



REPLY TO  
ATTENTION OF:

**DEPARTMENT OF THE ARMY**  
**HEADQUARTERS, EIGHTH UNITED STATES ARMY**  
**UNIT #15236**  
**APO AP 96205-0009**

EACG

**27 OCT 2008**

MEMORANDUM FOR All Eighth United States Army Assigned Soldiers and Civilians

SUBJECT: Eighth United States Army (EUSA) Command Policy Letter # 30 - Incident Reporting Procedures for Medical Facilities to Area Provost Marshal Offices (PMO)

1. Reference.

- a. USFK Regulation 190-40, Serious Incident Reporting, 2 May 06.
- b. AR 190-45, Law Enforcement Reporting, 30 Apr 07.
- c. USFK Regulation 190-50, Law Enforcement Procedures in Korea, 12 Jun 98.
- d. AR 40-66, Medical Record Administration and Health Care Documentation, 17 Jul 08.
- e. AR 600-20, Army Command Policy, 18 Apr 08.
- f. DoD 6025.18R, Health Information Privacy Regulation, 24 Jan 03.
- g. Public Law 104-191, Health Insurance Portability and Accountability Act of 1996, 21 Aug 96.
- h. DA Memorandum, Restricted Reporting Policy for Incidents of Domestic Abuse, 26 Apr 06.

2. Purpose: To establish EUSA policy on the timelines, procedures and types of incidents that must be reported by military medical clinics and urgent care centers to the Area Provost Marshall Office (PMO).

3. Background: On-duty medical personnel or their designated representative at all Military Treatment Facilities (MTFs) to include hospitals, Troop Medical Clinics and Battalion Aid Stations must report incidents appearing criminal or suspicious in nature, or any other incidents identified as serious incidents reportable per AR 190-45 and USFK Regulation 190-40 to the nearest PMO in a prompt and timely manner.

4. Discussion:

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a. This policy applies to incidents involving military personnel and their family members, invited contractor personnel and their family members, technical representatives and their family members. KATUSA personnel, Korean national employees acting within the scope of their duties, and members of their families when U.S. facilities / equipment are involved.

b. At a minimum, the following incidents will be reported to the installation PMO:

(1) Deaths occurring on EUSA installations, regardless of cause, and deaths of Status of Forces Agreement (SOFA) personnel and service members off post.

(2) Injuries resulting from firearms, knives, or other weapons.

(3) Injuries caused by beatings and/or assaults.

(4) Injuries caused by any traffic or motor vehicle accidents.

(5) Suicidal actions of any kind (doctors will provide a medical opinion as to the type of act, i.e., attempted suicide, suicidal ideation).

(6) Drug overdoses of any kind, including overdoses of over-the-counter and/or prescription medication.

(7) Sexual assaults.

(a) Cases involving service members who choose restricted reporting procedures will not be reported to law enforcement personnel IAW AR 600-20, Appendix H unless one or more of the exceptions to confidentiality identified in AR 600-20, Appendix H applies. As an additional restriction, protected health information may not be disclosed except as permitted in DoD 6025.18-R.

(b) Cases involving service members who choose unrestricted reporting procedures, contractors, family members of service members and contractors, and all other personnel covered under the US-ROK SOFA will be immediately reported to law enforcement personnel.

(8) Domestic violence incidents.

(a) Cases involving adult victims (to include service members, contractors, family members and civilians) who choose restricted reporting procedures will not be reported to law enforcement personnel IAW DA Memorandum, Restricted Reporting Policy for Incidents of Domestic Abuse, 26 Apr 06, unless one or more of the exceptions to confidentiality identified in that Memorandum applies. As an additional restriction, protected health information may not be disclosed except as permitted in DoD 6025.18-R.

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(b) Cases involving adult victims who choose unrestricted reporting procedures will be immediately reported to law enforcement personnel.

(9) Incidents involving child abuse or neglect. Protected health information may not be disclosed except as permitted in DoD 6025.18-R.

(10) This list is not all inclusive. It is expected that common sense will play a role in determining what incidents are to be reported; e.g., reasonable suspicion or knowledge that the injury is the result of a crime or illegal act. If there is any doubt whether an incident should be reported, medical personnel should seek guidance from PMO or Staff Judge Advocate.

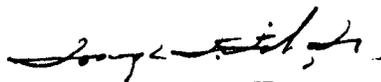
c. Confidentiality of protected health information for all personnel will be maintained IAW DoD 6025.18-R, regardless of whether individuals elect restricted or unrestricted reporting (when applicable).

d. Reportable incidents are to be reported to law enforcement personnel as soon as medical conditions permit.

(1) Medical personnel will contact their respective installation PMO and notify them that an incident has occurred.

(2) PMO will dispatch an investigator to the medical facility to gather appropriate information on the victim (name, unit, SSN, etc.) and/or to initiate an investigation.

5. Proponent: The Law Enforcement Division, 8<sup>th</sup> Army Provost Marshal, is the Office of Primary Responsibility (OPR) for all law enforcement reports and reporting procedures in the KTO. The POC can be contacted at 011-822-7918-6389 or DSN 738-6389.



JOSEPH F. FIL, JR.  
Lieutenant General, USA  
Commanding