



DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234-6200

REPLY TO
ATTENTION OF:

MCHE-TC

28 August 2003

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Troop Command Policy #33, Reporting Policy for Serious Incident Reports (SIR)

1. REFERENCES.

a. AR 190-40, Military Police Serious Incident Report, November 1993.

b. GPRMC Policy 1-02-04, Great Plains Regional Medical Command Serious Incident Report Policy, August 2002.

2. PURPOSE. To prescribe policy for the submission of serious incident reports (SIR) for all units assigned or attached to the Brooke Army Medical Center Troop Command.

3. PROPONENT AND EXCEPTION AUTHORITY. The proponent of this policy is the Brooke Army Medical Center Troop Commander. The BAMC TRP CDR has the authority to approve exceptions to this policy that are consistent with controlling laws and regulations.

4. EXPLANATION OF TERMS AND ABBREVIATIONS. Abbreviations and special terms are listed in the glossary.

5. APPLICABILITY. This policy applies to all personnel assigned and attached to BAMC and BAMC Troop Command, including Active Army, members and organizations of the Army National Guard of the United States (ARNGUS) including periods when operating in their Army National Guard (ANG) capacity, U.S. Army Reserve, Department of Defense (DOD) civilians, and contractor personnel (when authorized by contract).

6. OBJECTIVES.

a. Establish a timely, inclusive procedure for reporting serious incidents according to GPRMC Policy 1-02-04.

b. Prescribe the general duties and responsibilities of commanders, staffs, and the Administrative Officer of the Day (AOD) for reporting SIR events.

c. Define SIR events. Prescribe the proper reporting formats. Describe the routing of a SIR report during the duty day and during non-duty hours.

7. RESPONSIBILITIES.

a. The Chief, Security Plans Office (C,SPO) includes this policy in AOD operating procedures book. The C,SPO will update phone rosters that coincide with the notification rosters in Appendix D.

b. The affected company commander notifies the C,SPO and contacts GPRMC and the BAMC Provost Marshal after learning of a serious incident in their company **during the duty day**. The company commander will forward the SIR to the C, SPO; the Troop Commander; GPRMC EOC; the BAMC Provost Marshal; the BAMC Commander; BAMC DCA; and the FSH Installation Commander, Chief of Staff, and CSM. (See Appendix C for Reporting Procedures and Appendix D for notification rosters.)

c. The AOD is the first contact to GPRMC and the BAMC Provost Marshal after learning of a serious incident **during non-duty hours**. The AOD must notify the affected company commander and C,SPO that an incident has occurred. If the next duty day is within 12 hours of learning of the event, the AOD will forward the SIR to the affected company commander. If the next duty day is not within 12 hours, the AOD will forward the SIR to the GPRMC FOW, the BAMC C,SPO, the BAMC Commander, and the appropriate company commander. (See Appendix C for Reporting Procedures and Appendix D for notification rosters.)

d. Company commanders or operational section NCOICs should notify the Troop Commander, Troop Command CSM, and C,SPO after learning of a serious incident during duty hours. Company commanders must ensure BAMC Form 889 is completed and forwarded to the Safety Office. (See Appendix E, Required Forms.)

8. **REPORTABLE INCIDENTS.** Reportable incidents are included in Appendix B.

9. REPORTING REQUIREMENTS FOR SIR.

a. Category 1 SIR (Immediate concern to MEDCOM and DA). SPO or AOD must contact Installation Provost Marshal and the GPRMC Commander (or designated representative) within 12 hours of learning of the incident.

b. Category 2 SIR (Require timely notification to MEDCOM and DA). SPO must contact Installation Provost Marshal and GPRMC within 24 hours of learning of the incident.

c. Category 3 SIR (Concern to MEDCOM). SPO must contact GPRMC within 24 hours of learning of the incident.

d. For category 1 SIR, if 12 hours will elapse before the next duty day, the AOD will forward the SIR to GPRMC FOW, notify the C, SPO of the event and then notify the Installation Provost Marshal. If the next duty day begins within the 12-hour window, the AOD will forward the SIR to the affected company commander and C,SPO.

10. REPORTING PROCEDURES. See Appendix C.

a. During normal duty hours (0730-1600).

(1) The Company Commander will notify the Troop Commander/CSM and C,SPO before filling out BAMC Form 889 and forward to the BAMC Safety Office.

(2) The affected company commander, or designated representative, will contact the BAMC CSM, the BAMC XO, and the PAO. The company commander will also contact GPRMC EOC, the BAMC Provost Marshal, and the Installation Military Police to notify them that a SIR event has occurred. (See Appendix D, Phone roster.)

(3) The affected company commander will prepare MEDCOM Form 104-R (see Appendix E, Forms for SIR) according to the reporting time for the corresponding category of incident, and send it to the GPRMC EOC, the BAMC Commander, the BAMC Troop Commander, the BAMC C,SPO, the BAMC Provost Marshal, the DCA, and the Installation CDR, CSM, and CofS.

(4) As appropriate, the installation MP will meet with the BAMC Provost Marshal to gather information about the incident. MP will submit their SIR to the Installation Provost Marshal. The Installation PM is responsible for notifying the Installation Commander; however, BAMC PM will also forward copy of SIR to Installation Commander.

(5) Call to verify the receipt of all forms sent by email or fax.

b. During non-duty hours (1700-0730, and weekends and holidays).

(1) AOD will page the GPRMC FOW and leave a contact number. Inform the FOW that a SIR will follow.

(2) AOD notifies the TRP CMD CSM, BAMC CSM, BAMC XO, C,SPO, and the PAO that a serious incident has occurred.

(3) AOD will also notify BAMC Provost Marshal and the Installation Provost Marshal that a serious incident has occurred.

(4) AOD fills out SIR on MEDCOM form 104-R.

(5) AOD will forward the report to the Company Commander, the Troop Commander, and the C,SPO.

(a) Category 1 SIR. The **company commander will** send the report to GPRMC FOW and GPRMC EOC, the BAMC Commander, BAMC CSM, BAMC C, SPO, and BAMC Troop Commander if the next duty day occurs within 12 hours of the event notification. If the next duty day is not within the next 12 hours, **the AOD will** forward

the report to GPRMC FOW and GPRMC EOC, the BAMC Commander, BAMC CSM, BAMC C, SPO, and BAMC Troop Commander.

(b) Category 2 and 3 SIR. The C,SPO will send the report to GPRMC FOW and EOC if the next duty day occurs within 24 hours. If the next duty day is not within 24 hours of learning of the incident, the AOD will forward the report GPRMC FOW and GPRMC EOC, the BAMC Commander, BAMC CSM, BAMC C, SPO, and BAMC Troop Commander.

(6) AOD will brief the C,SPO the following duty day of all actions concerning the SIR.

c. The point of contact for this action is the Chief, Security Plans Office at (210) 916-9770.

By order of the Commander:

6 Encl
A – References
B – Reportable Incidents
C – Reporting Procedures
D – Phone Roster
E – Forms for SIR
F – Glossary

JAMES A. MUNDY
LTC, MS
Commanding

DISTRIBUTION
A

ENCLOSURE A

References

Required Publications and Forms

AR 190-40

Military Police Serious Incident Report

GPRMC Policy 1-02-04

Great Plains Regional Medical Command Serious Incident Report Policy (Cited in para 6a.)

BAMC Form 889

Incident/Injury/Near Miss Report

MEDCOM Form 104-R

Report of Serious/Sensitive Incident

ENCLOSURE B

Reportable Incidents

Category 1 Serious Incidents

1. The following lists the nine types of Category 1 Serious Incidents. A Category 1 Serious Incident Report must be sent to the MEDCOM Provost Marshall within 12 hours of learning of the incident with a copy furnished to the GPRMC Security Officer.

a. On- and off-post riots, serious disturbances or demonstrations targeted against the Army or involving Army personnel.

b. War crimes, including mistreatment of enemy prisoners of war, violations of the Geneva Convention, and atrocities.

c. Requests by members of the U.S. Army for political asylum in foreign countries or indications of defection.

d. Terrorist activities, sabotage, and incidents initiated or sponsored by known terrorists, dissident groups, or criminal elements, which occur on an installation, or involve military personnel or property off an installation.

e. Bomb or explosive incidents resulting in death, injury of military personnel, or damage to military property.

f. Incidents involving material damage that seriously degrade unit operational or training readiness.

g. Threats against government weapons and ammunition.

h. Information on threats, plans or attempts to harm or kidnap, or other information bearing on the personal security of the President, or other persons protected by the Secret Service.

i. Any other incident the commander determines to be of immediate concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

Category 2 Serious Incidents

1. The following lists the 20 types of Category 2 Serious Incidents. A Category 2 Serious Incident Report must be sent to the MEDCOM Provost Marshall within 24 hours of learning of the incident with a copy furnished to the GPRMC Security Officer.

a. Theft, suspected theft, negligence, conflict of interest, wrongful appropriation, or willful destruction involving government (appropriated or non-appropriated) property or funds valued at more than \$50,000.

b. Racially or ethnically motivated criminal acts, otherwise known as "hate crimes."

c. Loss, theft, wrongful disposition, willful destruction, or mismanagement of:

(1) Evidence.

(2) Sensitive items (e.g. controlled drugs).

(3) Cryptographic items.

(4) Night vision devices.

d. Wrongful possession, manufacture or distribution of controlled substances, to include narcotics, drugs or marijuana in quantities exceeding:

(1) Cocaine: 40 grams.

(2) Marijuana: 600 grams.

(3) Hashish: 350 grams.

(4) Heroin: 30 grams.

(5) Amphetamines or barbiturates: 30 grams.

(6) LSD: 750 dose units.

(7) PCP: 30 grams.

e. Significant violations of Army standards of conduct, to include bribery, conflict of interest, graft, or acceptance of gratuities by soldiers or DA or NAF employees.

f. Incidents involving prisoners or detainees, to include escape, disturbances which require use of force, wounding or serious injury to a prisoner, and all prisoner deaths.

g. Theft, suspected theft, unaccounted or recovered arms, ammunition, and explosives in the following amounts:

(1) Any missile, rocket, or mine.

(2) Any machine gun or automatic weapon.

(3) Any fragmentation, concussion or HE grenade, or other type of simulator or device containing explosive materials, including artillery or ground burst simulators.

(4) Any explosive, to include detonation cord, blocks of C-4 explosives, etc.

(5) Five or more semi-automatic or manually operated firearms.

(6) Five or more rounds of ammunition greater than .50 caliber.

(7) 5,000 or more rounds of .50 caliber or smaller ammunition.

h. Armed robbery or break-ins, either actual or attempted, of arms rooms or storage areas for arms, ammunition, and explosives.

i. Trafficking in arms, ammunition, and explosives, including bartering for narcotics, taking arms, across international borders, regardless of quantity of arms, ammunition, or explosives involved.

j. Deaths, to include homicides, suicides, and deaths resulting from traffic accidents, fires, or other incidents. Excludes deaths from natural causes which occur in the MTF.

k. Kidnapping.

l. Major fires or natural disasters involving death, serious injury, property damage over \$100,000, or damage that seriously degrades unit operational or training capabilities.

m. Group breaches of discipline involving ten or more persons who collectively act to defy authority.

n. Training and troop movement accidents resulting in serious injury or death.

o. Maltreatment of soldiers or DA civilians to include assaults, abuse, or exploitation, where the offender has a trainer, supervisor, or cadre-trainee relationship with the victim, regardless of whether they are of the same organization.

- p. Violations of Army wiretap policies.
- q. Child abuse outside the family unit, for example in an Army organizational setting such as a child center, MTF, gymnasium, or an Army-sponsored activity such as youth sports or recreational activity, field trips, etc.
- r. Serious child injury or death, not resulting from child abuse, while the child is in the Army's care at a non-MTF, for example: quarters-based child care, youth activities center, etc, or within an Army sponsored or sanctioned activity.
- s. Incidents involving firearms that cause injury or death.
- t. Any other incident that the commander determines to be of concern to HQDA based on the nature, gravity, potential for adverse publicity, or potential consequences of the incident.

Category 3 Serious Incidents

1. The following lists the 14 types of Category 3 Serious Incidents. A Category 3 Serious Incident Report must be sent to the MEDCOM Provost Marshall within 24 hours of learning of the incident with a copy furnished to the GPRMC Security Officer.

- a. Any loss or theft of narcotics, dangerous drugs, controlled substances, precious metals, or radioactive materials, except non-suspicious inventory shortages from bulk logistics or pharmacy stocks.
- b. Aggravated assaults.
- c. Death from other than natural causes.
- d. Gunshot wounds.
- e. Serious disturbances, confrontations, or destruction of property in an MTF.
- f. Commissioned, warrant officers, or other key personnel accused of an offense other than a minor traffic violation.
- g. Rape, indecent assault, incest, or other sex offense.
- h. Abuse of position or power.
- i. Actual or alleged sexual harassment.
- j. Arson.

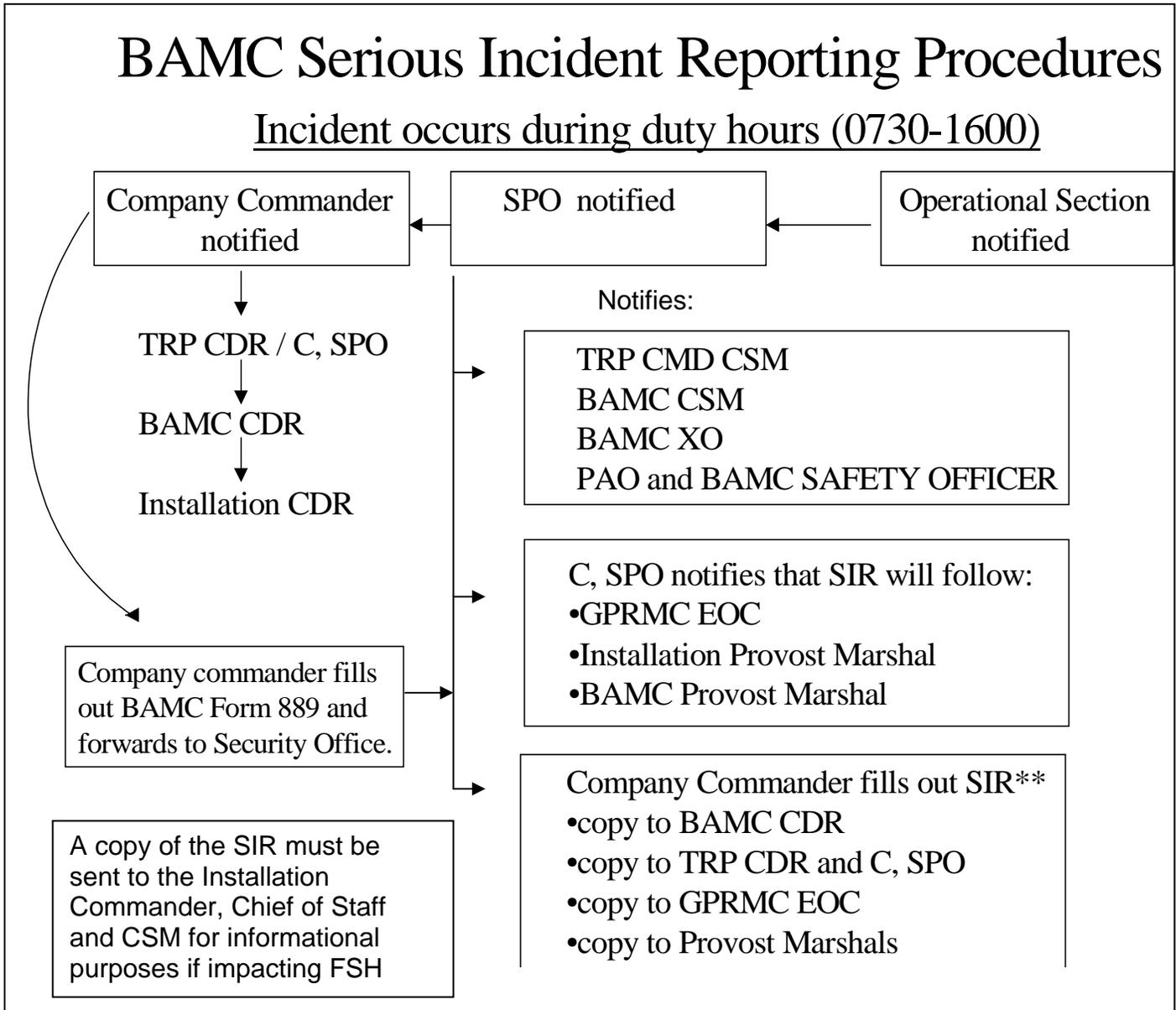
k. Incidents that result in the evacuation of patients such as fire, gas leak, power failure, bomb threat, or flood.

l. Suicide attempts that results in serious injury.

m. Requests from headquarters, federal or civil agencies, for emergency assistance in case of natural disasters, domestic emergencies, civil disturbances, civil defense operations, or law enforcement operations.

o. Training deaths irrespective of the soldier's unit, cause of death, or other considerations.

ENCLOSURE C
Reporting Procedures

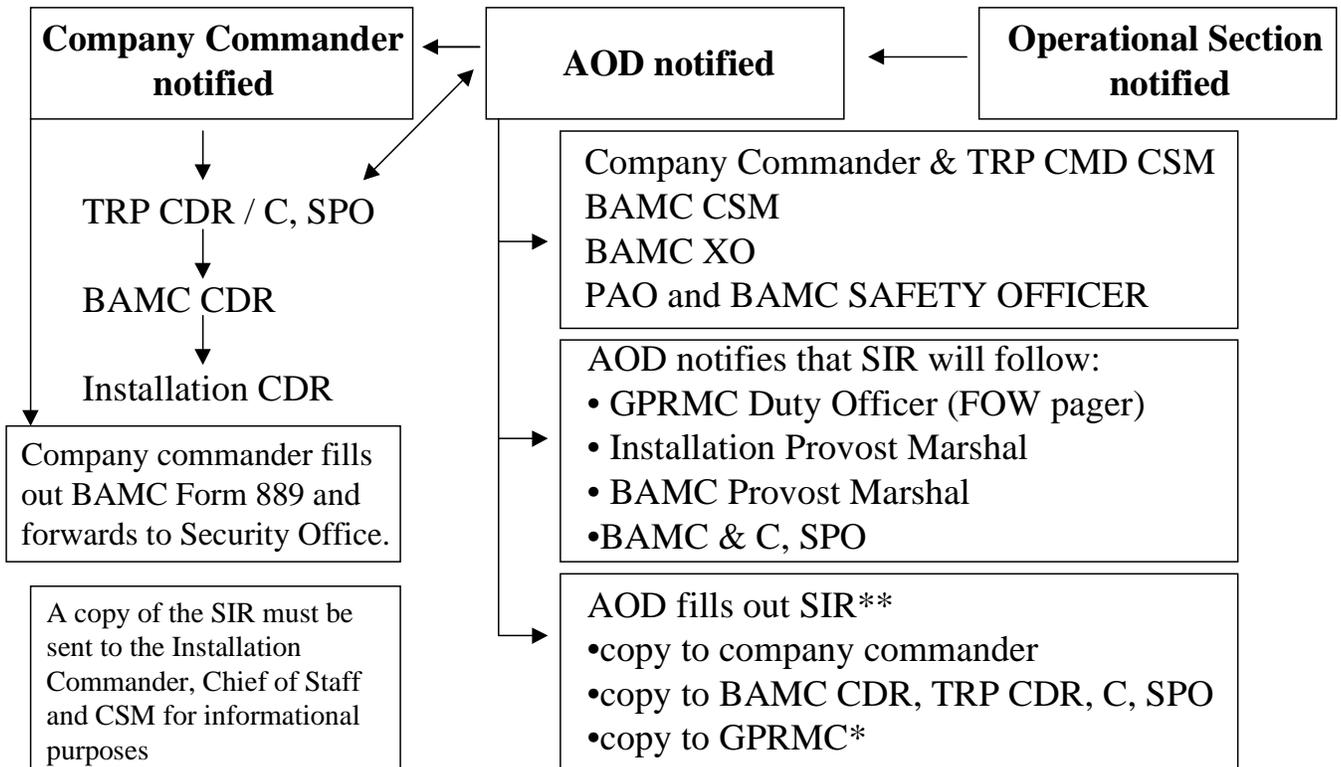


**Use MEDCOM Form 104-R for GPRMC SIR.

BAMC Serious Incident Reporting Procedures

Incident during non-duty hours

(weekdays after 1600, weekends and holidays)



* The Company Commander will forward SIR to GPRMC, Installation Provost Marshal, and BAMC Provost Marshal during next duty day if the serious incident occurs within 12 or 24 hours of the next duty day, based on the SIR category. See paragraph 10-b5 in Troop Command Policy #33 for further detail.

**Use MEDCOM Form 104-R for GPRMC SIR.

BAMC Serious Incident Reporting Procedures

SIR Categories

SPO or AOD will comply with the following timelines for reporting SIRs.

CATEGORY 1 SIR

Installation PM within
12 hours of learning of
incident

MEDCOM PM within
12 hours of learning of
incident

GPRMC Commander
within 12 hours of
learning of incident

CATEGORY 2 SIR

Installation PM within
24 hours of learning of
incident

MEDCOM PM within
24 hours of learning of
incident

GPRMC Commander
within 24 hours of
learning of incident

CATEGORY 3 SIR

MEDCOM PM
within 24 hours

GPRMC Commander
within 24 hours

The SPO will forward SIR to GPRMC, Installation Provost Marshal, and BAMC Provost Marshal during next duty day if the serious incident occurs within 12 or 24 hours of the next duty day, depending on the SIR category. See paragraph 10-b5 in Troop Command policy #33 for further detail.

ENCLOSURE D

Phone Roster

BAMC Duty Day Notifications (0730-1600)

A Company Commander

Office: (210) 916-7325

B/MED Hold Company Commander

Office: (210) 916-6409

C Company Commander

Office: (210) 916-6481

D Company Commander

Office: (210) 916-6437

HHC Company Commander

Office: (210) 916-6118

TRP CMD CSM

Office: (210) 916-9676/9745

Cell phone: (210) 827-5429

TRP CMD C,SPO

Office: (210) 916-9770

Pager: (210) 513-7090

BAMC CSM

Office: (210) 916-4217/1802

Cell phone: (210) 219-0639

BAMC XO

Office: (210) 916-2225

Pager: (210) 713-0555

PAO

Office: (210) 916-3016

Cell phone: (210) 288-7993

BAMC Safety Officer

Office: (210) 916-0369/5005

Pager: (210) 513-7459

BAMC PM

Office: (210) 916-3621

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Installation PM

Office: (210) 221-2250/1404
Military Police Desk: (210) 221-2222

GPRMC Duty Day Notifications (0730-1600)

GPRMC EOC

Office: (210) 295-2502
DSN: (210) 421-2502

Senior USAR Advisor

Office: (210) 295-3282
DSN: (210) 421-3282

A/CS for Operations and Readiness

Office: (210) 295-2487
DSN: (210) 421-2502

BAMC After Hours Notifications (weekdays after 1600, weekends and holidays)

For current alert rosters, contact the AOD or the BAMC TRP CMD Staff Duty.

BAMC TRP CMD Staff Duty

Duty phone: (210) 916-1156

A Company Commander

Pager: (210) 513-7502

B/MED Hold Company Commander

Pager: (210) 513-6312

C Company Commander

1SG Pager: (210) 513-8212

D Company Commander

Pager: (210) 513-4342

HHC Company Commander

Pager: (210) 513-3312

BAMC AOD (after 1600)

Office: (210) 916-4141

TRP CMD CSM

Cell phone: (210) 827-5429

TRP CMD C,SPO

Pager: (210) 513-7090

BAMC CSM

Cell phone: (210) 219-0639

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BAMC XO

Cell phone: (210) 288-6152

PAO

Cell phone: (210) 288-7993

BAMC Safety Officer

Pager: (210) 513-7459

BAMC PM

BAMC Security: (210) 916-0999

Installation PM

MP Front Desk: (210) 221-2222

GPRMC After Hours Notifications (weekdays after 1600, weekends and holidays)

(in order listed)

GPRMC Duty Officer (FOW)

Cell phone: (210) 289-7672

Pager: (210) 513-1592

If not available, contact Assistant Chief of Staff, Operations.

Assistant Chief of Staff, Operations

Home: (210) 497-5380

Cell phone: (210) 416-7756

Pager: (210) 513-5267

If not available, contact Assistant Chief of Staff, Clinical Operations.

Assistant Chief of Staff, Clinical Operations

Cell phone: (210) 827-6521

Pager: (210) 513-9962

If not available, contact Current Operations Officer.

Current Operations Officer

Pager: (210) 513-2829

If not available, contact Chief of Staff.

Chief of Staff

Cell Phone: (210) 289-8729

Pager: (210) 513-4584

MCHE-TC (1-02-04)
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ENCLOSURE E

Forms for SIR

The following pages contain forms that may be duplicated for use. Both forms are available on Amedd 4.7 Electronic Forms Support System.

MEDCOM Form 104-R
BAMC Form 889

REPORT OF SERIOUS/SENSITIVE INCIDENT

For use of this form, see MEDCOM Suppl 1 to AR 190-40.

1. TYPE OF INCIDENT		2. MEDCOM ACTIVITY INVOLVED			3. TIME/DATE REPORT RECEIVED				
4. SUBJECT(S) a. Name		b. Rank	c. SSN		d. Unit				
e. Duty Position		f. Age	g. Sex	h. Race	i. Security Clearance	j. Current Status/Disposition			
5. VICTIM(S) a. Name		b. Rank	c. SSN		d. Unit				
e. Duty Position		f. Age	g. Sex	h. Race	i. Injury	j. Current Status/Disposition			
6. TIME OF INCIDENT:		7. LOCATION OF INCIDENT			8. INVESTIGATING AGENCY				
DATE OF INCIDENT:									
9. REPORT RECEIVED BY:									
10. REPORTED BY (Rank, Name, Duty Position, Unit, & Phone Number):									

11. DETAILS OF INCIDENT:

FOR MEDCOM HEADQUARTERS USE ONLY												
NOTIFIED	CMD GP	DENCOM	VETCOM	DCSPER	DIR OPS	DCSLOG	OAP	CLIN OPS	PAO	IG	SJA	OTHER
DATE												

INCIDENT/INJURY/NEAR MISS REPORT					DATE PREPARED
For use of this form, see BAMC Reg 385-1; the proponent is Safety Office					
DATA REQUIRED BY THE PRIVACY ACT OF 1974					
Authority	5 USC, Section 7902; Pub L. 91-596, Section 18, Occupational Safety and Health Act of 1970 and Section 2, Executive Order 11087 Occupational Safety and Health Programs for Federal Employees.				
Principal Purpose	Information will be used to develop accident prevention countermeasures.				
Routine Uses	None.				
Disclosure	Disclosure of this information is voluntary. However, failure to provide information requested would delay report and could result in repeat injury/nonexistent accident prevention countermeasures.				
SECTION I - DATA CONCERNING INJURED PERSON/INCIDENT/NEAR MISS					
1. NAME OF INJURED PERSON (<i>Last, First, MI</i>)			2. SSN	3. AGE	4. SEX
					5. DUTY STATUS (<i>Time of injury</i>) <input type="checkbox"/> On Duty <input type="checkbox"/> Off Duty
6. GRADE/RANK	7. MOS/JOB SERIES	8a. ORGANIZATION (Div/Svc/Clinic)		8b. DATE JOINED ORGANIZATION	9. DUTY PHONE NUMBER
10. TIME AND DATE OF MISHAP		11. DATE REPORTED		12. EXACT LOCATION WHERE INJURY OCCURRED (<i>Bldg, ward, clinic, room, etc.</i>)	
a. HOUR		b. DATE			
13. OCCUPATION OR DUTY WHEN INJURY OCCURRED			14. ACTION BEING PERFORMED AT TIME OF ACCIDENT		
15a. NATURE OF INJURY			15b. BODY PART(S) INVOLVED <input type="checkbox"/> RIGHT <input type="checkbox"/> LEFT <input type="checkbox"/> N/A		
<input type="checkbox"/> Burns <input type="checkbox"/> Bruise <input type="checkbox"/> Crushed <input type="checkbox"/> Cut <input type="checkbox"/> Dermatitis <input type="checkbox"/> Foreign Body <input type="checkbox"/> Fracture <input type="checkbox"/> Hernia <input type="checkbox"/> Infection <input type="checkbox"/> Pull <input type="checkbox"/> Puncture <input type="checkbox"/> Respiratory Irritation <input type="checkbox"/> Scrape <input type="checkbox"/> Sprain <input type="checkbox"/> Spasm <input type="checkbox"/> Strain <input type="checkbox"/> String <input type="checkbox"/> Toxic Exposure <input type="checkbox"/> Needle Stick/Sharps (<i>Section II, mandatory</i>) <input type="checkbox"/> OTHER: _____			<input type="checkbox"/> Ankle <input type="checkbox"/> Arm <input type="checkbox"/> Back <input type="checkbox"/> Chest <input type="checkbox"/> Ear <input type="checkbox"/> Elbow <input type="checkbox"/> Eye <input type="checkbox"/> Face <input type="checkbox"/> Finger <input type="checkbox"/> Foot <input type="checkbox"/> Groin <input type="checkbox"/> Hand <input type="checkbox"/> Head <input type="checkbox"/> Knee <input type="checkbox"/> Leg (Upper) <input type="checkbox"/> Leg (Lower) <input type="checkbox"/> Neck <input type="checkbox"/> Side <input type="checkbox"/> Shoulder <input type="checkbox"/> Toe <input type="checkbox"/> Wrist <input type="checkbox"/> OTHER: _____		
16a. TREATMENT RECEIVED		16b. LOCATION OF TREATMENT RECEIVED (ER, on-site, etc.)		17. NUMBER OF ACTUAL LOST WORK DAYS	
				a. HOSPITAL b. QUARTERS	
				18. ESTIMATED DAMAGES % _____ \$ _____	
19. DESCRIBE HOW INJURY/INCIDENT/NEAR MISS OCCURRED					
SECTION II - NEEDLE STICK/SHARPS					
1. EQUIPMENT/DEVICE INVOLVED			2. DEVICE TYPE		
			<input type="checkbox"/> Safety <input type="checkbox"/> Conventional		
3. DESCRIBE INCIDENT (For needle stick: Indicate device [type and brand] used and procedure being performed)					
SECTION III - SUPERVISOR'S COMMENTS AND/OR CORRECTIVE ACTIONS					
1a. SUPERVISOR'S NAME		1b. GRADE/RANK	1c. DUTY PHONE NUMBER	2. SUPERVISOR PRESENT AT TIME OF INCIDENT/INJURY	
				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes, but did not observe	
3a. DATE GENERAL SAFETY TRAINING COMPLETED	3b. DATE JOB SPECIFIC SAFETY TRAINING COMPLETED	4. PERSONAL PROTECTIVE EQUIPMENT			
		<input type="checkbox"/> Required <input type="checkbox"/> Available <input type="checkbox"/> Used <input type="checkbox"/> Failed (<i>How</i>) _____ <input type="checkbox"/> Not Used (<i>Why</i>) _____			
5. PROBABLE CAUSE					
6. ACTION(S) TAKEN BY REPORTING ACTIVITY AS A RESULT OF THE INCIDENT					
7a. SUPERVISOR'S SIGNATURE			7b. DATE		FOR CIVILIAN INJURIES A COPY OF CA FORM 1 AND 16 MUST BE ATTACHED

Glossary

Section I Abbreviations

ACofS

Assistant Chief of Staff

ANG

Army National Guard

AOD

Administrative Officer of the Day

ARNGUS

Army National Guard of the United States

BAMC

Brooke Army Medical Center

C,SPO

Chief, Security Plans Office

DCA

Department Commander of Administration

DOD

Department of Defense

FOW

Field Officer of the Week

GPRMC

Great Plains Regional Medical Command

GPRMC ACofS

Great Plains Regional Medical Command Assistant Chief of Staff

HQDA

Headquarters, Department of the Army

MP

Military Police

PAO
Public Affairs Office

PM
Provost Marshal

SIR
Serious Incident Report

SPO
Security Plans Office

TRP CMD
Troop Command

XO
Executive Officer

Section II

Terms

Category 1 Serious Incident

A serious incident that is of immediate concern to HQDA. Incidents that must be reported to HQDA as Category 1 serious incidents are listed in appendix B.

Category 2 Serious Incident

A serious incident that is of concern to HQDA. Incidents that must be reported to HQDA as Category 2 serious incidents are listed in appendix B.

Category 3 Serious Incident

An incident that is of concern to the MACOM, and incident that must be reported to the MACOM as a Category 3 SIR according to an approved MACOM supplement to regulation AR 190-40. Establishment of Category 3 Serious Incidents is neither required nor reportable to HQDA.

Serious incident

Any actual or alleged incident, accident, misconduct, or act, primarily criminal in nature, that, because of its nature, gravity, potential for adverse publicity, or potential consequences warrants timely notice to HQDA.

Serious Incident Report

A formal notification to HQDA of a serious incident as prescribed by AR 190-40 and approved MACOM supplements.