

INJURY REPORT

THIS FORM IS TO BE USED ONLY FOR NOT MISCONDUCT AND
IN LINE OF DUTY DETERMINATIONS AND IN ACCORDANCE
 WITH CHAPTER VIII, JAG MANUAL. SUBMIT TYPEWRITTEN
 ORIGINAL TO THE JUDGE ADVOCATE GENERAL VIA OFFICER
 EXERCISING GCM AUTHORITY.

NAVJAG 5800/15
 (REV. 3-77)

S/N 0105-LF-105-8075

RCS JAG 5800-19

FROM: (NAME OF REPORTING COMMAND)

TO: JUDGE ADVOCATE GENERAL, NAVY DEPARTMENT, WASHINGTON, DC 20370

VIA: (OFFICER EXERCISING GCM AUTHORITY)

1. NAME OF INJURED SERVICE MEMBER	2. SSN	3. GRADE	4. SERVICE
5. DATE AND PLACE OF INCIDENT CAUSING INJURY			

PART I - TO BE COMPLETED BY MEDICAL OFFICER

6. FIRST SEEN BY MEDICAL OFFICER	DATE	TIME	PLACE
7. DIAGNOSIS			
8. PROGNOSIS			

CONDITION OF INDIVIDUAL AT TIME OF EXAMINATION

9. UNDER INFLUENCE OF <input type="checkbox"/> ALCOHOL <input type="checkbox"/> BARBITURATES <input type="checkbox"/> NARCOTICS <input type="checkbox"/> OTHER (SPECIFY)	10. <input type="checkbox"/> NOT UNDER INFLUENCE OF ANY LISTED IN ITEM 9 11. <input type="checkbox"/> UNABLE TO DETERMINE DUE TO PHYSICAL CONDITION
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12. BASIS FOR OPINION IN 9 OR 10 ABOVE

ODOR OF ALCOHOL	TRUCULENT	UNCOORDINATED	CLINICAL TESTING WITH INTOXICATION LEVEL OF:
STAGGERING	UNSTEADY	HICCOUGHING	
SEMICONSCIOUS	INCOHERENT	NORMAL	

13. ALLEGED CIRCUMSTANCES INITIALLY REPORTED AND SOURCE OF INFORMATION

14. IT IS POSSIBLE THAT THE FOLLOWING DISABILITY MAY RESULT <input type="checkbox"/> PERMANENT PARTIAL <input type="checkbox"/> PERMANENT TOTAL <input type="checkbox"/> NONE	15. ESTIMATED LOSS OF TIME FROM DUTY AS A RESULT OF INJURY OR DATE OF RETURN TO DUTY
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16. BASED ON THE ABOVE, THE FOLLOWING FINDING IS RECOMMENDED: IN LINE OF DUTY, NOT DUE TO OWN MISCONDUCT.

17. TYPED NAME AND GRADE OF MEDICAL OFFICER	SIGNATURE OF MEDICAL OFFICER	DATE
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PART II - TO BE COMPLETED BY COMMANDING OFFICER

18. SERVICE MEMBER INJURED WAS

- ON DUTY ON AUTHORIZED LIBERTY OR LEAVE AN UNAUTHORIZED ABSENTEE DRILLING

19. AS A RESULT OF MY INVESTIGATION I HAVE DETERMINED THE CIRCUMSTANCES TO BE: (USE ADDITIONAL SHEETS AS REQUIRED.)

20. IT IS THE OPINION OF THE UNDERSIGNED THAT THE INJURY IN QUESTION WAS INCURRED IN THE LINE OF DUTY AND NOT AS THE RESULT OF SUBJECT MAN'S OWN MISCONDUCT.

COMMANDING OFFICER (OR ONE AUTHORIZED TO SIGN BY HIS DIRECTION - IF LATTER, SO INDICATE)		
TYPED NAME AND GRADE	SIGNATURE	DATE
21.		

22. ACTION OF OFFICER EXERCISING GENERAL COURT-MARTIAL JURISDICTION:

FROM:

DATE:

TO: JUDGE ADVOCATE GENERAL OF THE NAVY

It has been determined that the injury in question was incurred in the line of duty and not due to misconduct.

SIGNATURE AND TYPED NAME OF OFFICER EXERCISING GCM AUTHORITY (OR ONE AUTHORIZED TO SIGN BY DIRECTION)

OFFICE OF THE JUDGE ADVOCATE GENERAL OF THE NAVY

MEMORANDUM

From: Judge Advocate General
To: Central Records Section

1. Forwarded.
2. This investigation has been reviewed and it is found to be in substantial compliance with the JAG Manual. No further action required. The general court-martial authority has determined that the member's injuries were incurred in the line of duty and not due to the members own misconduct.
3. The foregoing determinations are approved by the Judge Advocate General.

By direction _____