DEPARTMENT OF THE ARMY
HEADQUARTERS, U.S. ARMY MEDICAL COMMAND
2050 WORTH ROAD
FORT SAM HOUSTON TX 78234-6000

REPLY TO
ATTENTION OF

MCHO-CL-P

24 JUL 2007

MEMORANDUM FOR Commanders, Medical Command (MEDCOM) Regional Medical Commands (RMCs)

SUBJECT: Clarification of Requirement for Line of Duty Investigations (LODI) for Soldiers Being Referred into the Physical Disability Evaluation System (PDES)

1. References:

a. AR 600-8-4, Line of Duty Policy Procedures and Investigations, 15 April 2004.

b. MILPER Message Number 07-075, 30 March 2007, subject: Applicable Processing Procedures for Military Orders Pertaining to Soldiers in a Patient Status who are Moved from the Theater Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) to a CONUS Military Treatment Facility (MTF).

c. Memorandum, US Army Human Resources Command, 13 June 2007, subject: Clarification of Requirement for Line of Duty Investigations (LODI) for Soldiers Being Referred into the Physical Disability Evaluation System (PDES).

2. This memorandum clarifies the LODI requirements for Soldiers who are ordered on active duty for more than 30 days and are being referred into the PDES.

a. Conditions that require a formal LODI are outlined in AR 600-8-4, paragraph 2-3.

b. When a formal LODI is not required and all the following conditions are met, the Soldier is presumed to be in the LOD.

(1) The injury, illness, or disease occurred or was aggravated while the Soldier was ordered to active duty for more than 30 days.

(2) There is no indication of abuse of alcohol or drugs.

(3) There is no indication of intentional misconduct or willful negligence.

(4) There is no indication the Soldier was AWOL at the time of the injury, illness, or disease.

(5) The Soldier's injury, illness, or disease is documented in his or her medical records by a physician at the time of referral into the PDES.

3. Based on the criteria listed above, the majority of cases referred into the PDES do not require an LODI. Therefore, MTFs should not hold up the processing of Medical Evaluation Boards (MEBs) pending an LODI unless there is clear evidence to support the need for an approved LOD to accompany the MEB.

4. The point of contact for this memorandum is the Patient Administration Division, US Army Medical Command, DSN 471-6113 or Commercial 210-221-6113.

FOR THE COMMANDER:

WILLIAM H. THRESHER
Chief of Staff