
<tr>
<th>Room #</th>
<th>Current #</th>
<th># Required</th>
<th># Available</th>
<th>Notes:</th>
</tr>
</thead>
</table>
MR 40-61, 25 Aug 03

CHAPTER 4
MATERIEL MANAGEMENT BRANCH (MMB)

SECTION I. GENERAL

4-1. PURPOSE. To provide policy and procedure for obtaining supply support. MMB serves as the Installation Medical Supply Activity (IMSA) for Fort Sill and all units and activities within the Fort Sill area support mission as well as the Supply Support Activity (SSA) for RACH and serves as the focal point for all RACH expendable purchases.

4-2. MMB SUPPORT CONCEPTS:

a. General Support (GS) for expendable, durable and nonexpendable medical supplies and equipment (Class VIII) to all units and activities located within the Fort Sill Area Support mission geographic coverage area.

b. Direct Support (DS) to RACH for expendable, durable and nonexpendable medical supplies (Class VIII) on an ASL/NSL basis, and for Class II and IV supply support on a NSL basis.

c. Maintain an Authorized Stockage List (ASL) of commonly used expendable/durable medical supplies for immediate issue on a reimbursable basis: receive, store, and deliver supplies on a schedule to RACH customers.

d. MMB primarily obtains supplies using one of the procurement methods below (note: purchase methodology is in order of precedence):

(1) Prime Vendor (PV) – a Defense Support Center Philadelphia (DSCP) regional contract with a commercial vendor. MMB electronically orders commercially available medical items on a fill-or-kill basis. PV is the preferred method of procurement for items available through the program. For an overview of the PV program, visit DSCP’s website at http://dmmonline.dscp.dla.mil/medsurg/gen2.asp

(2) Electronic Catalog (ECAT) – a DSCP clearing house for several contracts with various commercial vendors. MMB electronically orders commercially available medical items through ECAT. ECAT has equal preference as PV. An overview of the ECAT program is available at http://dmmonline.dscp.dla.mil/orderprod/orderhome.asp

(3) Depot – DSCP managed wholesale supply system for military unique items and some other hard-to-get supplies. MMB electronically orders military unique and other products utilizing MILSTRIP procedures through the depot system. An overview of military depot can be viewed at http://dmmonline.dscp.dla.mil/medsurg/msdepot.asp

(4) Decentralized Blanket Purchase Agreements (DBPA) – various Federal Supply Schedule (FSS), General Services Administration (GSA) and Veterans Affairs (VA) contracts for pharmaceuticals and medications. MMB places manual delivery orders with specific vendors for items on contract.

(5) Local Contracts – local contracts are administered by Great Plains Regional Contracting Office located at Fort Sam Houston, Texas. MMB electronically (via TAMMIS) or manually (PR Web) places orders for supplies or equipment to the contracting office.

(6) International Merchant Procurement Authorization Card (IMPAC) – also known as “Micro Purchase” or “Credit Card”; medical items not available through any other approved source (paragraph 4-2d(1) through 4-2d(5) above) may be purchased with IMPAC, if the vendor accepts VISA as a method of payment. MMB manually places an order with a vendor (generally a retailer or distributor) and arranges delivery. IMPAC purchase is the least desirable method of procurement.
4-3. CUSTOMER ASSISTANCE. MMB Customer Assistance is located in room GD112 in the basement of building 4300. Office hours are from 7:30 to 4:00 daily, except for weekends, federal holidays and training holidays. Telephone numbers are 458-2121 (Customer Assistance) and 458-2230 (Medical Supply Warehouse).

4-4. DEFINITIONS. Refer to appendix A, located at the end of this chapter, for acronyms and definitions that will be helpful in understanding logistics terminology.

4-5. AUTHORIZATION TO REQUEST OR RECEIVE MEDICAL SUPPLIES.

a. Establishing and Maintaining an Account:

(1) Upon appointment, commanders or accountable officers will send a copy of Assumption of Command orders or appointment memorandum to:

Reynolds Army Community Hospital
CDR USA MEDDAC
4301 Mow-Way Road
ATTN: MCUA-LMB (Materiel Management Branch)
Fort Sill, OK 73503-6300

RACH Ward/Clinic/Activity OICs will deliver appointment orders to MMB customer service.

(2) Notice of Delegation of Authority, DA Form 1687, will accompany commander's Assumption of Command orders or accountable officer's appointment memorandum for narcotics and/or nonexpendable medical equipment/equipment sets. Customers are required by AR 710-2 to keep signature cards current; they expire one year from the date issued. Figure 4-1 gives instructions and an example for the preparation of this form.

(3) Each individual authorized to request and/or receive expendable/durable medical supplies will be issued a Signature Card, DD Form 577, as determined by the responsible or accountable officer or RACH Ward/Clinic/Activity OIC. This authorization is only valid for expendable/durable supplies not requiring formal accountability at the user level. Figure 4-2 provides instructions and an example for the preparation of this form.

4-6. CONTROL AND USE OF ISSUE PRIORITY DESIGNATORS (IPD).

a. IPDs are used in conjunction with an organization's Force Activity Designator (FAD) and Urgency of Need Designator (UND) to convey how urgent a supply request is. Keep in mind that high priority (HP) requests take priority over normal requests; other organizations will be adversely affected by inappropriate use of HPs. Any costs associated with expediting HP supply requests will be born by the requestor.

b. RACH has been determined to be a FAD 3 organization; IPDs authorized for use by the MEDDAC/DENTAC are 13, 06, 03 and 03 life or death, as follows:

(1) IPD 13 is used for all routine supply requests. Routine requests for standard stocked warehouse items will normally be filled within two business days. A priority other than IPD 13 should rarely be needed for items stocked in the warehouse or provided by PV. Routine requests for standard non-stocked items that must be ordered from the depot take approximately 30 days to receive. Routine requests for nonstandard (local purchase) items can take up to 45 days.

(2) IPD 06 is used when materiel is needed for immediate use and without which the ability of the unit to perform its mission or patient care will be impaired. This priority should only be used to order a sufficient quantity of an item to satisfy immediate requirements and should never be used for stockage or replenishment requests.
Supplies can normally be obtained within two weeks using this priority and within days if using PV. Unit Commander/Property Book Officer and MSO must authenticate the use of IPD 06 prior to submission to IMSA.

(3) IPD 03 is used when materiel is needed for immediate use and without which the unit or activity is unable to perform its mission. Unit Commander/PBO must authenticate the use of IPD 03 prior to submission to IMSA.

(4) IPD 03 “life or death” requires a physician’s authorization and represents a dire emergency. IPD 03 is used in situations when medical supplies are needed on an emergency basis to save life or limb. Unit Commander/PBO must authenticate the use of PD 03 prior to submission to IMSA.

SECTION II. MEDICAL SUPPLY SUPPORT

4-7. REQUESTING MEDICAL SUPPLIES AND EQUIPMENT.

a. There are several ways customer requests can be inputted into the supply system; direct customer input using the TAMMIS Remote order entry screen(s), handheld terminal (HHT) scanning and upload, Defense Medical Logistics Standard System (DMLSS), TAMMIS Customer Assistance Module (TCAM) or paper requests. These methods of requesting supply support are explained below.

b. Submitting requests via direct customer input using the TAMMIS remote order entry screen(s).

(1) This option is available to customers that have been trained in the use of the TAMMIS remote order entry system and have a username assigned. Access can be obtained via a TELNET connection using a computer modem or a Local Area Network (LAN) connection. Detailed procedures for entering requests in this manner are contained in MEDCOM publication TAMMIS REMOTE CUSTOMER GUIDE or basic guidance is located on the RACH Intranet at URL https://143.83.121.235/logdiv/INDEX.HTM#pubs then click on TAMMIS REMOTE ACCESS.

(2) This procedure/method of submitting supply requests is available for expendable/durable items that are not stocked on carts (cart replenishment requests are inputted by HHT upload), but needed by the unit, activity, ward or clinic. Users must be careful to include all information necessary for acquisition when using this method; reviewing and cataloging is a laborious process.

(a) Requests for nonexpendable equipment or items requiring additional approval/justification will not be submitted electronically using this procedure. These types of requests submitted electronically will be rejected by MMB. All requests for non-expendable equipment items must come from the appropriate PBO.

(b) The IMSA is required to perform a technical edit of all local purchase requests to determine if the item can be converted to a NSN request or supported via PV contract.

(c) The Accountable Officer (Medical Supply Officer (MSO)) will determine what items will be locally purchased, the appropriate source of supply and method of procurement.

c. Submitting requests via HHT upload (wards and clinics only):

(1) HHT uploads are performed by Materiel Distribution Section (MDS) personnel on a scheduled basis for wards and clinics that have established exchange carts and/or cart levels as their primary means of obtaining medical supplies. All HHT upload/cart replenishment requests are handled as routine (IPD 13) orders.

(2) Ward/clinic OICs and/or NCOICs are responsible for identifying supplies required to adequately meet their day-to-day medical supply requirements, consistent with their activities’ mission and budgetary constraints.
Ward/clinic OICs/NCOICs should review their cart/par levels at least semi-annually or upon change of mission/function or patient profile. If changes are requested to cart levels or items stocked (adding or deleting) the activity will submit a memorandum to the Customer Service Section, Materiel Branch. See Figure 4-3 for a template memorandum.

(3) MDS personnel will adjust customer levels in TAMMIS and affix barcode labels to the customer's storage carts and/or shelving for inventory purposes.

(4) Supply cart labels will be changed or removed **ONLY** by MDS personnel; activity personnel will not remove or change cart labels at any time.

d. Submitting requests through DMLSS (selected RACH activities only):

(1) Selected activities are authorized to submit medical supply requests directly to a PV through DMLSS; eligibility for this order entry and delivery method is determined by the contract administered by DSCP.

(2) Selected activities may use DMLSS as an order-entry point to create demands against TAMMIS.

(3) Instructions for using the DMLSS are contained in EDS D/SIDDOMS publication 401-111-005C.

e. Submitting requests through TAMMIS Customer Assistance Module (TCAM) software. Active duty units may use the TCAM software to create and upload medical demands. Instructions for using TCAM software interface are contained in USAMISSA publication AISM 25-HKG-RZS-TCAM-VDD.

f. Submitting requests on paper documents: Requests can be submitted on several approved forms, depending on the type of activity you are and the type of materiel required.

(1) Request for Issue or Turn-In, DA Form 2765-1, may be used to request any cataloged item. Figure 4-5 gives instructions and an example for the preparation of this form.

(2) Activities may request expendable and durable medical supplies utilizing the customer reorder listings available on request. Use of the reorder listing facilitates request processing and eliminates the need to prepare individual item requests. Figure 4-4 gives instructions and an example for the preparation of this form.

(3) Purchase Request and Commitment, DA Form 3953, must be used to submit requests that require additional approval or special handling or processing. For example, nonexpendable equipment, maintenance significant items, ADPE, copying, binding or duplicating equipment, radioactive material, commercial publications, heraldic items, etc. See subparagraph (4-8) below for required authorizations for a specific type of item. **EMB will process requests for nonexpendable equipment, standing orders, nonpersonal services, professional memberships and subscriptions to periodicals and software updates for RACH customers using DHP funding.** All approval authorities will have two working days to evaluate requests; if more time is needed to investigate a matter further the requestor will be notified. Figure 4-7 is a sample of DA Form 3953 and Flowchart, and figure 4-8 is a sample of OF Form 336.

4-8. Approval authorities for submitting DA Form 3953:

a. The Chief, Information Management Division (IMD) is responsible for determining hardware and software compatibility of ADPE items requested for the automated and telephone systems of MEDDAC.
b. The Administrative Officer, Headquarters, is responsible for reviewing and approving requests for copiers and rubber stamps.

c. The Health Services Librarian is responsible for reviewing all requests for books, book sets, commercial publications and professional periodicals; Librarian may select the source of supply.

d. The Chief, EMB is responsible for determining what items are non-expendable (hand receipt) or maintenance significant, and issuing nonexpendable document numbers for those transactions.

e. Unauthorized Commitments must be prepared on DA Form 3953 accompanied by a FSH Form 105*-E (DOC), reviewed by the individual's immediate supervisor. See paragraph 4-12 for detailed instructions on preparing this documentation.

f. The Customer Service Representative is responsible for acting as the point of contact for all customers submitting DA Form 3953 as a request to the MSO. There are other miscellaneous approvals that may be required depending on the specific item requested, but are too numerous to list. Customers should contact the Customer Service Representative at 458-2122 for additional guidance.

g. All requests submitted on DA Form 3953 will be hand carried to the MMB Customer Service Representative in 2 copies. The document number and Julian date must match the date of submission. PBO will submit requests for nonexpendable items and provide a copy of the request with the nonexpendable document number annotated to the customer.

4-9. EMERGENCY REQUESTS (PD 03).

a. For stocked and non-stocked standard items, prepare a Request for Issue or Turn-In, DA Form 2765-1, and bring it to MMB for processing as a walk-through request. Stocked items will be immediately issued. Non-stocked or temporarily out-of-stock items will be procured in the most expeditious manner available. Figure 4-5 gives instructions and an example for the preparation of this form.

b. For nonstandard items, prepare DA Form 3953 and bring it to MMB for immediate processing through the Great Plains Regional Medical Command (GPRMC) Directorate of Contracting (DOC) or consideration for credit card purchase. All appropriate authorizing signatures are mandatory as noted above. Figure 4-7 gives instructions and an example for the preparation of this form.

4-10. REQUESTING SUPPLIES AFTER NORMAL DUTY HOURS.

a. Activities requiring emergency medical materiel re-supply after normal duty hours must first try to obtain the item required from the other activities in the hospital. If the item required is unavailable from any other activity in RACH and further assistance is needed, contact the NCOD. The NCOD will contact the MDS on-call person using the radio pager system. The MDS on call pager number and the current roster of on call MDS personnel are in the Administrative Officer of the Day and NCOD instruction books.

b. Once contacted, the MDS on call person is responsible for determining if the needed supplies are available in the MDS warehouse. If the supplies are available, the on call person will issue the supplies to the requesting activity, record the issues in the Over the Counter log and notify the NCOD.

c. If the needed supplies are not available in the MDS warehouse, the on call person will inform the NCOD and the following measures must then be taken:
(1) The activity requiring the item will contact the corresponding activity at one of the following local hospitals: Comanche County Memorial Hospital, Southwestern Medical Center, or the USPHS Indian Hospital to borrow the item. There is a professional understanding in place that allows for borrowing and replacing items between RACH and these hospitals.

(2) If the item is located, the activity will make arrangements with the off post hospital (location, time and point of contact) to pick up the item. The NCOD will contact the Patient Administration Division (PAD) on call person who will be responsible for using the duty vehicle to pick up the item at the off post hospital. The PAD on call will inform the NCOD when the item has been picked up and delivered to the activity.

(3) The activity must ensure that all the pertinent information on the item is captured. This includes the nomenclature, stock number or catalog number, manufacturer, unit of issue, and quantity. The activity must then supply MMB Customer Service with all the information obtained from the item on the next duty day.

(4) The customer will then order the item that was borrowed and return it to the local hospital as soon as possible with a note of thanks.

4-11. STATUS OF DUES OUT AND TRANSACTION HISTORY: The status of all customer requests will be provided monthly to each customer in 2 forms. Each request will be listed on the Customer Transaction Register for completed requests, or the Customer Due Out Report for due out requests. Figures 4-10 and 4-11 respectively give instructions for interpreting and an example of each of these reports. Customers should follow the instruction attached to each of these recurring reports to appropriately respond to the Due-Out Listing. Contact the point of contact listed on the memorandum for additional guidance.

4-12. UNAUTHORIZED COMMITMENTS. Contracting Officers (KO) and IMPAC Card Holders are the only officials authorized to commit the government to purchase any specific items from a specific vendor. RACH is committed to placing emphasis on prevention of unauthorized commitments; however, should an unauthorized commitment occur, the following actions are required:

a. The individual making the unauthorized commitment must complete Items 1 and 2, Section A of FSH Form 105*-E, REQUEST FOR APPROVAL OF UNAUTHORIZED COMMITMENT, documenting the circumstances surrounding the transaction (see figure 4-14) and forward the completed form to his/her immediate supervisor along with an original DA Form 3953 (figure 4-15), and DD Form 250, Receiving Report, (figure 4-16).

b. The individual’s supervisor will complete the appropriate review, sign all three forms and forward the entire packet to Chief, Logistics Division for additional processing. RMD will certify that funding was/was not available at the time of the unauthorized commitment and forward it to the Chief, Logistics Division, for administrative review.

c. The Chief, Logistics Division, will perform a technical review of the packet (FSH Form 105*-E, DA Form 3953 and DD Form 250) for completeness, require the appropriate documentation in TAMMIS and/or AMEDDPAS, application of Standard Document Number and pass through RMD Budget Office to the Commander for completion of Section C, FSH Form 105*-E.

d. The RMD Budget Office will apply the funding line/appropriation data and certify fund availability with a statement that funding was available at the time of the unauthorized commitment.

e. The Commander is required to complete page 3 of the FSH Form 105*-E as well as blocks 34 through 36 on the DA Form 3953, return to Logistics Division for additional processing and transmittal to the Great Plains Regional Contracting Office.
f. The KO is required to perform a review of the documentation, obtain a legal opinion and make a disposition on the unauthorized commitment. Some courses of action available to the KO are:

(1) Ratify/approve the action and produce a Purchase Order.

(2) Recommend approval or disapproval and forward the action to the MEDCOM Contracting Office for disposition.

(3) Disapprove the request and provide disposition instructions IAW Federal Acquisition Regulations (FAR).

g. IMPAC Card Holders are not authorized to ratify (pay for) an unauthorized commitment; only a KO can perform that function, and given the process that is involved, it can sometimes take several months before a vendor is paid.

4-13. REQUESTING CRITICAL ITEMS BE STOCKED IN THE WAREHOUSE.

a. Critical Items – wards and clinics must identify critical items that will be placed in stock, regardless of demand history. Critical items are those expendable supply items that must be on hand at all times that directly affect patient health and welfare, without which, a patient could suffer loss of life or limb. Critical items have no substitutes.

b. Core items are those items the hospital routinely consumes that must also be maintained, but may have substitutes, and do not necessarily need to be in the warehouse at all times. The decision to stock core items in the warehouse will be consistent with anticipated delivery times (OST) and actual consumption/usage data.

c. Items that customers wish to be stocked must be requested on a memorandum. Figure 4-9 gives instructions and an example for the preparation of this memorandum. These items must also experience some usage, and cannot be stocked in quantities that will allow it to expire on the shelf. If an item is stocked by customer request and experiences no usage, all requested stocks will be force issued and costed to the customer after a six-month period. If the clinic/ward OIC deems the material a critical item, replenishment will occur.

d. Demand Supported Stockage - Medical items with at least six customer demands in a year will automatically be considered for stockage in the Materiel Branch warehouse. Items provided on a next-day basis by a PV will normally not be stocked in the warehouse unless it is issued in unit-of-measure or a fast moving item.

4-14. TURN-IN PROCEDURES

a. Drugs (other than Note Q and R narcotics), biological, reagents, unused needles and syringes, and sutures determined to be unsafe or unsuitable for use will be turned in to the IMSA using DA Form 3161 for destruction. Figure 4-13 gives instructions and an example for the preparation of this form.

(1). MTO&E units that have the capability of performing their own destruction will do so, after the DA Form 3161 for destruction is reviewed for accuracy and approved by the Quality Inspection Specialist. The completed destruction document is suitable to be used as a voucher for dropping the material from accountability. Figure 4-13 also provides instructions and an example for the preparation of this form.

(2). Wards/clinics/activities and MTOE/TDA units that do not have the capability of performing their own destruction will prepare the DA Form 2765-1 for destruction and have it reviewed and approved by the Chief of Preventive Medicine prior to turn-in to the IMSA. Figure 4-6 gives instructions and an example for the preparation of this form.
b. Excess serviceable medical supplies will be turned in to the IMSA utilizing DA Form 2765-1 as a turn-in document. A separate form is required for each item. Figure 4-6 gives instructions and an example for the preparation of this form. It will be the responsibility of the MMB staff member receiving the supplies to ensure documentation is prepared prior to accepting stock for Chief, MMB.

c. Expired or unserviceable supplies that are stocked by MDS supported activities will be removed from all exchange carts at the time of inventory by Materiel Handlers. Activities will prepare DA Form 2765-1 as a turn-in document and give the item and document to the Materiel Handler. Figure 4-6 gives instructions and an example for the preparation of this form. It will be the responsibility of the Materiel Handler to ensure documentation is properly prepared prior to accepting stock for Chief, MMB.

d. Medical equipment will be Technically Inspected (TI) for serviceability by the EMB before turn-in to the IMSA.

e. Medical Sets, Kits and Outfits (SKO) will have perishable/shelf life items removed, which will be turned in separately following the guidance of a or b above. The appropriate publication for the end-item (TM, SC, Packing List) and a shortage annex will accompany the turn-in for the SKO.

f. The Chief, MMB will determine if credit will be issued for turned-in excess and expired materiel.

4-15. MEDICAL MATERIEL COMPLAINTS.

a. Medical Materiel Complaints will be submitted to MMB in memorandum format (see Figure 4-12 for format) for items of medical materiel found to be injurious or unsatisfactory for its intended purpose. All items will be thoroughly evaluated by medical, supply and maintenance personnel prior to submission of a Medical Materiel Complaint.

NOTE: Upon submission of a complaint, clinicians will make every effort to preserve evidence.

b. CLASSIFICATION. Complaints concerning defective or unsatisfactory medical materiel will be classified IAW AR 40-61 as follows:

Type I Complaints.

(1) Medical Materiel Complaints will be submitted on supplies or equipment, determined by use or test to be harmful or defective to the extent that its use has or may cause death or illness.

(2) Immediate action must be taken to report materiel as a Type I Complaint. Only a medical or dental officer familiar with the item can initially classify the complaint as Type I. The item should be immediately suspended from use and all quantities stored in a secure place until disposition instructions are received.

(3) Due to the immediate attention given to Type I complaints by DSCP and USAMMA, medical and administrative personnel must carefully ascertain and evaluate all facts to avoid unnecessary delay or cause undue alarm. MMB personnel will complete the online form the customer must supply all information required on the SF Form 380; coordination with Medical Maintenance will be effected if equipment is involved. The person initiating the complaint should also be available to respond to inquiries about the problem encountered.

Type II Complaints.

(1) These complaints are used to report materiel other than equipment, which is suspected of being harmful, defective, deteriorated, or otherwise unsuitable for use.
(2) Take expeditious action to report such items and to suspend their issue and use.

Type III Complaints.

(1) These complaints relate to equipment, which is determined to be unsatisfactory because of malfunction, design defects (attributable to faulty materiel, workmanship, or quality inspection), or performance.

(2) A Type III complaint does not necessarily require a suspension of the item.

(3) A Type III complaint has a 48-hour time limit for submission.

4-16. DUMMY DEPARTMENT OF DEFENSE ACTIVITY ADDRESS CODES (DODAACs).

   a. Wards, clinics and offices identification is provided through the use of individually assigned dummy DODAACs in the form of YME@##, where @ represents a letter and # can represent a letter or numeral. A dummy DODAAC and serial number block is assigned to each delivery address (clinic/ward) within RACH, in coordination with the RMD.

   b. Dummy DODAACs are also assigned to customer carts/par level shelves using the scheme YME###, where # always represents a numeral. Cart dummy DODAACs are used by Storage & Distribution personnel when they inventory the customer cart/par level areas.

   c. Each dummy DODAAC is unique to a ward/clinic/activity within the hospital and is assigned a block of serial numbers in TAMMIS for use; it is very important that customers use the proper dummy DODAAC and assigned serial number range. Questions about dummy DODAACs or their associated serial number range should be addressed to the Customer Assistance Section at (580)458-2122.

4-17. MEDICAL GAS SUPPORT TO RACH CUSTOMERS

   a. Compressed gas cylinders and liquid nitrogen canisters will be picked-up from and delivered to each activity by MDS personnel. Customers are not required to bring empty containers to the warehouse. The materiel handler assigned to each area will make the exchange for you as part of their normal daily restocking visit.

   b. Each activity will be required to identify a need for these gases to the materiel handler as they develop. This need must be identified as soon as an each cylinder of compressed or liquid gas reaches the point where it needs to be exchanged. The supply of compressed gases stocked by MMB is limited due to space constraints and safety considerations. If an activity waits until they have more than one empty cylinder on hand, availability problems can arise, not only for that activity, but for others as well. To ensure we can support every activity's needs, please inform the materiel handler as soon as possible of empty cylinders.

   c. Compressed and liquid gas containers must be prepared properly for transport through the facility by each activity. If a compressed gas cylinder will accept a shipping cap, the activity must ensure it is in place on the cylinder before the materiel handler will accept it. Liquid nitrogen bottles must have the dispenser removed and the transport cap in place before they will be accepted. Transporting these containers improperly is a safety hazard.

   d. Liquid nitrogen bottles that have been identified by an activity as needing refilled will normally be picked-up on Tuesday, refilled by the supplier on Wednesday, and returned to the activity on Thursday. Compressed gas will be exchanged daily as needed.
NOTE: All medical gas containers will be exchanged only with the proper safety caps on. Compressed gas cylinders should be stored in an upright secured position at all times. All liquid nitrogen bottles will have the dispensers and gauges removed and replaced with the plastic transport caps. Failure to do so creates an extreme safety hazard and exchange will not be accepted.

4-18. LINEN Supports:

a. Linen users are responsible for:

   (1) Preparing soiled linen for pickup, including not filling laundry bags over 2/3 full.

   (2) Identifying and turning in all unserviceable linen. This will be done by bagging and identifying unserviceable linen separately from soiled linens.

   (3) Proper care and safeguarding of linen.

   (4) Ensuring that all foreign objects are removed from dirty linen prior to turning in for laundering.

   (5) This does not relieve anyone, military or civilian, of the responsibility to preserve, safeguard and protect government-owned linen.

b. Linen accountability and control: MDS personnel will do all linen issues and inventory. MDS personnel will inventory linen cart and re-supply according to established activity linen levels.

c. User Linen Level Determinations: Linen requirements for user activities are expressed in terms of linen levels. Linen levels are determined by actual daily usage (consumption) for each linen item, multiplied by the number of days between linen deliveries.

   (1) Linen levels computed for user activities will be consistent with the objective of maintaining adequate stock for normal operations; contingency and back-up stocks are maintained by MDS.

   (2) Linen level computation by the MDS is directly related to linen use policy. Policy relative to linen use (frequency of bed change, safety level, etc.) will be established and disseminated by the hospital Linen Management Committee. Linen levels are computed by the MDS for approval by the Linen Management Officer (LMO).

   (3) As a means of inventory control, the Chief, MDS will monitor linen levels by conducting frequent analyses of clean linen returns. Since most linen is delivered on an exchange cart basis, carts returned to the MDS with a consistently large quantity of clean linen upon them may mean that the linen levels are too high.

d. Stockage Level Determination:

   (1) The Linen Management Officer will establish a stockage level for each item of linen stocked. This stockage level will be based on requirements to support user linen levels, turn around time for laundry service, safety level and other factors which may, in the opinion of the LMO, bear on the providing of adequate linen support. Stockage levels will be reflected by a pencil entry on DA Form 1296 for hospital-owned linens.

   (2) Adjustments to linen stockage levels will be made by the LMO when user demands increase or decrease. The LMO at the completion of each linen inventory will routinely review established stockage levels.
e. Issue, Turn-in, Repair and Salvage Procedures.

(1) Linen is issued directly to using activities using Cart Exchange or Par level system. Linen Carts fully loaded with linen levels appropriate to respective using activities will be transported to using activities.

(2) Soiled linen will be picked up in all areas of the hospital by 0830 daily. Frequency of pick up will be a matter determined jointly by the MDS and linen users.

(3) If possible, linen requiring repair will be segregated from good stock during the finishing process at the laundry. The user of linen is actually the best person to identify damaged linen and as such should assist in separating good linen from bad linen. Don’t just throw it back into the dirty linen bag. Turn it in. Reject linen bags are provided on the MDS Supply Cart System.

f. Transportation and Handling of Linen.

(1) Mobile linen shelf carts will be used to transport clean linen throughout the hospital. Other carts will be used for the transportation of soiled linen. Care will be taken at all times that clean linen is not moved in the latter conveyances. This linen will be transported in yellow plastic linen bags marked “SOILED LINEN” or cloth yellow linen bags.

(2) Soiled linen will be handled to the minimum extent possible within the hospital. Bagged, soiled linen will be moved quickly through the hospital building directly to the dirty linen room within the hospital for transporting to the laundry. Linen users will place contaminated linen in yellow plastic linen bags marked “SOILED LINEN” or cloth yellow linen bags.

(3) Linen users will take every precaution to assure that medical instruments, needles, syringes, etc., are not intermingled with soiled linen. Since serious injury to linen handling personnel may result from such oversights, every effort will be made to determine the source of such equipment that does find its way into the laundry. The LMO will review cases of such occurrences with the Linen Management Committee.

g. Case and Security of Linen:

(1) As a fundamental means of safeguarding RACH linen assets, each linen item will be distinctively marked and identified at the time it is placed into service. The Chief, MDS will ensure that all items are routed through the seamstress for appropriate marking.

(2) Using activities are responsible for the care and safeguarding of linen items in their possession. Linen in storage will be secured under lock and appropriate key control measures utilized where possible.

(3) Linen items will be used for their intended purpose only. Linen will not be used as rags, unless salvaged by MMB personnel, nor will linen items be cut, torn or mutilated to modify them for another purpose.

(4) Scrubs are not authorized to be taken from or worn outside the facility or storage in lockers.

h. For any complaints pertaining to linen quality or restocking please contact the LMO at 458-2475.

SECTION III. NONMEDICAL SUPPLY SUPPORT (RACH activities only)

4-19. EXPENDABLE OFFICE SUPPLIES.

a. MMB serves as the focal point for procurement and distribution of expendable office products used throughout the hospital.
b. Orders for expendable office supplies will normally be inputted into the Office Products PV by the requestor through their proprietary or commercial web-based order entry system. The Customer Assistance Section will review and approve/reject these requests on an individual basis.

c. Our current supplier (Boise Cascade Office Products; BCOP) will receive orders at any time during the workweek; however, the cutoff for “this week” delivery is Thursday at 2:00 PM. Delivery to MMB is normally accomplished on Friday of each week. MDS personnel will sort, segregate and deliver office supplies to designated requestor(s) by Tuesday of the following week.

d. Order-of-Use for items offered by BCOP: Requestors must order items produced/manufactured by NIB/NISH organizations in the BCOP Government catalog, then GSA contracted items before referring to/ordering from their open-market full-line catalog. If a NIB/NISH or GSA contract item is available that will satisfy the needs of the organization, it must be the item that is purchased.

4-20. OTHER NONMEDICAL SUPPLIES & EQUIPMENT: Other nonmedical supplies and equipment not available from BCOP, or requiring additional approvals will be ordered using the same procedures as medical supplies/equipment in paragraph 4-7 above.
DA Form 1687 is required for:
1 – Nonexpendable Medical Equipment
2 – Controlled Substances

Each unit or activity ordering and receiving nonexpendable medical equipment or controlled substances must submit two copies of DA Form 1687 to MMB. This form will identify those individuals authorized to order and/or receive medical supplies and must be signed by the unit commander/PBO or activity/department chief. A copy of this form is maintained in the warehouse; each pick-up of supplies should be carefully monitored to ensure that only an authorized person receives/picks up the medical supplies.

Figure 4-1: Instructions for preparing and sample DA Form 1687
This wallet-sized form is used to delegate authority to a specified individual to request and/or receive expendable medical supplies, and will be presented before requesting or receiving medical supplies from the IMSA.

Block 1 – Name of individual authorized to request or receive medical supplies
Block 2 – Individuals Grade (Mil) or CIV for Civilian
Block 3 – Date card prepared
Block 4 – Unit or activity designation and address
Block 5 – Signature of individual authorized to request or receive medical supplies
Block 6 – What authority is being granted to the individual.
EXAMPLE: Request and Receive Medical Supplies
EXAMPLE: Receive Medical Supplies
Block 7 – Responsible Officer’s Name (Ward/Clinic OIC, Unit Commander, Battalion PBO)
Block 8 – Responsible Officer’s Grade (Mil) or CIV if Civilian
Block 9 – Signature of Responsible Officer

Figure 4-2: Instructions for completing and sample DD Form 577 (Signature Card).
MEMORANDUM FOR Materiel Branch

SUBJECT: Request to Modify Supply Stockage on Cart for ____________________________ (Name of Activity)

1. Request the following new item be added to cart number YME______

<table>
<thead>
<tr>
<th>NSN/MCN/MIN</th>
<th>Nomenclature</th>
<th>Common Name</th>
<th>Mfg Cat No</th>
<th>Supplier Reorder No</th>
<th>Unit Price</th>
<th>Usage per Month</th>
<th>Unit of Issue</th>
<th>Quantity per U/I</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Item on DAPA? (Yes/No/Unknown) PRIME VENDOR Coordination? (Yes/No)

SOS (Name & Address) ____________________________________________

(Include Telephone Number and POC) ________________________________

2. Request the following item be removed from cart number YME_____

<table>
<thead>
<tr>
<th>NSN/MCN/MIN</th>
<th>Nomenclature</th>
<th>Reason for deletion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I UNDERSTAND THAT I MAY BE REQUIRED TO PURCHASE ANY AND ALL SUPPLIES LEFT IN STOCK IN LOGISTICS DIVISION AND AT OUR PRIME VENDOR.

3. Request the stockage level for the following item be changed for cart number YME______

<table>
<thead>
<tr>
<th>NSN/MCN/MIN</th>
<th>Nomenclature</th>
<th>Unit of Issue</th>
<th>Increase/Decrease Cart Level To</th>
<th>Reason/Justification for Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. POC for this action is __________________________ Telephone Number __________________

5. Reviewed by __________________________ Telephone Number __________________

(Branch/Division Chief/NCOIC)

6. Logistics Division Routing/Processing Check List

<table>
<thead>
<tr>
<th>CATALOGER</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COPY FURNISHED ITEM MANAGER</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CART LEVEL MODIFIED</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 4-3: Template Memorandum to Change Cart Levels
1. Take one copy (one two-part carbon set) of the Customer Reorder List to your supply room. The Customer Reorder List will be in nomenclature, stock number or location sequence (customer choice).

2. Compare the quantity on-hand to the authorized stockage level (15 Day Use Column of the Customer Reorder Listing). If the quantity on-hand is below the authorized level write the quantity short on the reorder list under "REQ QTY" (round up to unit-pack).

**NOTE:** Only cataloged items with standard NSNs or locally assigned MCNs may be reordered on the Reorder List.

3. When you finish writing down the items you require, check to see if you have duplicated a previous order that has not yet been received. If you have duplicated an earlier order, cross off or reduce the quantity being ordered.

4. In the spaces provided in the heading of the reorder list, write in the Julian date and the correct APC.

5. Assign a four position document number serial number to each item requested under "DOC #". Use your assigned block of numbers and use consecutive numbers, list numbers in sequence starting with the first item.

6. Send one copy of the reorder list to Medical Supply to place your order. Keep one copy of the reorder list as per the document register file.

7. Complete your document register when status and supplies are received.

8. At the end of each copy of the reorder list there are two pages with blank reorder lines, save these and use them when requesting only a few items.

9. New Customer Reorder Lists can be requested from Medical Supply. When lists and labels with new item numbers are received discard the old lists.

10. When an item is requested at least once in the last six months, it will appear on the next reorder list.

11. Provide Medical Supply with a list of items to add or change locations. Only a DODAAC, stock number, and new location (1 to 5 positions) is required for each item requiring a change. One of the reorder lists can be used annotating location under column heading "Location" (please print legibly in red ink).
FIGURE 4-4: Instructions for reading and sample Customer Reorder List (cont)
Request for Issue or Turn-In as a Request for Issue

1. Request For Issue Or Turn-In, DA Form 2765-1, may be used by the customer to request expendable standard items and stocked expendable nonstandard items of supply. It will be manually prepared by the customer for the initial request of items of a recurring or nonrecurring nature.

   a. Block A - Enter Materiel Management Branch, Logistics Division, RACH
   b. Block B - Enter unit or activity designation.
   c. Block 4 & 5 - Enter National Stock Number – (6505-00-104-9000).
   d. Block 7 - Enter Unit of Issue – (BT).
   e. Block 8 - Enter quantity requested – (1).
   f. Block 9 & 10 - Enter DODAAC – (YME123).
   g. Block 11 & 12 - Enter Julian Date and Serial Number – (8321-0001).
   h. Block 13 - Enter Recurring or Nonrecurring Demand – (R or N).
   j. Block M - Enter unit price – (1.00).
   k. Block N – Enter total price – (1.00).
   l. Block O – Enter full Item Description – (Alcohol).
   m. Block 20 – Enter Priority – (13).
   n. Block P – Enter Publication authorizing request (Ex; SC, TDA number, TOE number)

Figure 4-5: Instructions for preparing and sample Request For Issue Or Turn-In, DA Form 2765-1, as a Request for Issue.
Figure 4-5: Instructions for preparing and sample Request For Issue Or Turn-In, DA Form 2765-1, as a Request for Issue (cont).
1. Request for Issue or Turn-In, DA Form 2765-1, will be used by the customer to turn-in expendable standard items and stocked expendable nonstandard items of supply. The customer will manually prepare it.

   a. Block A - Enter Materiel Management Branch, Logistics Division, RACH
   
   b. Block B - Enter unit or activity designation.
   
   c. Block 4 & 5 - Enter National Stock Number – (6505-00-104-9000).
   
   d. Block 7 - Enter Unit of Issue – (BT).
   
   e. Block 8 - Enter quantity being turned-in – (1).
   
   f. Block 9 & 10 - Enter DODAAC – (YME123).
   
   g. Block 11 & 12 - Enter Julian Date and Serial Number – (8321-0001).
   
   h. Block L – Enter Account Processing Code – (Z123).
   
   i. Block M – Enter unit price. – (1.00).
   
   j. Block N – Enter total price – (1.00).
   
   k. Block O – Enter full Item Description – (Alcohol).
   
   l. Block P – Enter reason for turn-in – (ex; excess, unserviceable).
Figure 4-6: Instructions for preparing and sample Request for Issue or Turn-In, DA Form 2765-1, as a request for turn-in (cont).
1. Request for select items will be submitted on a Purchase Request And Commitment, DA Form 3953 if necessary.

**OF Form 336, Continuation Sheet (figure 4-5)** will be used. Fill out the form as directed in this example.
Figure 4-7: Instructions for preparing and sample Purchase Request And Commitment, DA Form 3953, and Flowchart (cont).
Continuation Sheet

1. This form will be used as a continuation sheet for requests submitted on DA Form 3953. Follow the example below as a guide when completing the form. Ensure you submit 2 copies of the continuation sheet with the DA Form 3953.

![Continuation Sheet Image]

Figure 4-8: Instructions for preparing and sample Continuation Sheet, OF Form 336.
MEMORANDUM THRU: Chief, Logistics Division

MEMORANDUM FOR: Chief, Materiel Management Branch

SUBJECT: Request for Local Stockage

1. Request the following item be considered for stockage in the Medical Supply Warehouse:
   a. NSN:
   b. Nomenclature:
   c. Estimated Monthly Usage:
   d. Number of Times Ordered within the last year:

2. Justification:

3. Source:

4. Point of contact and telephone number.

SIGNATURE OF REQUESTOR

SPECIAL INSTRUCTIONS:
Only one item per memorandum
Requestor must be OIC/NCOIC of the activity

Figure 4-9: Template Memorandum Request for Stockage.
Customer Transaction Register

1. Source: Automatically generated as a result of processing TAMMIS Monthly cycle.

2. Frequency: Monthly


5. Application: Provides the customer a complete list of all transactions processed for his/her activity during the previous months cycle. This report should assist the customer in document control.

6. Important information contained on the Transaction Register:
   a. Customer Name
   b. DODDAC
   c. Date of Report
   d. APC (Z account)
   e. Transaction Date
   f. Document Number
   g. Type of Transaction/Reversal
   h. Stock Number
   i. Nomenclature
   j. Unit of Issue
   k. Quantity
   l. Unit Price
   m. Extended Price
   n. Total amount charged to your account this FY.

Figure 4-10: Instructions for reading and sample Customer Transaction Register.
### Customer Transaction Register (cont)

**Page: 1**

<table>
<thead>
<tr>
<th>Date/Ser/Transaction</th>
<th>Item</th>
<th>Ext Nomenclature</th>
<th>UZ Quantity</th>
<th>Unit Price</th>
<th>Extended Price</th>
<th>FY</th>
</tr>
</thead>
<tbody>
<tr>
<td>3162 31621242 Issue</td>
<td>UHMETERLDO</td>
<td>METER PEAK FLO RATE EA EA</td>
<td>2</td>
<td>9.23</td>
<td>18.46</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TRUZONE PEAK FLOW METER FULL RANGE W/ZONE MANAGEMENT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621243 Issue</td>
<td>UM6515012337591</td>
<td>MOUTH PIECE SPIR 100*15G</td>
<td>1</td>
<td>6.00</td>
<td>6.00</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MOUTH PIECE SPIROMETER CARDBOARD 2.625&quot; LG ADJ SZ Laminated 100*5</td>
<td>12</td>
<td>0.38</td>
<td>4.65</td>
<td>03</td>
</tr>
<tr>
<td>3162 31621245 Issue</td>
<td>UM6505014622456</td>
<td>SOD CHL 0.9% 1000ML EA</td>
<td>12</td>
<td>0.38</td>
<td>4.65</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SODIUM CHLORIDE INJECTION USP 0.9% 1000 ML BAG</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621246 Issue</td>
<td>6505-01-467-3022</td>
<td>RINGERS INJ 500ML 24S CS</td>
<td>1</td>
<td>12.35</td>
<td>12.35</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>RINGERS INJECTION LACTATED USP 500 ML BAG 24 PER CASE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621247 Issue</td>
<td>6505-01-267-1483</td>
<td>SUNBURN PREVENTIVE 6OZ BT</td>
<td>12</td>
<td>2.71</td>
<td>32.52</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>FRUIT OF THE EARTH SPF 45 6 OUNCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621254 Issue</td>
<td>6515-01-150-2977</td>
<td>GLOVE PATI EXAM LGTOG PG</td>
<td>1</td>
<td>2.08</td>
<td>2.08</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OBSCURE = CHANGED TO STANDARDIZATION ITEM HS50802</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621255 Issue</td>
<td>6515-01-359-8563</td>
<td>GLOVE EXAM PF LF SMALL BX</td>
<td>1</td>
<td>5.70</td>
<td>5.70</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NITRA-TEX POWDER FREE NITRILE EXAM GLOVE 100/BX SMALL (PETITI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621256 Issue</td>
<td>UM0726355202</td>
<td>GLOVE EXAM PF LF MED BX</td>
<td>4</td>
<td>5.71</td>
<td>22.84</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>NITRA-TEX POWDER-FREE NITRILE EXAM GLOVES MEDIUM</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621258 Issue</td>
<td>6510-00-597-7669</td>
<td>BAND ADH 3/4 X 3/1N BX</td>
<td>10</td>
<td>1.12</td>
<td>11.20</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BANDAGE ADH.75X5 FLESH/CLEAR STER DRESS AFFIXED TO PLA ADH 505</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3162 31621259 Issue</td>
<td>UM6510093555822</td>
<td>BAND ELAST 4.5YDX4* EA EA</td>
<td>30</td>
<td>0.84</td>
<td>25.20</td>
<td>03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BANDAGE ELASTIC FLESH ROLLED 4.5YDX4* WASHABLE PRESSURE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**Figure 4-10:** Instructions for reading and sample Customer Transaction Register (cont).
Figure 4-10: Instructions for reading and sample Customer Transaction Register (cont).
Customer Due Out Report

1. Source: Automatically generated as a result of processing TAMMIS Monthly cycle.

2. Frequency: Monthly


5. Application: Provides the customer a complete list of all transactions processed for his/her activity during the previous months cycle. This report should assist the customer in document control.

6. Key to Daily Customer Transaction Report. (Same as attached.)
   a. Customer Name
   b. DODDAC
   c. Date of Report
   d. APC (Q)
   e. Document Number
   f. Status of Request
   g. National Stock Number
   h. Nomenclature
   i. Unit of Issue
   j. Quantity Cancelled
   k. Quantity Issued
   l. Quantity Due Out
   m. Extended Price

Figure 4-11: Instructions for reading and sample Customer Due Out Report.
Figure 4-11: Instructions for reading and sample Customer Due Out Report (cont).
MEMORANDUM FOR: Chief, Materiel Management Branch, ATTN: Quality Control Section

SUBJECT: Medical Materiel Complaint

1. Activity Submitting Complaint
2. Type Complaint, I, II or III
3. National Stock Number
4. Item Description
5. Name of Manufacturer
6. Source of local purchase items if known, otherwise N/A
7. DLA Contract Number if known
8. Lot Number
9. Serial number (equipment only)
10. Model Number (equipment only)
11. Recommendations and/or additional remarks
12. Action taken

INITIATORS SIGNATURE BLOCK

Figure 4-12: Template Medical Materiel Complaint Memorandum
Figure 4-13: Sample Request For Issue Or Turn-In, DA Form 3161, for destruction.
# Request to Ratify Unauthorized Commitment

## REQUEST FOR APPROVAL OF UNAUTHORIZED COMMITMENT

<table>
<thead>
<tr>
<th>IN THE AMOUNT OF ($)</th>
<th>TO (COMPANY NAME)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOR (SUPPLIES/SERVICES)</td>
<td>COMMITTED (DATE)</td>
</tr>
</tbody>
</table>

## COMMITTING ACTIVITY/UNIT

### PART I - DESCRIPTION OF COMMITMENT AND UNIT COMMANDER'S REVIEW

**AUTHORITY:** Federal Acquisition Regulations (FAR) and Army Federal Acquisition Regulation Supplement (AFARS) 1.002-3

The individual making the unauthorized commitment shall complete Items 1 and 2 of Part I, Section A, provide the required documentation, sign, date, and forward to his/her immediate supervisor for completion of Item 1, Part I, Section B. The immediate supervisor shall then forward the file to his/her Unit Commander, Director, or Activity Chief (as a minimum, this is the first 06 or equivalent in the individual's chain of command) for completion of Items 1 through 4, Part I, Section C. The complete file shall be forwarded through command channels to Director of the supporting installation's Directorate of Contracting. All information will be completed in detail.

### PART I, SECTION A - COMMITMENT CIRCUMSTANCES

(Completed by individual making unauthorized commitment)

1. Statement by Individual Describing Circumstances. (Include what bona fide Government requirement necessitated the commitment, how the commitment was made, why normal procurement procedures were not followed, the benefit received and its value or dollar amount, and any other pertinent facts.)

*FSH Form 105*E  Nov 96  (DOC)*

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Figure 4-14: Sample Request for Approval of Unauthorized Commitment, FSH Form 105*E, page 1.
### PART I, SECTION A - COMMITMENT CIRCUMSTANCES (continued)

2. List and attach all relevant documents (include orders, invoices, and other evidence of the transaction.)

<table>
<thead>
<tr>
<th>Typed Name and Title of Individual Making Unauthorized Commitment</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

### PART I, SECTION B - SUPERVISOR REVIEW

(Completed by immediate supervisor of individual making unauthorized commitment)

1. Comments of Immediate Supervisor of Individual Making Unauthorized Commitment.

<table>
<thead>
<tr>
<th>Typed Name, Title and Organization of Supervisor</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

FSH Form 105*-E

Figure 4-14 (cont’d): Sample Request for Approval of Unauthorized Commitment, FSH Form 105*-E, page 2.
Request to Ratify Unauthorized Commitment

<table>
<thead>
<tr>
<th>PART I, SECTION C - RECOMMENDATION REGARDING CONTRACTUAL RATIFICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Completed by Unit Commander, Director or Activity Chief)</td>
</tr>
<tr>
<td>(As a minimum, this is the first 06 or equivalent in the individual's chain of command)</td>
</tr>
</tbody>
</table>

1. Describe Remedial Action Taken to Prevent Recurrence or State Reason Why Remedial Action is Not Necessary.

1. Describe Disciplinary Action Taken (Include a description of any administrative action to be taken under applicable personnel authority or furnish an explanation of why no disciplinary action was considered necessary.)

3. Recommend Contractual Ratification
   - Appropriately Funded Purchase Request, DA Form 3933, and Material Inspection and Receiving Report, DD Form 250, are forwarded herewith.

4. Do Not Recommend Contractual Ratification
   - Explain Reason

<table>
<thead>
<tr>
<th>TYPED NAME, GRADE, TITLE AND ORGANIZATION OF UNIT COMMANDER</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
</table>

FSH Form 105*-E 3

Figure 4-14 (cont'd): Sample Request for Approval of Unauthorized Commitment, FSH Form 105*-E, page 3.

71
Request to Ratify Unauthorized Commitment

### PART II - CONTRACTING OFFICER'S REVIEW
(Completed by Directorate of Contracting)

The Assigned Contracting Officer Shall Review the File and Proceed as Follows:

1. Determine the adequacy of all facts, records, and documents furnished, and obtain any additional material required.

2. Obtain an opinion from legal counsel as to whether the acquisition is ratifiable under FAR and AFARS 1.602-3, or whether the material should be processed under FAR and DOD FAR Supplement Part 50 (Public Law 85-804), processed as a GAO claim, or otherwise handled.

3. State whether the price involved is considered fair and reasonable and indicate how that determination was made.

4. Determine that sufficient funds are available to pay for acquisition.

5. Prepare a summary statement of facts addressing the foregoing. The statement is to include a recommendation as to whether the transaction should be ratified. Advice against the ratification should include a recommendation as to whether the matter should be processed under FAR and DOD FAR Supplement Part 50 (Public Law 85-804), as a GAO claim, or otherwise handled. (If more space is required, attach plain bond paper.)

<table>
<thead>
<tr>
<th>TYPED NAME AND GRADE OF CONTRACTING OFFICER</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSH Form 105*-E</td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>
Request to Ratify Unauthorized Commitment

<table>
<thead>
<tr>
<th>PART III - FINAL DISPOSITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Completed by Director of Contracting)</td>
</tr>
</tbody>
</table>

Based on the foregoing determination, Request for Approval of Unauthorized Commitment is

1. Actions of $10,000 or Less
   - [ ] Approved (Issue Purchase Order)
   - [ ] Disapproved (Provide Disposition Instructions in Accordance with FAR 1.602.3(d) and AFARS 1.602-3-90)

2. Actions in excess of $10,000
   - [ ] Approval is Recommended
   - [ ] Disapproval is Recommended (See FAR 1.602-3(d) and AFARS 1.602-3-90)

<table>
<thead>
<tr>
<th>TYPED NAME AND GRADE OF DIRECTOR OF CONTRACTING</th>
<th>SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
</table>

FSH Form 105*-E 5

Figure 4-14 (cont’d): Sample Request for Approval of Unauthorized Commitment, FSH Form 105*-E, page 5.
Figure 4-15: Sample Purchase Request and Commitment, DA Form 3953, for an Unauthorized Commitment.
## MATERIAL INSPECTION AND RECEIVING REPORT

The purpose of this form is to record the inspection and receipt of items delivered to the Government. It is the responsibility of the person receiving the items to inspect them for damage and count them against the original packing slip. The items should be stored in a safe and secure location until the receiving report is completed.

### Request to Ratify Unauthorized Commitment

**Figure 4-16: Sample Receiving Report, DD Form 250 for Unauthorized Commitment.**
APPENDIX A
DEFINITIONS AND ACRONYMS:

APC: Account Processing Code – Alphanumeric code used to cost a customers account

BCOP: Boise Cascade Office Products – GSA contracted office products provider selected by GPRMC as the primary source for those items.

EIP: Expendable Issue Point

FC: Fund Code – Used by the SRA to fund inventory/make sales to customers

GPRCO: Great Plains Regional Contracting Office

HHT: Hand Held Terminal – Device used to scan and upload shortages into various automated systems

IMS: Inventory Management Section

MDS: Materiel Distribution Section

MEDCOM: Army Medical Command

NSL: Non-Stockage List

NSN: National Stock Number/NATO Stock Number

PVM: Prime Vendor for Med/Surg Products

PVP: Prime Vendor for Pharmaceuticals

RDD: Required Delivery Date

RO: Reorder Objective

SRA: Stock Record Account

SSSC: Self Service Supply Center

TAMMIS: Theater Army Medical Materiel Information System

TELNET: Telephonic Network

UI: Unit Of Issue

UM: Unit Of Measure

USAMMA: U.S. Army Medical Materiel Agency
FEDERAL SUPPLY CLASSES:

(FSC) FEDERAL SUPPLY CLASS: A 4-digit code that is a commodity classification designed to serve the functions of supply and is sufficiently comprehensive in scope to permit the classification of all items of personnel property. In order to accomplish this, groups and classes have been established for the universe of commodities, with emphasis on the items known to be in the supply systems of the Federal Government.

1005 Guns, through 30 mm
1010 Guns, over 30 mm up to 75 mm
1015 Guns, 75 mm through 125 mm
1020 Guns, over 125 mm through 150 mm
1025 Guns, over 150 mm through 200 mm
1030 Guns, over 200 mm through 300 mm
1035 Guns, over 300 mm
1040 Chemical Weapons and Equipment
1045 Launchers, Torpedo and Depth Charge
1055 Launchers, Rocket and Pyrotechnic
1070 Nets and Booms, Ordnance
1075 Degaussing and Mine Sweeping Equipment
1080 Camouflage and Deception Equipment
1090 Assemblies Interchangeable Between Weapons in Two or More Classes
1095 Miscellaneous Weapons
1210 Fire Control Directors
1220 Fire Control Computing Sights and Devices
1230 Fire Control Systems, Complete
1240 Optical Sighting and Ranging Equipment
1250 Fire Control Stabilizing Mechanisms
1260 Fire Control Designating and Indicating Equipment
1265 Fire Control Transmitting and Receiving Equipment, except Airborne
1270 Aircraft Gunnerly Fire Control Components
1280 Aircraft Bombing Fire Control Components
1285 Fire Control Radar Equipment, except Airborne
1287 Fire Control Sonar Equipment
1290 Miscellaneous Fire Control Equipment
1305 Ammunition, through 30 mm
1310 Ammunition, over 30 mm up to 75 mm
1315 Ammunition, 75 mm through 125 mm
1320 Ammunition, over 125 mm
1325 Bombs
1330 Grenades
1336 Guided Missile Warheads and Explosive Components
1337 Guided Missile and Space Vehicle Explosive Propulsion Units, Solid Fuel; and Components
1338 Guided Missile and Space Vehicle Inert Propulsion Units, Solid Fuel; and Components
1340 Rockets, Rocket Ammunition and Rocket Components
1345 Land Mines
1350 Underwater Mine Inert Components
1351 Underwater Mine Explosive Components
1355 Torpedo Inert Components
1356 Torpedo Explosive Components
1360 Depth Charge Inert Components
1361 Depth Charge Explosive Components
1365 Military Chemical Agents
1370 Pyrotechnics
1375 Demolition Materials
1376 Bulk Explosives
1377 Cartridge and Propellant Actuated Devices and Components
1385 Surface Use Explosive Ordnance Disposal Tools and Equipment
1386 Underwater Use Explosive Ordnance Disposal and Swimmer Weapons Systems Tools and Equipment
1390 Fuses and Primers
1395 Miscellaneous Ammunition
1398 Specialized Ammunition Handling and Servicing Equipment
1410 Guided Missiles
1420 Guided Missile Components
1425 Guided Missile Systems, Complete
1427 Guided Missile Subsystems
1430 Guided Missile Remote Control Systems
1440 Launchers, Guided Missile
1450 Guided Missile Handling and Servicing Equipment
1510 Aircraft, Fixed Wing
1520 Aircraft, Rotary Wing
1540 Gliders
1550 Drones
1560 Airframe Structural Components
1610 Aircraft Propellers and Components
1615 Helicopter Rotor Blades, Drive Mechanisms and Components
1620 Aircraft Landing Gear Components
1630 Aircraft Wheel and Brake Systems
1650 Aircraft Hydraulic, Vacuum, and De-icing System Components
1660 Aircraft Air Conditioning, Heating, and Pressurizing Equipment
1670 Parachutes; Aerial Pick Up, Delivery, Recovery Systems; and Cargo Tie Equipment
1680 Miscellaneous Aircraft Accessories and Components
1710 Aircraft Landing Equipment
1720 Aircraft Launching Equipment
1730 Aircraft Ground Servicing Equipment
1740 Airfield Specialized Trucks and Trailers
1810 Space Vehicles
1820 Space Vehicle Components
1830 Space Vehicle Remote Control Systems
1840 Space Vehicle Launchers
1850 Space Vehicle Handling and Servicing Equipment
1860 Space Survival Equipment
1905 Combat Ships and Landing Vessels
1910 Transport Vessels, Passenger and Troop
1915 Cargo and Tanker Vessels
1920 Fishing Vessels
1925 Special Service Vessels
1930 Barges and Lighters, Cargo
1935 Barges and Lighters, Special Purpose
1940 Small Craft
1945 Pontoons and Floating Docks
1950 Floating Dry-docks
1955  Dredges
1990  Miscellaneous Vessels
2010  Ship and Boat Propulsion Components
2020  Rigging and Rigging Gear
2030  Deck Machinery
2040  Marine Hardware and Hull Items
2050  Buoys
2060  Commercial Fishing Equipment
2090  Miscellaneous Ship and Marine Equipment
2110  Locomotives
2220  Rail Cars
2230  Right-of-Way Construction and Maintenance Equipment, Railroad
2240  Locomotive and Rail Car Accessories and Components
2250  Track Material, Railroad
2305  Ground Effect Vehicles
2310  Passenger Motor Vehicles
2320  Trucks and Truck Tractors, Wheeled
2330  Trailers
2340  Motorcycles, Motor Scooters, and Bicycles
2350  Combat, Assault, and Tactical Vehicles, Tracked
2410  Tractor, Full Tracked, Low Speed
2420  Tractors, Wheeled
2430  Tractors, Full Tracked, High Speed
2510  Vehicular Cab, Body, and Frame Structural Components
2520  Vehicular Power Transmission Components
2530  Vehicular Brake, Steering, Axle, Wheel, and Track Components
2540  Vehicular Furniture and Accessories
2541  Weapons Systems Specific Vehicular Accessories
2590  Miscellaneous Vehicular Components
2610  Tires and Tubes, Pneumatic, Except Aircraft
2620  Tires and Tubes, Pneumatic, Aircraft
2630  Tires, Solid and Cushion
2640  Tire Rebuilding and Tire and Tube Repair Materials
2805  Gasoline Reciprocating Engines, Except Aircraft; and Components
2810  Gasoline Reciprocating Engines, Aircraft Prime Mover; and Components
2815  Diesel Engines and Components
2820  Steam Engines, Reciprocating; and Components
2825  Steam Turbines and Components
2830  Water Turbines and Water Wheels; and Components
2835  Gas Turbines and Jet Engines; Non-Aircraft Prime Mover, Aircraft Non-Prime Mover, and Components
2840  Gas Turbines and Jet Engines, Aircraft, Prime Moving; and Components
2845  Rocket Engines and Components
2850  Gasoline Rotary Engines and Components
2895  Miscellaneous Engines and Components
2910 Engine Fuel System Components, No aircraft
2915  Engine Fuel System Components, Aircraft and Missile Prime Movers
2920  Engine Electrical System Components, No aircraft
2925  Engine Electrical System Components, Aircraft Prime Moving
2930  Engine Cooling System Components, No aircraft
2935  Engine System Cooling Components, Aircraft Prime Moving
2940  Engine Air and Oil Filters, Strainers, and Cleaners, No aircraft
2945 Engine Air and Oil Filters, Cleaners, Aircraft Prime Moving
2950 Turbo supercharger and components
2990 Miscellaneous Engine Accessories, No aircraft
2995 Miscellaneous Engine Accessories, Aircraft
3010 Torque Converters and Speed Changers
3020 Gears, Pulleys, Sprockets, and Transmission Chain
3030 Belting, Drive Belts, Fan Belts, and Accessories
3040 Miscellaneous Power Transmission Equipment
3110 Bearings, Antifriction, Unmounted
3120 Bearings, Plain, Unmounted
3130 Bearings, Mounted
3210 Sawmill and Planing Mill Machinery
3220 Woodworking Machines
3230 Tools and Attachments for Woodworking Machinery
3405 Saws and Filing Machines
3408 Machining Centers and Way-Type Machines
3410 Electrical and Ultrasonic Erosion Machines
3411 Boring Machines
3412 Broaching Machines
3413 Drilling and Tapping Machines
3414 Gear Cutting and Finishing Machines
3415 Grinding Machines
3416 Lathe
3417 Milling Machines
3418 Planers and Shapers
3419 Miscellaneous Machine Tools
3422 Rolling Mills and Drawing Machines
3424 Metal Heat Treating and Non-Thermal Treating Equipment
3426 Metal Finishing Equipment
3431 Electric Arc Welding Equipment
3432 Electric Resistance Welding Equipment
3433 Gas Welding, Heat Cutting, and Metalizing Equipment
3436 Welding Positioners and Manipulators
3438 Miscellaneous Welding Equipment
3439 Miscellaneous Welding, Soldering, and Brazing Supplies and Accessories
3441 Bending and Forming Machines
3442 Hydraulic and Pneumatic Presses, Power Driven
3443 Mechanical Presses, Power Driven
3444 Manual Presses
3445 Punching and Shearing Machines
3446 Forging Machinery and Hammers
3447 Wire and Metal Ribbon Forming Machines
3448 Riveting Machines
3449 Miscellaneous Secondary Metal Forming and Cutting Machines
3450 Machine Tools, Portable
3455 Cutting Tools for Machine Tools
3456 Cutting and Forming Tools for Secondary Metalworking Machinery
3460 Machine Tool accessories
3461 Accessories for Secondary Metalworking Machinery
3465 Production Jigs, Fixtures, and Templates
3470 Machine Shop Sets, Kits, and Outfits

80
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>3510</td>
<td>Laundry and Dry Cleaning Equipment</td>
</tr>
<tr>
<td>3520</td>
<td>Shoe Repairing Equipment</td>
</tr>
<tr>
<td>3530</td>
<td>Industrial Sewing Machines and Mobile Textile Repair Shops</td>
</tr>
<tr>
<td>3540</td>
<td>Wrapping and Packaging Machinery</td>
</tr>
<tr>
<td>3550</td>
<td>Vending and Coin Operated Machines</td>
</tr>
<tr>
<td>3590</td>
<td>Miscellaneous Service and Trade Equipment</td>
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<tr>
<td>3605</td>
<td>Food Products Machinery and Equipment</td>
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<td>3610</td>
<td>Printing, Duplicating, and Bookbinding Equipment</td>
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<td>3611</td>
<td>Industrial Marking Machines</td>
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<td>3615</td>
<td>Pulp and Paper Industries Machinery</td>
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<td>3620</td>
<td>Rubber and Plastics Working Machinery</td>
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<td>3625</td>
<td>Textile Industries Machinery</td>
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<td>Clay and Concrete Products Industries Machinery</td>
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<td>Crystal and Glass Industries Machinery</td>
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<td>Tobacco Manufacturing Machinery</td>
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<td>3645</td>
<td>Leather Tanning and Leather Working Industries Machinery</td>
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<tr>
<td>3650</td>
<td>Chemical and Pharmaceutical Products Manufacturing Machinery</td>
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<tr>
<td>3655</td>
<td>Gas Generating and Dispensing Systems, Fixed or Mobile</td>
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<tr>
<td>3660</td>
<td>Industrial Size Reduction Machinery</td>
</tr>
<tr>
<td>3670</td>
<td>Specialized Semiconductor, Microcircuit, and Printed Circuit Board Manufacturing Machinery</td>
</tr>
<tr>
<td>3680</td>
<td>Foundry Machinery, Related Equipment and Supplies</td>
</tr>
<tr>
<td>3685</td>
<td>Specialized Metal Container Manufacturing Machinery and Related Equipment</td>
</tr>
<tr>
<td>3690</td>
<td>Specialized Ammunition and Ordnance Machinery and Related Equipment</td>
</tr>
<tr>
<td>3693</td>
<td>Industrial Assembly Machines</td>
</tr>
<tr>
<td>3694</td>
<td>Clean Work Stations, Controlled Environment, and Related Equipment</td>
</tr>
<tr>
<td>3695</td>
<td>Miscellaneous Special Industry Machinery</td>
</tr>
<tr>
<td>3710</td>
<td>Soil Preparation Equipment</td>
</tr>
<tr>
<td>3720</td>
<td>Harvesting Equipment</td>
</tr>
<tr>
<td>3730</td>
<td>Dairy, Poultry, and Livestock Equipment</td>
</tr>
<tr>
<td>3740</td>
<td>Pest, Disease, and Frost Control Equipment</td>
</tr>
<tr>
<td>3750</td>
<td>Gardening Implements and Tools</td>
</tr>
<tr>
<td>3770</td>
<td>Saddlery, Harness, Whips, and Related Animal Furnishings</td>
</tr>
<tr>
<td>3805</td>
<td>Earth Moving and Excavating Equipment</td>
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<tr>
<td>3810</td>
<td>Cranes and Crane-Shovels</td>
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<tr>
<td>3815</td>
<td>Crane and Crane-Shovel Attachments</td>
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<tr>
<td>3820</td>
<td>Mining, Rock Drilling, Earth Boring, and Related Equipment</td>
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<tr>
<td>3825</td>
<td>Road Clearing, Cleaning, and Marking Equipment</td>
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<td>3830</td>
<td>Truck and Tractor Attachments</td>
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<td>3835</td>
<td>Petroleum Production and Distribution Equipment</td>
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<td>3895</td>
<td>Miscellaneous Construction Equipment</td>
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<td>3910</td>
<td>Conveyors</td>
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<tr>
<td>3915</td>
<td>Materials Feeders</td>
</tr>
<tr>
<td>3920</td>
<td>Material Handling Equipment, Nonself-Propelled</td>
</tr>
<tr>
<td>3930</td>
<td>Warehouse Trucks and Tractors, Self-Propelled</td>
</tr>
<tr>
<td>3940</td>
<td>Blocks, Tackle, Rigging, and Slings</td>
</tr>
<tr>
<td>3950</td>
<td>Winches, Hoists, Cranes, and Derricks</td>
</tr>
<tr>
<td>3960</td>
<td>Freight Elevators</td>
</tr>
<tr>
<td>3990</td>
<td>Miscellaneous Materials Handling Equipment</td>
</tr>
<tr>
<td>4010</td>
<td>Chain and Wire Rope</td>
</tr>
<tr>
<td>4020</td>
<td>Fiber Rope, Cordage, and Twine</td>
</tr>
<tr>
<td>4030</td>
<td>Fittings for Rope, Cable, and Chain</td>
</tr>
</tbody>
</table>
4110 Refrigeration Equipment
4120 Air Conditioning Equipment
4130 Refrigeration and Air Conditioning Components
4140 Fans, Air Circulators, and Blower Equipment
4150 Vortex Tubes and Other Related Cooling Tubes
4210 Fire Fighting Equipment
4220 Marine Lifesaving and Diving Equipment
4230 Decontaminating and Impregnating Equipment
4235 Hazardous Material Spill Containment and Clean-up Equipment and Material
4240 Safety and Rescue Equipment
4250 Recycling and Reclamation Equipment
4310 Compressors and Vacuum Pumps
4320 Power and Hand Pumps
4330 Centrifugals, Separators, and Pressure and Vacuum Filters
4410 Industrial Boilers
4420 Heat Exchangers and Steam Condensers
4430 Industrial Furnaces, Kilns, Lehrs, and Ovens
4440 Driers, Dehydrators, and Anhydrators
4460 Air Purification Equipment
4470 Nuclear Reactors
4510 Plumbing Fixtures and Accessories
4520 Space and Water Heating Equipment
4530 Fuel Burning Equipment Units
4540 Waste Disposal Equipment
4610 Water Purification Equipment
4620 Water Distillation Equipment, Marine and Industrial
4630 Sewage Treatment Equipment
4710 Pipe, Tube and Rigid Tubing
4720 Hose and Flexible Tubing
4730 Hose, Pipe, Tube, Lubrication, and Railing Fittings
4810 Valves, Powered
4820 Valves, No powered
4910 Motor Vehicle Maintenance and Repair Shop Specialized Equipment
4920 Aircraft Maintenance and Repair Shop Specialized Equipment
4921 Torpedo Maintenance, Repair, and Checkout Specialized Equipment
4923 Depth Charges and Underwater Mines Maintenance, Repair, and Checkout Specialized Equipment
4925 Ammunition Maintenance, Repair, and Checkout Specialized Equipment
4927 Rocket Maintenance, Repair and Checkout Specialized Equipment
4930 Lubrication and Fuel Dispensing Equipment
4931 Fire Control Maintenance and Repair Shop Specialized Equipment
4933 Weapons Maintenance and Repair Shop Specialized Equipment
4935 Guided Missile Maintenance, Repair, and Checkout Specialized Equipment
4940 Miscellaneous Maintenance and Repair Shop Specialized Equipment
4960 Space Vehicle Maintenance, Repair, and Checkout Specialized Equipment
4970 Multiple Guided Weapons, Specialized Maintenance and Repair Shop Equipment
5110 Hand Tools, Edged, No powered
5120 Hand Tools, Nonedged, No powered
5130 Hand Tools, Power Driven
5133 Drill Bits, Counter bores, and Countersinks: Hand and Machine
5136 Taps, Dies, and Collets; Hand and Machine
5140 Tool and Hardware Boxes
5180  Sets, Kits, and Outfits of Hand Tools
5210  Measuring Tools, Craftsmen's
5220  Inspection Gages and Precision Layout Tools
5280  Sets, Kits, and Outfits of Measuring Tools
5305  Screws
5306  Bolts
5307  Studs
5310  Nuts and Washers
5315  Nails, Machine Keys, and Pins
5320  Rivets
5325  Fastening Devices
5330  Packing and Gasket Materials
5331  O-Ring
5335  Metal Screening
5340  Hardware, Commercial
5341  Brackets
5342  Hardware, Weapon System
5345  Disks and Stones, Abrasive
5350  Abrasive Materials
5355  Knobs and Pointers
5360  Coil, Flat, Leaf, and Wire Springs
5365  Bushings, Rings, Shims, and Spacers
5410  Prefabricated and Portable Buildings
5411  Rigid Wall Shelters
5419  Collective Modular Support System
5420  Bridges, Fixed and Floating
5430  Storage Tanks
5440  Scaffolding Equipment and Concrete Forms
5445  Prefabricated Tower Structures
5450  Miscellaneous Prefabricated Structures
5510  Lumber and Related Basic Wood Materials
5520  Millwork
5530  Plywood and Veneer
5610  Mineral Construction Materials, Bulk
5620  Tile, Brick and Block
5630  Pipe and Conduit, Nonmetallic
5640  Wallboard, Building Paper, and Thermal Insulation Materials
5650  Roofing and Siding Materials
5660  Fencing, Fences, Gates and Components
5670  Building Components, Prefabricated
5675  Nonwood Construction Lumber and Related Materials
5680  Miscellaneous Construction Materials
5805  Telephone and Telegraph Equipment
5810  Communications Security Equipment and Components
5811  Other Cryptologic Equipment and Components
5815  Teletype and Facsimile Equipment
5820  Radio and Television Communication Equipment, Except Airborne
5821  Radio and Television Communication Equipment, Airborne
5825  Radio Navigation Equipment, Except Airborne
5826  Radio Navigation Equipment, Airborne
5830  Intercommunication and Public Address Systems, Except Airborne
5831 Intercommunication and Public Address Systems, Airborne
5835 Sound Recording and Reproducing Equipment
5836 Video Recording and Reproducing Equipment
5840 Radar Equipment, Except Airborne
5841 Radar Equipment, Airborne
5845 Underwater Sound Equipment
5850 Visible and Invisible Light Communication Equipment
5855 Night Vision Equipment, Emitted and Reflected Radiation
5860 Stimulated Coherent Radiation Devices, Components, and Accessories
5865 Electronic Countermeasures, Counter-Countermeasures and Quick Reaction Capability Equipment
5895 Miscellaneous Communication Equipment
5905 Resistors
5910 Capacitors
5915 Filters and Networks
5920 Fuses, Arrestors, Absorbers, and Protectors
5925 Circuit Breakers
5930 Switches
5935 Connectors, Electrical
5940 Lugs, Terminals, and Terminal Strips
5945 Relays and Solenoids
5950 Coils and Transformers
5955 Oscillators and Piezoelectric Crystals
5960 Electron Tubes and Associated Hardware
5961 Semiconductor Devices and Associated Hardware
5962 Microcircuits, Electronic
5963 Electronic Modules
5965 Headsets, Handsets, Microphones and Speakers
5970 Electrical Insulators and Insulating Materials
5975 Electrical Hardware and Supplies
5977 Electrical Contact Brushes and Electrodes
5980 Optoelectronic Devices and Associated Hardware
5985 Antennas, Waveguides, and Related Equipment
5990 Synchros and Resolvers
5995 Cable, Cord, and Wire Assemblies: Communication Equipment
5996 Amplifiers
5998 Electrical and Electronic assemblies, Boards, Cards, and Associated Hardware
5999 Miscellaneous Electrical and Electronic Components
6010 Fiber Optic Conductors
6015 Fiber Optic Cables
6020 Fiber Optic Cable Assemblies and Harnesses
6021 Fiber Optic Switches
6030 Fiber Optic Devices
6032 Fiber Optic Light Sources and Photo Detectors
6035 Fiber Optic Light Transfer and Image Transfer Devices
6060 Fiber Optic Interconnectors
6070 Fiber Optic Accessories and Supplies
6080 Fiber Optic Kits and Sets
6099 Miscellaneous Fiber Optic Components
6105 Motors, Electrical
6110 Electrical Control Equipment
6115 Generators and Generator Sets, Electrical
6116 Fuel Cell Power Units, Components, and Accessories
6117 Solar Electric Power Systems
6120 Transformers: Distribution and Power Station
6125 Converters, Electrical, Rotating
6130 Converters, Electrical, Nonrotating
6135 Batteries, No rechargeable
6140 Batteries, Rechargeable
6145 Wire and Cable, Electrical
6150 Miscellaneous Electric Power and Distribution Equipment
6160 Miscellaneous Battery Retaining Fixtures and Liners
6210 Indoor and Outdoor Electric Lighting Fixtures
6220 Electric Vehicular Lights and Fixtures
6230 Electric Portable and Hand Lighting Equipment
6240 Electric Lamps
6250 Ballasts, Lampholders, and Starters
6260 Nonelectrical Lighting Fixtures
6310 Traffic and Transit Signal Systems
6320 Shipboard Alarm and Signal Systems
6330 Railroad Signal and Warning Devices
6340 Aircraft Alarm and Signal Systems
6350 Miscellaneous Alarm, Signal, and Security Detection Systems
6505 Drugs and Biological
6508 Medicated Cosmetics and Toiletries
6510 Surgical Dressing Materials
6515 Medical and Surgical Instruments, Equipment, and Supplies
6520 Dental Instruments, Equipment, and Supplies
6525 X-ray Equipment and Supplies: Medical, Dental, And Veterinary
6530 Hospital Furniture, Equipment, Utensils, and Supplies
6532 Hospital and Surgical Clothing and Related Special Purpose Items
6540 Ophthalmic Instruments, Equipment, and Supplies
6545 Replenishable Field Medical Sets, Kits, and Outfits
6550 In Vitro Diagnostic Substances, Reagents, Test Kits and Sets
6605 Navigational Instruments
6610 Flight Instruments
6615 Automatic Pilot Mechanisms and Airborne Gyro Components
6620 Engine Instruments
6625 Electrical and Electronic Properties Measuring and Testing Instruments
6630 Chemical Analysis Instruments
6635 Physical Properties Testing and Inspection
6636 Environmental Chambers and Related Equipment
6640 Laboratory Equipment and Supplies
6645 Time Measuring Instruments
6650 Optical Instruments, Test Equipment, Components and Accessories
6655 Geophysical Instruments
6660 Meteorological Instruments and Apparatus
6665 Hazard-Detecting Instruments and Apparatus
6670 Scales and Balances
6675 Drafting, Surveying, and Mapping Instruments
6680 Liquid and Gas Flow, Liquid Level, and Mechanical Motion Measuring Instruments
6685 Pressure, Temperature, and Humidity Measuring and Controlling Instruments
6695 Combination and Miscellaneous Instruments
6710 Cameras, Motion Picture
6720 Cameras, Still Picture
6730 Photographic Projection Equipment
6740 Photographic Developing and Finishing Equipment
6750 Photographic Supplies
6760 Photographic Equipment and Accessories
6770 Film, Processed
6780 Photographic Sets, Kits, and Outfits
6810 Chemicals
6820 Dyes
6830 Gases: Compressed and Liquefied
6840 Pest Control Agents and Disinfectants
6850 Miscellaneous Chemical Specialties
6910 Training Aids
6920 Armament Training Devices
6930 Operation Training Devices
6940 Communication Training Devices
7010 ADPE System Configuration
7020 ADP Central Processing Unit (CPU, Computer), Analog
7021 ADP Central Processing Unit (CPU, Computer), Digital
7022 ADP Central Processing Unit (CPU, Computer), Hybrid
7025 ADP Input/Output and Storage Devices
7030 ADP Software
7035 ADP Support Equipment
7040 Punched Card Equipment
7042 Mini and Micro Computer Control Devices
7045 ADP Supplies
7050 ADP Components
7105 Household Furniture
7110 Office Furniture
7125 Cabinets, Lockers, Bins, and Shelving
7195 Miscellaneous Furniture and Fixtures
7210 Household Furnishings
7220 Floor Coverings
7230 Draperies, Awnings, and Shades
7240 Household and Commercial Utility Containers
7290 Miscellaneous Household and Commercial Furnishings and Appliances
7310 Food Cooking, Baking, and Serving Equipment
7320 Kitchen Equipment and Appliances
7330 Kitchen Hand Tools and Utensils
7340 Cutlery and Flatware
7350 Tableware
7360 Sets, Kits, Outfits and Modules, Food Preparation and Serving
7420 Accounting and Calculating Machines
7430 Typewriters and Office Type Composing Machines
7435 Office Information System Equipment
7450 Office Type Sound Recording and Reproducing Machines
7460 Visible Record Equipment
7490 Miscellaneous Office Machines
7510 Office Supplies
7520 Office Devices and Accessories
7530 Stationery and Record Forms
7540 Standard Forms
7610 Books and Pamphlets
7630 Newspapers and Periodicals
7640 Maps, Atlases, Charts, and Globes
7641 Aeronautical Maps, Charts and Geodetic Products
7642 Hydrographic Maps, Charts and Geodetic Products
7643 Topographic Maps, Charts and Geodetic Products
7644 Digital Maps, Charts and Geodetic Products
7650 Drawings and Specifications
7660 Sheet and Book Music
7670 Microfilm, Processed
7690 Miscellaneous Printed Matter
7710 Musical Instruments
7720 Musical Instrument Parts and Accessories
7730 Phonographs, Radios, and Television Sets: Home Type
7740 Phonograph Records
7810 Athletic and Sporting Equipment
7820 Games, Toys, and Wheeled Goods
7830 Recreational and Gymnastic Equipment
7910 Floor Polishers and Vacuum Cleaning Equipment
7920 Brooms, Brushes, Mops, and Sponges
7930 Cleaning and Polishing Compounds and Preparations
8010 Paints, Dopes, Varnishes, and Related Products
8020 Paint and Artists' Brushes
8030 Preservative and Sealing Compounds
8040 Adhesives
8105 Bags and Sacks
8110 Drums and Cans
8115 Boxes, Cartons, and Crates
8120 Commercial and Industrial Gas Cylinders
8125 Bottles and Jars
8130 Reels and Spools
8135 Packaging and Packing Bulk Materials
8140 Ammunition and Nuclear Ordnance Boxes, Packages and Special Containers
8145 Specialized Shipping and Storage Containers
8305 Textile Fabrics
8310 Yarn and Thread
8315 Notions and Apparel Findings
8320 Padding and Stuffing Materials
8325 Fur Materials
8330 Leather
8335 Shoe Findings and Soling Materials
8340 Tents and Tarps
8345 Flags and Pennants
8405 Outerwear, Men's
8410 Outerwear, Women's
8415 Clothing, Special Purpose
8420 Underwear and Nightwear, Men's
8425 Underwear and Nightwear, Women's
8430 Footwear, Men's
8435  Footwear, Women's
8440  Hoisery, Handwear, and Clothing Accessories, Men's
8445  Hoisery, Handwear, and Clothing Accessories, Women's
8450  Children's and Infants' Apparel and Accessories
8455  Badges and Insignia
8460  Luggage
8465  Individual Equipment
8470  Armor, Personal
8475  Specialized Flight Clothing and Accessories
8510  Perfumes, Toilet Preparations, and Powders
8520  Toilet Soap, Shaving Preparations, and Dentifrices
8530  Personal Toiletry Articles
8540  Toiletry Paper Products
8710  Forage and Feed
8720  Fertilizers
8730  Seeds and Nursery Stock
8810  Live Animals, Raised for Food
8820  Live Animals, Not Raised for Food
8905  Meat, Poultry, and Fish
8910  Dairy Foods and Eggs
8915  Fruits and Vegetables
8920  Bakery and Cereal Products
8925  Sugar, Confectionery, and Nuts
8930  Jams, Jellies, and Preserves
8935  Soups and Bouillons
8940  Special Dietary Foods and Food Specialty Preparations
8945  Food, Oils and Fats
8950  Condiments and Related Products
8955  Coffee, Tea, and Cocoa
8960  Beverages, Nonalcoholic
8965  Beverages, Alcoholic
8970  Composite Food Packages
8975  Tobacco Products
9110  Fuels, Solid
9130  Liquid Propellants and Fuels, Petroleum Base
9135  Liquid Propellant Fuels and Oxidizers, Chemical Base
9140  Fuel Oils
9150  Oils and Greases: Cutting, Lubricating, and Hydraulic
9160  Miscellaneous Waxes, Oils, and Fats
9310  Paper and Paperboard
9320  Rubber Fabricated Materials
9330  Plastics Fabricated Materials
9340  Glass Fabricated Materials
9350  Refractories and Fire Surfacing Materials
9390  Miscellaneous Fabricated Nonmetallic Materials
9410  Crude Grades of Plant Materials
9420  Fibers: Vegetable, Animal, and Synthetic
9430  Miscellaneous Crude Animal Products, Inedible
9440  Miscellaneous Crude Agricultural and Forestry Products
9450  Nonmetallic Scrap, Except Textile
9505  Wire, Nonelectrical
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The following units of issue are recognized throughout the Federal Supply System, and are the only units of issue recognized by any automated supply system.

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</table>
LG - Length
LI - Liter
MC - Thousand Cubic Feet
ME - Meal
ML - Milliliter
MR - Meter
MX - Thousand
OT - Outfit
OZ - Ounce
PD - Pad
PG - Package
PH - Pack
PK - Package
PL - Pill
PM - Plate
PR - Pair
PT - Pint
PZ - Packet
QT - Quart
RA - Ration
RL - Reel
RM - Ream
RO - Roll
SD - Skid
SE - Set
SF - Square Foot
SH - Sheet
SK - Skein
SL - Spool
SO - Shot
SP - Strip
SR - Syringe
ST - Strap
SX - Stick
SY - Square Yard
TD - Twenty-four
TE - Ten
TF - Twenty-five
TN - Ton
TO - Troy Ounce
TR - Tray
TS - Thirty-six
TU - Tube
VI - Vial
YD - Yard
Chapter 5
Optical Fabrication Laboratory

Section I. GENERAL

1-1. PURPOSE: To inform all supported activities of the functions, policies, and procedures relative to obtaining single vision male and female standard issue spectacles, and protective mask inserts for military personnel on POR/POM status, trainees in reception centers, and all other authorized personnel.

Section II. REQUISITIONING PROCEDURES

2-1. INSTRUCTIONS: Upon the receipt of the Eyewear Prescription, DD Form 771, the Optical Laboratory will fabricate, repair, and/or replace single vision prescription lenses or any part thereof for all military personnel within Fort Sill, Oklahoma.

3-1. PRIORITY: Prescriptions for trainees in the reception center and personnel on POR/POM status take priority over all other prescriptions, for military eyewear, regardless of the order date. Trainee prescriptions require a twenty-four hour turn-around, and POR/POM require immediate attention upon receipt.

   a. Spectacle order forms stamped by the originating agency with POR/POM, RUSH or RTO in the special lens or frame section of the prescription form will have priority IAW AR40-63/NAVMEDCOMINST 6810.1/AFR 167-3. These prescriptions will be processed immediately within the laboratory.

      (1) Spectacle orders submitted with the words “Trainee” stamped or written in the special lens or frame section of the prescription is for enlisted personnel undergoing basic training on Fort Sill. These prescriptions have second priority and will be fabricated to meet delivery date schedules by the originating clinics (FORSCOM requirements).

      (2) All other spectacle orders not identified as stated in paragraph a. or b. above will be processed routinely. When processing RUSH, RTO, Trainee, and POR/POM prescriptions in great quantity, the routine prescriptions will be set-aside until higher priority prescriptions have been completed. However, the editing section will process all prescriptions the same day of receipt.

Section III. RETURNS

3-1. Spectacle prescriptions not conforming with existing AR 40-63/NAVMEDCOMINST 6810.1/AFR 167-3 will be returned to the originating clinic for necessary action and final disposition. A letter explaining the reasons why the order was returned will be attached.
MCUA-L

The proponent of this regulation is Logistics Division. Users are invited to submit comments and/or suggestions to Reynolds Army Community Hospital, CDR USAMEDDAC, ATTN: MCUA-L, Fort Sill, Oklahoma 73503-6300.

FOR THE COMMANDER:

OFFICIAL: SCOTT W. CHILDERS
LTC, MS
Deputy Commander for Administration

CYNTHIA A. JONES
Administrative Officer

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