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ARMY REGULATION

No. 600-6

HEADQUARTERS
DEPARTMENT OF THE ARMY
WASHINGTON, DC, 27 June 1973

PERSONNEL—GENERAL

INDIVIDUAL SICK SLIP (DD FORM 689)

Effective 1 August 1973

This is a complete revision of AR 600-6 and changes are made throughout. Local limited supplementation of this regulation is permitted, but not required. If supplements are issued, Army Staff agencies and major Army commands will furnish one copy of each to HQDA (DASG-HCP). Other commands will furnish one copy of each to the next higher headquarters.

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Section I. GENERAL

1. Purpose and scope. *a.* This regulation prescribes the procedures for the preparation and disposition of the Individual Sick Slip (DD Form 689) (fig. 1). The Individual Sick Slip is an informal memorandum, pertaining to an individual who has requested and/or received medical or dental attention. Such a person is referred to hereafter as the patient.

b. Commanders of installations will prescribe the organizations under their commands that will utilize the Individual Sick Slip. However, it may be used at any time as a means for an exchange of information between the attending AMEDD officer and the patient's unit commander. In addition, in cases of nonbattle injuries, the second copy of the Individual Sick Slip when prepared may be used to report accidents to the appropriate safety officer (para 3). The Individual Sick Slip is not a permanent record. It will be destroyed as soon as it accomplishes its intended purposes.

c. The term medical treatment facility includes both medical and dental facilities.

2. Responsibility. The Individual Sick Slip consists of three parts: the identification data, the unit

commander's section, and the medical officer's section.

a. The Individual Sick Slip when prepared will be completed in original for disease cases—original and one carbon copy for all nonbattle injury cases.

b. The identification data may be filled in by or for the patient, however, officials listed below are responsible for the accuracy of the identification data and the unit commander's section:

- (1) Confinement officers of guardhouse and stockades.
- (2) Commanders of organizations.

c. Preparation of the medical officers' section rests with the following: Commanders of medical treatment facilities, all officers of the Army Medical Department, contract surgeons, civilian physicians responsible for furnishing medical or dental care and other personnel responsible for treating a patient. Hereafter the term medical officer will include all of these practitioners.

3. Accident reporting. When Army active duty military personnel are injured (nonbattle), and after the medical officer's section of the Individual

*This regulation supersedes AR 600-6, 7 September 1972.

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Sick Slip has been completed, the second copy of the Individual Sick Slip may be forwarded by the unit commander to the safety officer concerned,

by means of an OF 41 (Routing and Transmittal Slip), in lieu of DA Form 1051 (Record of Injury) (AR 385-40).

Section II. PROCEDURES

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

- a. Active duty Army.
- b. Other members of the uniformed services of the United States and Allied Nations that receive medical treatment from Army medical treatment facilities.
- c. Reserve and National Guard (NG) personnel while participating in active duty training.
- d. Military prisoners, including those in confinement at United States Disciplinary Barracks and branches thereof.
- e. Prisoners of war.

5. Initiation. When usage of the Individual Sick Slip is desired, it will be initiated by the unit to which the patient is assigned or attached. A new Individual Sick Slip will be initiated for each visit to the medical treatment facility. It will accompany the individual to the medical treatment facility. However, when a patient is authorized to report directly to the medical treatment facility as a result of local procedures, in case of an emergency, or in the case of personnel referred to in paragraph 4b, and the medical treatment facility desires to communicate with the patients' unit commander, the Individual Sick Slip will be initiated at the medical treatment facility.

6. Unit commander's section. a. "*Line of duty*" block. Leave blank.

b. "*Remarks*" block. The following information will be entered in "Remarks" block when an Individual Sick Slip is prepared for all individuals referred to a medical treatment facility:

- (1) Duty status at time of condition (e.g., Duty, Leave, AWOL, etc).
- (2) For all nonbattle injuries, enter circumstances of how, when and where, of the condition.
- (3) "Remarks" block may also be used to relay any specific request of the medical treatment facility. For example: "Request psychiatric examination, 'Can this man do K.P.," etc.
- (4) If the commander or his designee has information which may be of benefit to the medical officer, in the treatment of the patient, he may

use the "Remarks" block for entry of such information.

c. The commander or his designee will sign this section.

7. Medical officer's section. Upon completion of examination and disposition, this section will be prepared as set forth below:

a. "*Line of duty*" block. Leave blank. Line of duty determinations will be based upon the information provided within the commanders' remarks block and the medical officers' evaluation. Action will be taken as appropriate under the provision of AR 600-33.

b. "*Disposition of patient*" block. The disposition of the patient will be indicated by a check mark in the appropriate box provided on the form as follows:

- (1) DUTY: When returned to unit for medically unrestricted duty.
- (2) QUARTERS: When returned to unit or home for medically directed self-treatment and patient is not to perform military duty until a medical officer indicates that he may perform such duty.
- (3) SICK BAY: Not used by Army medical treatment facilities.
- (4) HOSPITAL: When admitted to a hospital for inpatient care and will not return to unit until released by a medical officer.
- (5) NOT EXAMINED: Must be explained in "Remarks" block if checked (i.e., To report to eye clinic next Tuesday, 0900 hrs).
- (6) OTHER: When specific "Remarks" have been recorded, which do not pertain to the above disposition instructions (i.e., Not to perform K.P.).

c. "*Remarks*" block. In this block the medical treatment facility will enter the time and date that the patient was released to return to duty, e.g.: RETURNED TO DUTY, 1000 hrs 19 March 197X. Any other additional information or instructions, which the medical officer wishes to con-

vey to the patient's unit commander, may be entered, for example:

"Return on sick call 21 Mar."

"Not to handle food" in mess hall duties.

"Right sleeve should be kept rolled up."

d. "Signature of medical officer" block. The signature of the medical officer who actually examined the patient or his designated representative is required on all DD Forms 689 prepared at Army medical treatment facilities. Also, when the patient is from an organization that is not normally serviced by the medical treatment facility forwarding the Individual Sick Slip, the name and location of that medical treatment facility will be entered in the "Signature of Medical Officer" block, prior to returning to unit concerned.

8. Disposition of Individual Sick Slips by medi-

cal treatment facilities. Normally, they will be handcarried by the patient or by an individual responsible for escorting the patient. When this is infeasible, they will be forwarded as quickly as practicable to the patient's unit commander.

9. Action by unit commander after receipt of Individual Sick Slip from medical treatment facility. When the Individual Sick Slip is received from a medical treatment facility other than the one which maintains the patient's Health Record (DD Form 722) file, forward the Individual Sick Slip to the custodian of the patient's Health Record. Necessary data from the Individual Sick Slip will be transcribed to the Health Record unless appropriate records have been furnished by the treatment facility for inclusion in the Health Record.

| INDIVIDUAL SICK SLIP | | DATE |
|---|------------|--|
| <input type="checkbox"/> ILLNESS <input type="checkbox"/> INJURY | | 17 May 197X |
| LAST NAME - FIRST NAME - MIDDLE INITIAL OF PATIENT | | ORGANIZATION AND STATION |
| SMARTER, ADOLPHUS P. | | Co A, 122 ORD BN |
| SERVICE NUMBER/SSAN | GRADE/RATE | CAMP PINEY, SC |
| UNIT COMMANDER'S SECTION | | MEDICAL OFFICER'S SECTION |
| IN LINE OF DUTY | | IN LINE OF DUTY |
| REMARKS | | DISPOSITION OF PATIENT |
| EM INJURED HIS LEFT KNEE WHILE PLAYING BASKETBALL IN POST GYM, AT 2100, 16 MAY 197X | | <input type="checkbox"/> DUTY <input type="checkbox"/> QUARTERS <input type="checkbox"/> SICK BAY <input type="checkbox"/> HOSPITAL <input type="checkbox"/> NOT EXAMINED <input checked="" type="checkbox"/> OTHER (Specify): |
| REMARKS | | REMARKS |
| | | NO STRENUOUS EXERCISE FOR 24 HOURS. RETURNED TO DUTY 1000, 17 MAY 7X RETURN TO SICK CALL, 18 MAY 7X |
| SIGNATURE OF UNIT COMMANDER | | SIGNATURE OF MEDICAL OFFICER |
| S.M. Sures, CPL, ORDC | | G.V. Positive, CPT, MC |

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Previous Editions Are Obsolete

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Figure 1.

The proponent agency of this regulation is the Office of The Surgeon General. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications) direct to HQDA (DASG-HCP) WASH DC 20314

By Order of the Secretary of the Army:

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