



## UNITED STATES MARINE CORPS

3D MARINE DIVISION (-) (REIN), FMF  
FPO SAN FRANCISCO, CA 96602-8600

DivO 6200.2E  
G3-T  
5 Oct 89

### DIVISION ORDER 6200.2E

From: Commanding General  
To: Distribution List

Subj: HEAT CASUALTIES

Ref: (a) MCO 6200.1D  
(b) BO 6200.7G  
(c) BUMEDINST 6260.2B  
(d) BUMEDINST 6200.7A

Encl: (1) Heat Conditions and the Control of Heat Casualties  
(2) Causes, Symptoms and Treatment of Heat Casualties  
(3) How to Avoid Becoming a Heat Casualty  
(4) Risk of Injury and Death Associated with Sick Cell Trait (SCT)  
(5) Heat/Cold Casualty (NAVMED 6500/1) Report

Report Required: Report of Heat/Cold Casualty (Report Symbol Med 6500-1), par. 5

1. Purpose. To promulgate instructions and information concerning the prevention of heat casualties, per reference (a).

2. Cancellation. DivO 6200.2D.

3. Summary of Revision. This directive has been reformatted contains operational and administrative changes. The major modifications are as follows:

a. Paragraph 4b. Authorizes Commanders greater latitude in the application of an acclimatization program.

b. Paragraph 5. Establishes guidelines for Commanders to follow in implementing heat conscious training.

c. Enclosure (1). Paragraphs 1 and 2 change guidance under condition I from "all strenuous activities will be halted", to "all strenuous nonessential activities will be halted ...". This provides commanders with greater latitude and implies that in all cases, common sense prevails.

d. Enclosure (4). Previous enclosure (4) which required a 12 week acclimatization program has been removed. Current enclosure (4) highlights current information on risks associated with Sick Cell Trait.

#### 4. General

a. Reference (a) provides information on the types, causes, recognition, and treatment of heat casualties, and installation/operation of the Wet-Bulb Globe Temperature (WBGT) Index System. Reference (b) establishes a WBGT Index System for Marine commands on Okinawa, which will be in effect annually during the period 1 May to 31 October. Reference (c) discusses water and salt requirements in hot environments and climates. Reference (d) provides information regarding the prevention of heat casualties and the reporting of all casualties due to heat stress.

b. A rigid, literal application of reference (a)'s most restrictive conditions (e.g., 12 weeks acclimatization prior to activity in Condition II, and only 6 hours activity in it by acclimatized Marines) would create significant readiness problems for the Division during late spring and summer months, as well as undercut training deployments and exercises in the Philippines and Southeast Asia. Commanders are authorized latitude in the application of reference (a) and this order, providing they comply with the guidance set forth in the following subparagraphs. They have no latitude in the requirement to know and understand the rationale behind the restrictions established in these orders.

#### 5. Action

##### a. Officers, SNCO's, NCO's and Others Responsible for Supervising Training

(1) Ensure that all participants fully understand the causes, symptoms, preventative measures, and treatment of heat casualties.

(2) Identify any individuals especially vulnerable to heat illness through proper medical screening.

(3) Ensure that adequate water, medical assistance, and evacuation means are available.

(4) Ensure that unit activities are sufficiently flexible to accommodate individuals at greater risk.

(5) Ensure that it be well understood by all that plans will be adjusted to heat conditions, fatigue level, and other factors, with safety the fundamental determinate.

(6) Ensure that, in short, common sense prevails

##### b. Commanders

(1) Incorporate the principles stated in enclosure 1 into the planning and execution of operations and training conducted during hot weather.

(2) Indoctrinate and periodically familiarize all personnel in the causes, symptoms, and first aid procedures for heat exhaustion and heat stroke promulgated in enclosures (2) and (3).

(3) Regulate the physical activity of personnel in accordance with provisions of enclosure (1) and paragraph 3, above.

(4) Effect liaison with respective Camp Commanders for receipt of information from the WBGT Index System established by reference (b).

(5) Ensure that units operating in the field obtain WBGT index readings from Range Control in accordance with reference (b). Those units operating south of the Ginoza Dam area will be guided by the Camp Hansen reading and those units operating to the north of Ginoza Dam will be guided by the Camp Schwab reading.

(6) Establish and execute procedures for the rapid and timely dissemination of WBGT index readings to all subordinate units and maintain records showing the receipt and passing of this information.

(7) Establish an acclimatization program for newly arrived personnel/UDP units. This program will include:

(a) Screening of incoming personnel for past history/susceptibility to heat illness, especially those personnel with the Sick Cell Trait (SCT). See enclosure (4)

(b) A breaking-in period of 2 to 3 weeks with progressive degrees of physical exertion and heat exposure.

(8) Comply with paragraph 6, below, when necessary.

c. Director of Division Schools

(1) Incorporate the principles stated in enclosure (1) into the planning and execution of all training conducted during hot weather.

(2) Regulate the physical activity of personnel in accordance with provisions of enclosure (1) and paragraph 4 above.

(3) Ensure the Officer-in-Charge Northern Training Area complies with the provisions in paragraph 4.b.(2) above, and executes the tasks assigned in reference (b) for the operation of a WBGT index system instrument site and for notification of units conducting operations in the Northern Training Area.

6. Report Required. In case of heat casualties requiring treatment by a medical officer, Commanding Officers will submit a "Report of Heat/Cold Casualty" to the Commander Naval Medical Command, Code 55, Washington D.C. 20372, using NAVMED 6500/1, as shown in enclosure (5).

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Provide a copy to this Headquarters (Attn: Div Surgeon) Submit  
within 24 hours when the illness results in death.

  
C. W. REINKE  
Chief of Staff

DISTRIBUTION: A plus line 5 1

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## HEAT CONDITIONS AND THE CONTROL OF HEAT CASUALTIES

1. Acclimatization

a. Personnel who are not accustomed to physical activity under conditions of high temperature are particularly susceptible to heat illness. This is especially true of individuals who are 10 pounds or more overweight, in poor physical condition, or in whom a circulatory or sweating deficiency is known. Conditions of high humidity and solar heat increase the possibility of heat illness. In addition, any person who has previously experienced heat exhaustion and/or heat stroke should be considered especially vulnerable to repeated instances of heat injury. Even though they may be considered acclimatized, these personnel must be considered at risk.

b. Training programs for unacclimatized personnel should be limited in intensity and time. During this period the workload for personnel will be gradually increased while under thermal stress but not to the point of exhaustion or to the point where personnel will be unduly fatigued the following day. Until acclimatized, the personnel will lose greater than normal quantities of water and salt. These losses must be replaced.

c. While acclimatization increases tolerance for heat, it does not make an individual immune to becoming a heat casualty. Overexertion can lead to heat illness even in mild weather.

d. Special provisions must be made for individuals who are overweight, in poor physical condition, or have circulatory or sweating deficiencies.

e. A 21-day acclimatization program is essential for newly arrived personnel and for those who are not accustomed to physical activity under conditions of high temperature/high humidity. It must be understood that this represents the minimum period for those personnel who are in good physical condition. A longer acclimatization period may be warranted on a case by case basis.

2. Heat Conditions and Limitation of Physical ActivityCONDITION IV

WBGT Index: 80 degrees - 84.9 degrees - Green Flag

Action: Heavy exercise for unacclimatized personnel should be conducted with caution and under constant, responsible supervision.

ENCLOSURE 1)

CONDITION III

WBGT Index: 85 degrees - 87.9 degrees - Yellow Flag

Action: Strenuous exercise, such as marching at a standard cadence, or "Route Step" marching at a fast pace, should be suspended for unacclimatized troops during their first 2 or 3 weeks of training. Outdoor classes in the sun are to be avoided.

CONDITION II

WBGT Index: 88 degrees - 89.9 degrees - Red Flag

Action: All physical training should be halted for those troops who have not become thoroughly acclimatized through graduated physical exertion while being thermally stressed. Those troops who are thoroughly acclimatized may carry on limited activity not to exceed six hours per day. Personnel will not be burdened with body armor, field marching packs, or similar equipment during this condition except under the most carefully controlled circumstances, or under circumstances synonymous to "essential" activities as described under condition I.

CONDITION I

WBGT Index: 90 degrees and above - Black Flag

Action: All strenuous nonessential outdoor physical activity will be halted for all units. Essential activities are defined as those activities associated with scheduled exercises or other major training evolutions where the disruption would cause undue burden on personnel or resources, be excessively expensive, or significantly reduce a unit's combat readiness. Essential outdoor physical activity will be conducted at a level that is commensurate with personnel acclimatization as determined by the unit's commanding officer in coordination with the unit's medical officer or medical personnel. Unit commanders are enjoined to exercise utmost caution when continuing training during this condition. All efforts should be made to reschedule these activities during cooler periods of the day.

3. Water and Salt Intake

a. Water intake must be sufficient to replace that lost by sweating. During field exercises in hot weather this will require up to 1 quart of water per man hour if heat exhaustion is to be avoided. Marines should be encouraged to drink water in small quantities frequently. Water should be consumed hourly during "break" periods and every 30 minutes during extremely hot weather. It is now recognized that the body's need for water usually exceeds its desire (thirst). Therefore, full hydration is

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more nearly accomplished by drinking an additional quart of water after thirst has been satisfied. Ideally, personnel should drink until their urine becomes very pale yellow.

b. The average diet provides the necessary daily salt requirements for acclimatized troops. In the initial phase of acclimatization and in acclimatized troops doing heavy work in the heat, the additional requirement for salt should be at meal times. Any additional requirement for salt should be determined by competent medical authority using guidance set forth in reference (c).

c. If water is not available, salt in any form should not be taken alone. Salt in concentrated form is not absorbed into the system readily and may cause gastric irritation, nausea, and electrolyte (body chemistry) imbalance.

4. Previous and Intercurrent Illness. Susceptibility to heat injury is greatly enhanced by illness, infections, or any feverish condition, including reactions to immunizing inoculations. A previous history of heat stroke, vascular disease or skin trauma, such as heat rash, acute sunburn, or any condition affecting sweat secretion or evaporation, and as explained in enclosure (4) with regard to Sickle Cell Trait (SCT) increases the risk of heat injury. These cases call for special consideration by a medical officer.

5. Screening. All Marines should receive medical screening prior to rigorous hot weather activity so as to identify possible susceptibility to heat illness with specific emphasis placed on those characteristics mentioned in paragraph 4 above.

#### 6. Clothing

a. Clothing and equipment should be worn in such a way as to provide maximum skin ventilation without unnecessary exposure to bright sunlight.

b. In adjusting clothing and equipment, care should be taken to avoid restriction of blood circulation.

7. Instruction. All Marines should receive periodic instruction from the Medical department concerning the prevention, recognition, and emergency treatment of heat casualties.

ENCLOSURE 1

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CAUSES, SYMPTOMS AND TREATMENT OF HEAT CASUALTIES

1. General

a. The human body uses energy in its vital processes and in doing work. This energy becomes heat, which at ordinary temperatures, is radiated from the body to the environment. When the environment becomes as warm as the skin, this is no longer possible. When the temperature of the environment is higher than that of the skin, the process is reversed and the body gains heat.

b. When the body cannot lose heat to the surrounding environment, it begins sweating. The sweat evaporates, transferring heat from the body to the surrounding air. This process cools the body.

c. Sweating causes loss of body water and salt. If not replaced this loss upsets the heat regulating mechanisms of the body. Lack of proper heat regulation in the body may cause an individual to become a heat casualty.

2. Types, Causes, Symptoms and First Aid

a. There are two common types of heat casualties; heat exhaustion and heat stroke. Heat exhaustion may progress into heat stroke. Heat stroke is the more serious of the two conditions and, unless promptly treated, may result in death or permanent brain damage.

b. The symptoms of each condition are different and easy to recognize. The major differences are in the condition of the skin. In heat exhaustion the skin is sweaty, cool, and pale. In heat stroke the skin is dry, hot, and flushed.

c. Set forth below are the types, causes, symptoms and first-aid treatment for the two common types of heat casualties:

(1) Heat Exhaustion

<u>CAUSE</u>	<u>SYMPTOMS</u>	<u>FIRST AID</u>
Exposure to high temperatures and humidity. Solar heat is also an important contributing factor. Prolonged work,	Shortness of breath, headache, weakness, dizziness, blurred vision, nausea, and muscle cramps may occur. After onset the casualty will	1. Send for medical aid. 2. Place casualty in a cool, shady place with circulating air. 3. Lay casualty

ENCLOSURE 2)

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CAUSE

recent arrival  
in a hot climate  
and too much  
clothing.

SYMPTOMS

have pale, cool,  
wet skin.

FIRST AID

down with head  
level or lower  
than the feet.  
4. Loosen  
clothing and  
equipment.  
5. If casualty is  
conscious, give  
liberal quantities  
of salted water in  
small sips. (1/2  
teaspoon of salt  
per canteen cup  
full of water is  
the proper ratio).

(2 Heat Stroke)

CAUSES

Exposure to high  
temperatures and  
humidity coupled with  
loss of ability  
to sweat. Solar heat  
is also an important  
contributing factor.  
When sweating stops,  
the temperature of  
the body rapidly  
builds up to  
dangerous levels.

SYMPTOMS

Lack of sweating,  
weakness, headache,  
dizziness, loss of  
appetite, nausea,  
shortness of breath,  
faintness or even  
collapse may occur  
before onset. ONSET  
IS SUDDEN, and will  
be recognized by  
convulsions, delirium  
or loss of conscious-  
ness. The skin may  
be flushed, hot and  
dry. DEATH MAY OCCUR  
IF BODY TEMPERATURE  
IS NOT LOWERED.

FIRST AID

1. Send for med-  
ical aid.
2. THE PRIMARY  
CONCERN IS TO  
LOWER BODY TEMP-  
ERATURE AS  
QUICKLY AS POS-  
SIBLE.
3. Move casual-  
ty to a cool  
shady place with  
circulating air.  
Do not attempt to  
make Marine drink.
4. Loosen cloth-  
ing and equipment.
5. Apply cool  
water or ice water  
to entire body. Be  
careful to avoid  
the nose and mouth.
6. Fan patient  
constantly to  
promote cooling of  
body by evaporation  
of applied water.

ENCLOSURE (2

HOW TO AVOID BECOMING A HEAT CASUALTY

1. General. The human body contains a great deal of water and considerable salt. Sweating causes the body to lose these items and they must be replaced. The body cannot be "weaned" away from water or trained to do without salt.

2. Prevention. The following are a few simple rules to avoid heat exhaustion and heat stroke during hot weather.

a. Drink water frequently and drink as much as you need. When working on your own, drink water when you need it and drink all you need. You may need up to 4 gallons a day.

b. Stay away from "cold drinks" while still sweating.

c. DRINK!!! DRINK before you start working, DRINK when you are thirsty, DRINK at least every hour; DRINK every 30 minutes during the heat of the day - when you have had enough to quench your thirst - DRINK another quart.

d. Salt - In the field your MRE provides all the salt you need. In garrison liberally salt your food at the table. NEVER take salt without water.

e. Rest - At least 10 minutes every hour when engaged in strenuous exercise. DRINK at this time. Do not lay down and close your eyes!

f. DRINK!!! Ice cold drinks in large quantities are not absorbed well, cool water is preferable. Warm water is not as palatable as cool water, but DRINK.

g. Wear headgear in the sun. Light, loose clothing will help reflect the sun's heat.

h. If you feel sick or dizzy, take it easy. Stop and rest NOW. This could be the first symptom of severe heat illness.

i. If you observe anyone who is still functioning, but acts "funny" get the corpsman to examine him. An unusual state of consciousness may be a sign of heat illness.

j. DRINK!!! DRINK until your urine is a pale yellow.

k. If you stop sweating or you observe someone else who has stopped sweating - STOP!!! - Get out of the sun and get medical aid IMMEDIATELY.

1. Good physical condition plus (+) proper acclimatization  
 minus (-) adequate water equals (=) Heat Casualty.  
 m. DRINK!!! Full hydration equals thirst plus one. That is  
 when you have quenched your thirst then drink another quart, you  
 are then fully hydrated...

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## RISK OF INJURY AND DEATH ASSOCIATED WITH SICKLE CELL TRAIT SCT

1. Personnel with Sickle Cell Trait (SCT) may be at a very slightly increased risk of injury/death during periods of exertion or heat stress. This is not intended to cause alarm but merely to inform about a possible health risk and to provide procedures to be followed to minimize it. The prescribed precautions are simple and are to be followed.
2. SCT is an inherited trait which is not physically disqualifying for naval personnel. A triggering mechanism which is not known can cause the red blood cells of personnel with SCT to alter shape and texture. This change can result in impaired blood circulation and may lead to unconsciousness and possible death. Recent information suggests that individuals with SCT may be at slightly increased risk during strenuous exercise, particularly while exposed to hot or cold temperatures, or while exercising under hypoxic (high altitude/low oxygen) conditions. Additionally, SCT members may be at increased risk while recovering from serious illness and surgery.
3. The cause and extent of this increased risk is not understood, but currently there is no basis for restricting the work or exercise of SCT personnel. However, certain prudent precautionary steps can be taken to minimize risk when exercising or while exposed to temperature extremes.
4. The following actions are directed to reduce the risk to personnel with SCT.
  - a. Discuss with all SCT members the potential for increased risk under the above cited conditions, and advise them of the simple precautions they should take during periods of exertion or heat stress. SCT is documented on the problem summary sheet (SF 6150/20) of individual medical records.
  - b. Ensure SCT members drink adequate amounts of water before, during, and after any exposure to extreme temperatures. Consumption of 10 fluid ounces of water 10 minutes before running and 8 fluid ounces after each 1.5 miles is recommended for SCT personnel participating in the PRT and other strenuous physical activity. Due to the dehydrating effects of alcohol and caffeine, consumption of these substances is not recommended within 24 hours of strenuous activity.
5. Observance of the precautions listed above should greatly minimize the likelihood of illness for our personnel with SCT.

ENCLOSURE 4



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5 Oct 89

RISK OF INJURY AND DEATH ASSOCIATED WITH SICKLE CELL TRAIT (SCT)

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5. Observance of the precautions listed above should greatly minimize the likelihood of illness for our personnel with SCT.

ENCLOSURE (4)

REF ID: A66000

DIV 6200.2E  
5 Oct 89

HEAT/COLD CASUALTY (NAVMED 6500/1) REPORT

REPORT OF HEAT/COLD CASUALTY  
NAVMED 6500/1 (Rev. 7-77) S/N 0105-LF-206-5005

FROM: (Reporting Activity) \_\_\_\_\_ DATE \_\_\_\_\_

TO: BUREAU OF MEDICINE AND SURGERY (CODE 55)  
DEPARTMENT OF THE NAVY  
WASHINGTON, D.C. 20372

NAME		SOCIAL SECURITY NUMBER		GRADE/RATE	AGE	RACE	SEX	BIRTHPLACE
RESIDENCE PTE (Town and State)/Prior DUSTA (Check Date)		OCCUPATION (PTE) or Present MOS/NEC		TIME ON ACTIVE DUTY (Months)		UNIT TO WHICH ATTACHED		
DATE REPORTED TO PRESENT STATION		WT	EXAMINED (Date and Time)	DIAGNOSIS (Check one)				
PRESENT ILLNESS (Onset Date and Time)		DESCRIBE BRIEFLY WHAT PATIENT WAS DOING AT TIME OF ONSET AND DURATION OF THIS ACTIVITY (Hours/Minutes)						
SYMPTOMS (Check all applicable)		SKIN (Check all applicable)						
<input type="checkbox"/> UNCONSCIOUSNESS	<input type="checkbox"/> WEAK	<input type="checkbox"/> RED	<input type="checkbox"/> NORMAL	EXTREME:		INITIAL:		TEMP (°F)
<input type="checkbox"/> DIZZY	<input type="checkbox"/> NAUSEA	<input type="checkbox"/> OTHER (Specify)	<input type="checkbox"/> PALE	SWEATING (Check one)		BLOOD PRESSURE		DIASTOLIC
<input type="checkbox"/> CONFUSED	<input type="checkbox"/> GRAPS	<input type="checkbox"/> WET	<input type="checkbox"/> OTHER (Specify)	SWEATING (Check one)		WEIGHT		HEIGHT
<input type="checkbox"/> NUMBNESS	<input type="checkbox"/> VOMITING	<input type="checkbox"/> DRY	<input type="checkbox"/> OTHER (Specify)	SWEATING (Check one)		BUILD (Check one)		OTHER SIGNIFICANT FINDINGS (Urine Sp. Gr., Other Lab. Findings, Specify)
<input type="checkbox"/> VISUAL DISTURBANCES (Specify)	<input type="checkbox"/> ANESTHESIA	<input type="checkbox"/> HAS	<input type="checkbox"/> OTHER (Specify)	SWEATING (Check one)		WEIGHT		HEIGHT
LAST 24 HOURS (Hours of sleep, number of wet clothes)		LAST 12 HOURS (Amount of water, by conventional method; temperature, if known, etc.)						
LAST MEAL (Date and Time)		AMOUNT (Check one)						
PAST HISTORY OF HEAT/COLD ILLNESS (Specify Type)		<input type="checkbox"/> LIGHT	<input type="checkbox"/> MODERATE	<input type="checkbox"/> HEAVY		DATE (Month and Day)		
RECENT HISTORY OF SKIN TRAUMA (Specify Type)		DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
DATE (Month and Day)		DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
INOCULATIONS WITHIN PAST WEEK (Check)		DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
DISPOSITION - PRESENT ILLNESS		DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
<input type="checkbox"/> HOSPITAL	<input type="checkbox"/> CLINIC	DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
<input type="checkbox"/> BINNACLE LIST	<input type="checkbox"/> LIGHT DUTY	DIAGNOSIS		DATE (Month and Day)		OTHER RECENT ILLNESS		
REMARKS (Initial treatment, long-term treatment potential, extent of injury, remission)		SIGNATURE						



UNITED STATES MARINE CORPS



3D MARINE DIVISION (-) (REIN)

UNIT 35801

FPO AP 96602-5801

In reply refer to:

5215

ADJ

10 Aug 98

From: Adjutant Chief, 3d Marine Division  
To: Assistant Chief of Staff, G-3, 3d Marine Division

REVIEW OF DIVISION ORDER 6200.2E

(a MCO P5215.1F

1. In accordance with the reference, the subject directive, originating from your section, requires annual review. This annual review form must be returned to the Division Adjutant, regardless of any directives, by 24 August 1998.

DIVISION 1  
SURGEON a

M. D. SINGERHOUSE  
MSGT USMC

FIRST ENDORSEMENT

From: G-1 Navy Personnel, 3d Marine Division  
To: Adjutant Chief, 3d Marine Division

1. Returned. The subject directive has been reviewed and choose one of the following)

a. The directive is current and requires on further action.

b. The directive requires changes. The changes are attached or will be forwarded by 26 Sep 98  
Date

c. The directive is no longer required and may be canceled.

E. M. SANTA MARIA  
USN

(Originator's Signature)