

*Superseded by
AR 600-6
5 May 1969*

AR 40-207
C 1

MEDICAL SERVICE
INDIVIDUAL SICK SLIP

CHANGES }
No. 1 }

HEADQUARTERS,
DEPARTMENT OF THE ARMY
WASHINGTON 25, D.C., 27 February 1963

AR 40-207, 3 September 1957, is changed as follows:

1. Purpose and scope.

* * * * *

b. (Superseded) The sick slip constitutes a medium for the exchange of information between the medical officer concerned and the patient's unit commander. It is the basis for necessary entries in the Morning Report (DA Form 1) and, when required, for the initiation of further action by the unit commander to establish the line of duty status of the patient. In addition, a copy of the sick slip in cases of nonbattle injury may be used as the means of reporting accidents to the safety officer concerned. See paragraph 3.1.

* * * * *

3.1 Accident reporting. (Added) Installation commanders are authorized to make use of a duplicate copy of the sick slip in lieu of DA Form 1051 (AR 385-40) in cases of injury of Army active duty military personnel for whom sick slips are ordinarily prepared. When such a procedure is adopted, the individual initiating the sick slip will check the "Illness" or "Injury" box at the top of the form, as appropriate. Two copies of the sick slip will be initiated for injuries (or for any case—e.g., suspected poisoning, or loss of consciousness—in which it has not been determined whether "illness" or "injury" is more appropriate). After the medical officer's section of the sick slip has been completed for an injury case, the second copy of the slip will be forwarded to the safety officer concerned by means of a Memo Routing Slip (DD Form 95).

INDIVIDUAL SICK SLIP		DATE
<input type="checkbox"/> ILLNESS <input checked="" type="checkbox"/> INJURY		15 Jul 63
LAST NAME - FIRST NAME - MIDDLE INITIAL OF PATIENT		ORGANIZATION AND STATION
PETREE, LAWRENCE M.		Co "G" 18th Inf Fort Wadsworth, U. S. Army Staten Island, N. Y.
SERVICE NUMBER	GRADE/RATE	
RA 6880422	SFC	
UNIT COMMANDER'S SECTION		MEDICAL OFFICER'S SECTION
IN LINE OF DUTY		IN LINE OF DUTY
No (M)		Und.
REMARKS		DISPOSITION OF PATIENT
Injured while engaged in a brawl		<input type="checkbox"/> DUTY <input type="checkbox"/> QUARTERS <input type="checkbox"/> SICK BAY <input checked="" type="checkbox"/> HOSPITAL <input type="checkbox"/> NOT EXAMINED <input type="checkbox"/> OTHER (Specify):
HQ FORT WADSWORTH, U. S. ARMY, New York, 27 Jul 63 Administrative determination of "in line of duty" made by officer exercising SFCM jurisdiction. Preliminary investigation disclosed that soldier was attempt- ing to quell a disorder.		REMARKS
		J J CRAWLEY, Col Inf, Cmdg.
SIGNATURE OF UNIT COMMANDER		SIGNATURE OF MEDICAL OFFICER
Robert C. Moier, Capt Inf.		A. M. Schemann, Capt MC

DD FORM 689
1 MAR 63

PREVIOUS EDITIONS ARE OBSOLETE.

Figure 1. (Superseded).

[AZRZ]

By Order of the Secretary of the Army:

EARLE G. WHEELER,
General, United States Army,
Chief of Staff.

Official:

J. C. LAMBERT,
Major General, United States Army,
The Adjutant General.

Distribution:

Active Army and USAR: To be distributed in accordance with DA Form
12-9 requirements for DA Regulations—Medical Service—A.
NG: State AG (3).

Superseded by
AR 600-6, 1969
5 May *AR 40-207

ARMY REGULATIONS }
No. 40-207

HEADQUARTERS,
DEPARTMENT OF THE ARMY
WASHINGTON 25, D. C., 3 September 1957

MEDICAL SERVICE
INDIVIDUAL SICK SLIP

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SECTION I
GENERAL

1. Purpose and scope. *a.* These regulations prescribe the procedures for the preparation and disposition of the Individual Sick Slip (DD Form 689), an informal memorandum pertaining to a person who has requested and/or received medical attention. Such a person is referred to herein as the patient.
- b.* The sick slip constitutes a medium for the exchange of information between the medical officer concerned and the patient's unit commander. It is the basis for necessary entries in the Morning Report (DA Form 1) and, when required, for the initiation of further action by the unit commander to establish the line of duty status of the patient.
- c.* The sick slip *is not a record*. It will be destroyed as soon as it accomplishes its primary purpose, which is to notify a unit commander of the status of a member of his command who has reported sick. The one exception to this procedure is when the sick slip is referred to an officer exercising special court-martial jurisdiction for determination of line of duty (par. 10*c* and *d*).
- d.* Individual permanent records of the sick and wounded who are or are not excused from duty are maintained by all Army medical

*These regulations supersede SR 40-600-5, 30 December 1952.

treatment facilities in accordance with AR 40-400. The morning report is the unit's permanent record of its personnel who were hospitalized or otherwise excused from duty.

2. Responsibility. The sick slip consists of three parts: the identification data, the unit commander's section, and the medical officer's section.

a. The identification data may be filled in by or for the patient either at his place of duty or at the medical treatment facility, depending upon local arrangements.

b. Persons responsible for the preparation and accuracy of the unit commander's section are as follows:

- (1) Commanding officers of organizations required to maintain morning reports (par. 6, AR 335-60), except medical holding detachments and similar units consisting entirely of persons in a patient status.
- (2) Confinement officers of guardhouses and stockades.
- (3) Unit instructors of the Army Reserve for reservists who, while participating in Reserve duty training as defined in SR 140-180-15, sustain injury.
- (4) Commandants of United States disciplinary barracks and branches thereof for military prisoners.

c. Commanding officers of medical treatment facilities, or officers of the Army Medical Service, contract surgeons, or civilian physicians charged with furnishing medical service, are responsible for preparation and accuracy of the medical officer's section. Such persons are referred to herein as medical officers.

d. Commanders of installations are enjoined to exercise sufficient supervision over the implementation of these procedures to assure that abuses are held to the minimum.

3. Line of duty. Department of the Army policies and procedures governing determination of line of duty status in all cases of injury (including wounded in action cases), disease, or death are contained in AR 600-140.

4. Release of information. Information concerning injury or disease necessary to allay the anxiety of the person designated to be notified in case of an emergency, or next of kin, or other relative, may be imparted in accordance with AR 40-200, AR 345-20, AR 300-5, and SR 600-400-10; however, information as to line of duty status will be released to such persons only by The Adjutant General.

SECTION II

PROCEDURES

5. Applicability. These procedures are applicable to all personnel in the categories listed below :

- a. Personnel of the active Army.
- b. Personnel of other uniformed services of the United States and friendly foreign powers who receive medical treatment from the Army.
- c. Reservists injured while participating in Reserve duty training.
- d. Military prisoners, including those in confinement at United States Disciplinary Barracks and branches thereof.
- e. Prisoners of war.

6. Initiation. a. The sick slip normally will be initiated by the unit in which the patient is assigned or attached for duty and will accompany such person to the medical facility. However, when a patient is authorized to report direct to the medical treatment facility as a result of local arrangements, in case of emergency, or in the case of personnel referred to in paragraph 5b, the sick slip will be initiated at the medical treatment facility, unless it is not required in accordance with paragraph 9d.

b. Normally, a new sick slip will be initiated for each subsequent visit to the medical treatment facility using the current date and not the date taken sick. However, when it is deemed more practicable to do so, the original slip may be used for subsequent visits to the medical treatment facility in connection with the same illness or injury. When the latter procedure is followed, the date, disposition, and remarks (if any) will be entered on the reverse of the original slip for each such visit until final disposition is made.

c. In those medical treatment facilities where an admission and disposition sheet is not prepared and distributed to organizations concerned, or no other medium of notification is used, and in all cases involving personnel referred to in paragraph 5b, the sick slip will be utilized to notify the unit commander of the final disposition of a patient in "hospital," "infirmary," or "quarters" status.

7. Unit commander's section. The unit commander's section need not be prepared if the line of duty determination is "yes" or "no (EPTE)." In all other cases, the unit commander's section will be prepared as prescribed below, either before or after preparation of the medical officer's section, depending on the circumstances involved. Line of duty determinations will be made in accordance with AR 600-140.

a. In line of duty. When the line of duty determination is other than "yes" or "no (EPTE)," the unit commander will make an entry in one of the following terms:

- (1) "No (M)" if it appears that "not in line of duty, due to own misconduct" is appropriate (except for venereal disease).
- (2) "No (AWOL)" if it appears that "not in line of duty, not due to own misconduct" is appropriate because of an unauthorized absence.
- (3) "Und" if doubt exists as to line of duty. This entry is mandatory in all cases of injury sustained by a reservist participating in Reserve duty training.

b. Remarks. Any additional information which the unit commander feels may aid the medical officer or the officer exercising special court-martial jurisdiction in determining line of duty status, may be entered (fig. 1). This space also may be used to make any specific request of the medical facility. For example:

"Can this man do KP"

"Request psychiatric examination"

"Indicate time released from dispensary"

c. Signature of unit commander. Whenever the unit commander's section is prepared and contains any of the terms listed in *a* or *b* above, it will be signed by the unit commander personally.

8. Medical officer's section. The medical officer's section will be prepared as prescribed below immediately upon completion of examination and disposition of the patient. Line of duty determinations will be made in accordance with AR 600-140.

a. In line of duty. Whenever it appears that "in line of duty" is appropriate, no entry is required in this space. In all other cases the examining medical officer will make an entry in one of the following terms:

- (1) "No (AR 35-1035)" if it appears that "not in line of duty, due to own misconduct" is appropriate because of the effects of a disease, as distinguished from injury, which is directly attributable to and immediately follows the intemperate use of alcoholic liquor or habit-forming drugs.
- (2) "No (VD)" if it appears that "not in line of duty, due to own misconduct" is appropriate because of venereal disease not properly reported for treatment.
- (3) "No (EPTE)" if it appears that "not in line of duty, not due to own misconduct" is appropriate because the condition existed prior to entry into military service and was not aggravated by military service.

(4) "Und" (undetermined) is mandatory in any of the following cases:

- (a) Whenever doubt exists as to line of duty.
- (b) Whenever the unit commander's section of the sick slip indicates line of duty as "No (any reason)" or "Und."
- (c) In all cases of *injury* sustained by a reservist participating in Reserve duty training.
- (5) "NA" (for "not applicable") in cases of pregnancy, or normal complications and sequelae.

b. Disposition of patient. The disposition of the patient will be indicated by a check mark in the appropriate box provided on the form.

c. Remarks. Any additional information or instructions which the medical officer wishes to convey to the patient's unit commander may be entered, if desired. *For example:*

"Return on sick call 10 Mar"

"Not to handle food"

"Right sleeve should be kept rolled up"

d. Signature of medical officer. The signature of the medical officer who actually examined the patient is required only if—

- (1) An entry is made concerning line of duty.
- (2) Other than "duty" is checked as disposition of the patient.
- (3) Additional instructions are entered under "Remarks."

In all other cases the medical officer's section need not be signed.

9. Disposition of individual sick slips by medical facilities. *a.* Sick slips will be forwarded as expeditiously as practicable to the patient's unit commander (par. 12*b*).

b. When required by local standing operating procedures or when so requested in the unit commander's section in any individual case, the time the patient was released from the medical treatment facility for return to his organization will be indicated in the medical officer's section on the slip.

c. When the patient is from an organization that is not normally serviced by the medical treatment facility forwarding the sick slip, the name and location of the medical treatment facility will be entered on the slip prior to forwarding.

d. In the case of a patient who has reported direct to the medical treatment facility, or under other exceptional circumstances, a sick slip need not be forwarded to the patient's commanding officer if no change in duty status is involved or if some other medium of notification is used.

10. Action by unit commander after receipt of sick slip from medical facility. When a sick slip is received, or returned from the

medical treatment facility, the unit commander (or person responsible for preparing the unit commander's section) will complete any of the actions listed below that may be required.

a. He will make necessary entries in the morning report as required by AR 335-60.

b. He will prepare the unit commander's section, if such preparation is required, but was not accomplished prior to the preparation of the medical officer's section.

c. If he does not agree with the opinion of the medical officer regarding the line of duty status, he may take the matter up with the medical officer in an effort to establish the proper line of duty status of the patient, or will refer the sick slip to the officer exercising special court-martial jurisdiction for decision or investigation.

d. If "Und" was the line of duty entry, and/or an entry authorized without investigation cannot be mutually determined, the sick slip will be referred to the officer exercising special court-martial jurisdiction for decision or investigation.

e. When no further action is required, the sick slip will be destroyed.

11. Action by the officer exercising special court-martial jurisdiction. *a.* The officer exercising special court-martial jurisdiction will determine the line of duty status in any case referred to him for decision in accordance with AR 600-140.

b. When the officer exercising special court-martial jurisdiction determines that a formal investigation is not required, or discontinues a formal investigation to make an administrative determination, he will enter such administrative determination, including all circumstances involved, on the sick slip (fig. 1).

c. When action is taken according to *b* above, the commanding officer of the medical facility and the unit commander will be advised to correct the medical record and the morning report respectively, after which the sick slip will be filed permanently in the field military 201 file of the individual concerned.

12. Forwarding individual sick slips. *a. To medical officer.* Sick slips may be hand-carried by the patient or by any individual responsible for escorting the patient to the medical treatment facility.

b. To patient's unit commander. Sick slips normally will be hand-carried by the patient or by any individual responsible for escorting the patient. When this is impracticable, they may be forwarded through the message center or other appropriate mail or distribution channels. Care will be exercised to insure that the most expeditious means available is used to get the sick slips to unit commanders.

c. To officer exercising special court-martial jurisdiction or unit personnel officer. Sick slips may be forwarded by Memo Routing Slip (DD Form 94 or DD Form 95). However, when it becomes necessary

to file a sick slip in the field military 201 file of the patient, the memo routing slip will be removed and destroyed. If the routing slip contains any pertinent data that should be made a matter of record, such data will be transcribed on to the sick slip.

d. Commanders of installations. Commanders of installations are responsible for establishing appropriate implementing procedures to assure the expeditious transmittal of sick slips to unit commanders.

INDIVIDUAL SICK SLIP		DATE
LIST NAME—FIRST NAME—MIDDLE INITIAL OF PATIENT PETREE, LAWRENCE M.		15 Jul 57
ORGANIZATION AND STATION Co "C" 18th Inf Fort Wadsworth, U. S. Army Staten Island, N. Y.		
SERVICE NO. RA 6880422	GRADE/RATE SFC	
UNIT COMMANDER'S SECTION		MEDICAL OFFICER'S SECTION
IN LINE OF DUTY No (M)	IN LINE OF DUTY Und.	
REMARKS Injured while engaged in a brawl.	DISPOSITION OF PATIENT <input type="checkbox"/> SICK BAY OR INFIRMARY <input type="checkbox"/> NOT EXAMINED <input type="checkbox"/> DUTY <input checked="" type="checkbox"/> HOSPITAL <input type="checkbox"/> OTHER (Specify)	
HQ FORT WADSWORTH, U. S. ARMY, New York, 27 Jul 57 Administrative determination of "in line of duty" made by officer exercising SPCM jurisdiction. Preliminary investigation disclosed that soldier was attempting to quell a disorder.		REMARKS J J Crawley J J CRAWLEY, Col Inf, Cmdg.
SIGNATURE OF UNIT COMMANDER Robert E. Moier, Capt Inf		SIGNATURE OF MEDICAL OFFICER R. M. Schumann, Capt, MC

DD FORM 689

Replaces WD AGO Form 5, 1 May 54, which is obsolete.

U. S. GOVERNMENT PRINTING OFFICE : 1952-O-234194

Figure 1.

[AG 330.33 (22 Aug 57) AGAS]

By Order of *Wilber M. Brucker*, Secretary of the Army:

MAXWELL D. TAYLOR,
General, United States Army,
Chief of Staff.

Official:

HERBERT M. JONES,
Major General, United States Army,
The Adjutant General.

Distribution:

Active Army: A.

To be distributed on a need-to-know basis to all units and headquarters down to and including companies and batteries and to units and headquarters of comparable size.

*NG: State AG.**USAR: None.*

TAGO 1364B

U. S. GOVERNMENT PRINTING OFFICE: 1957