



DEPARTMENT OF THE NAVY  
OFFICE OF THE CHIEF OF NAVAL OPERATIONS  
2000 NAVY PENTAGON  
WASHINGTON, D.C. 20350-2000

IN REPLY REFER TO

OPNAVINST 5440.75B  
N42  
13 May 2010

OPNAV INSTRUCTION 5440.75B

From: Chief of Naval Operations

Subj: ADMINISTRATION, OPERATION, AND LOGISTIC SUPPORT OF T-AH 19  
MERCY CLASS HOSPITAL SHIPS

Ref: (a) OPNAVINST F3501.161C  
(b) U.S. Navy Regulations, 1990  
(c) OPNAVINST C3501.2K (NOTAL)  
(d) NAVSO P-1000  
(e) BUMEDINST 6320.66E

Encl: (1) Hospital Ship Chain of Command

1. Purpose. To define the organizational structure of the T-AH 19 Mercy class hospital ships in full and reduced operating status (FOS/ROS), and prescribe unique command relationships and responsibilities required for the administration, operation, and logistic support of these ships. This instruction is a substantial revision and should be reviewed in its entirety.

2. Cancellation. OPNAVINST 5440.75A.

3. Background

a. Hospital ships provide mobile, flexible, and rapidly responsive afloat medical capability for medical and surgical care. The Hospital Ship Program consists of two ships, U.S. Naval Ship (USNS) Mercy (T-AH 19) and USNS Comfort (T-AH 20), and the medical treatment facilities (MTFs) embarked within them. The program is the responsibility of Commander, Military Sealift Command (COMSC) as the type commander (TYCOM) for both the ships and the embarked MTFs. Each ship has 12 operating rooms and up to 1,000 beds within the MTF spaces which can be tailored to meet expected patient throughput and variable lengths of stay based on the intensity of required care. As set forth in reference (a), the primary mission of these ships is to provide afloat medical capability for acute medical and surgical care for forward deployed operational forces of the military Services. However, as a secondary mission, the ships provide a full-service hospital asset in support of disaster relief, humanitarian assistance, and defense support to civil authorities (DSCA) worldwide. The MTF

includes medical and non-medical spaces (berthing spaces for MTF personnel and patients, mess facilities, laundry spaces, fitness centers, off-duty lounge spaces, and chapel facilities), medical/dental equipment, certain non-medical support equipment, medical and non-medical personnel, and supplies necessary to provide required patient care to meet mission objectives.

b. Reference (b) specifies general responsibilities for the operation, administration, and logistics support of the operating forces. However, the missions, concept of operations (CONOPS), and required operational capabilities of the hospital ships as set forth in reference (a) require unique command relationships to ensure the readiness of the ships and their embarked MTFs.

#### 4. Policy

a. COMSC is an echelon 3 commander reporting to Commander, Fleet Forces Command (COMUSFLTFORCOM) and is the TYCOM for the T-AH 19 class ships and embarked MTFs. As TYCOM, COMSC is designated the supported commander for all facets of T-AH operations to include organizing, manning, equipping, and training forces to ensure mission readiness. COMSC is authorized to exercise directive authority over all other organizations (supporting commanders) detailed in paragraph 9 that are responsible for providing resources to ensure a "Ready" ship/MTF.

b. The ships shall be maintained in a 5-day ROS (ROS-5) and shall deploy to fully perform their readiness state I primary mission as stated in reference (a) within 5 days of notice to activate. The ships will be considered fully mission capable when hull machinery; command, control, communications, computers, and intelligence; MTF systems; and manning requirements to support specified missions are operational and onboard. Adaptive planning is needed to ensure a wide range of missions can be executed within the activation timeline.

c. The objective for secondary mission activation in response to emergent, unanticipated disaster relief, humanitarian assistance, DSCA, non-combatant evacuation operations and similar missions is 5 days and for planned humanitarian missions, 30 days. Flexible manning and supply options will be maintained to reconfigure staffing, non-medical and medical material, and ship systems to meet the unique requirements of secondary missions. Routine testing of the supply chain during dock trials will enhance readiness and validate platform capability.

d. In view of the complexity of activating the MTF within 5 days, all supporting commanders shall ensure that actions and policies which impact T-AH manpower or personnel, training, or materiel readiness are formally coordinated with COMUSFLTFORCOM; Commander, Pacific Fleet (COMPACFLT); COMSC; Bureau of Medicine (BUMED); and commanding officer (CO) MTF before publication and execution.

#### 5. Operational Employment

a. Reserve. When not operationally employed, the ships are berthed at East and West Coast layberths and are maintained at a level of readiness which will permit activation and deployment in 5 days. Each ship will be activated periodically by COMSC to conduct engineering dock trials and, at least biennially, for local coastal fleet exercises in conjunction with an engineering sea trial, if not previously activated for a scheduled deployment/mission. Readiness exercises will be coordinated through COMUSFLTFORCOM/COMPACFLT, the appropriate numbered fleet, and Military Sealift Command (MSC) Sealift Logistics Command for operations and scheduling.

b. Activation. The decision to employ the ship(s) is independent of a decision to mobilize and is generally reserved for the requesting combatant commander (COCOM) acting through and in concert with their naval component commander (NCC). The NCC directed to employ a T-AH in support of military operations must advise and request activation. The fleet commander (COMUSFLTFORCOM/COMPACFLT), when directed, will issue a formal activation order to the Chief of Naval Operations (CNO) and COMSC. CNO will direct the Chief, BUMED; Chief of Naval Personnel (CHNAVPERS); Commander, Naval Supply Systems Command (COMNAVSUPSYSCOM); Commander, Naval Reserve Force; and other supporting commanders to execute activation plans for the ship (hull) and the MTF.

c. Operations. Ships will be employed as directed by the requesting COCOM acting through the NCC to execute assigned mission.

6. Command and Control. T-AH 19 class ships are at times part of the operating forces of the Navy and are assigned by the Secretary of Defense, via the Global Force Management Allocation Plan to the requesting COCOMs. Command relationships by operating status are depicted in enclosure (1).

a. ROS

(1) The T-AH ships and embarked MTFs to include the civilian mariner (CIVMAR) and MTF cadre crews are under the administrative control (ADCON) of COMSC who, as TYCOM, is responsible for their administration, training, maintenance, logistic support, and readiness. Due to the unique technical nature of MTF operations, COMSC will rely on the technical authority of BUMED to establish the medical operations requirements.

(2) Navy medical region commanders will assign medical and non-medical military personnel of the FOS crew to duties at regional medical facilities during ROS. These personnel shall be made available for required shipboard training, exercise support, or operational deployment.

(3) BUMED serves as the supporting command providing technical advice to the TYCOM during ROS for MTF equipment and health care training, readiness and operations. BUMED also exercises ADCON over those personnel assigned duties at regional medical centers (RMCs) and not activated for duty aboard the ship.

b. FOS

(1) Combatant command authority transfers to the supported COCOM. Operational control (OPCON) may be delegated by COCOM to its NCC. When T-AH operations must be conducted in concert with other units, support vessels, air detachments, or shore-based elements, or in direct support thereof, the COCOM through its NCC may designate a task force commander to ensure requisite tactical control (TACON) of the ship and embarked MTF.

(2) When at FOS, ADCON for the CIVMAR and MTF crews remains with COMSC. OPCON transfers to the supported COCOM's NCC. The COCOM's NCC may further delegate to a subordinate commander with an operational task designator.

c. Shipboard Command Structure

(1) The ships have a CIVMAR crew under the command of a U.S. Coast Guard (USCG)-licensed senior civilian officer in charge (SCOIC) (chief mate) assigned during ROS and a ship's master during FOS or when directed by COMSC.

(a) The ship's master is the civilian officer commanding the ship and is charged with ultimate command authority, under Federal and International Admiralty law and reference (b) with regard to the recommendations of the CO MTF or other embarked commander (e.g., helicopter detachment officer in charge). The master is responsible for the safe navigation of the ship and the safety of all personnel embarked, including adherence to force protection requirements prescribed by the supported COCOM.

(b) The SCOIC of the ship is the senior licensed deck officer assigned to the ship during ROS and during transition to FOS until relieved by the master. The SCOIC is responsible to COMSC for all matters relating to shipboard operations during ROS and in transition to FOS until the master reports onboard.

(2) The embarked MTF is a separate unit of the Operating Forces of the Navy under COMSC command with a CO and cadre crew while in ROS and a partial-or full-FOS crew when the MTF is activated.

(a) The CO MTF shall be assigned full-time as part of the ROS crew and reports to COMSC as the immediate superior in command (ISIC). When activated, CO MTF reports to the supported operational commander (e.g., commander, joint task force; commander, expeditionary strike group, etc.) for matters related to the assigned operational mission, and COMSC remains the administrative ISIC.

(b) The CO MTF exercises command authority over all military personnel assigned to the MTF and will have screened for command in accordance with formal screening procedures. The MTF CO has command responsibility and is responsible to COMSC for the operational readiness and maintenance of the MTF. As such, the CO MTF must maintain the MTF crew's readiness on 5 days notice to move. The CO MTF must be kept aware of all personnel actions affecting component unit identification codes (UICs) regardless of assigned location to include revocations of sea duty screenings, assignment of collateral duties at RMC, nominations/selection as an individual augmentee, and leave/liberty status beyond readiness requirements.

(3) Other task units may be embarked as required by the mission (e.g., helicopter detachment, Seabee platoon). Commanders of all embarked units, to include CO MTF, are not in

command of the ship and do not exercise command authority over the SCOIC or the master. CO MTF and other commanders shall provide cognizant advice to the ship's master.

(4) Secondary mission assignments may include embarkation of non-governmental organizations (NGOs) and other personnel not normally assigned to naval command relationships. These technical contingents' roles, relationships, and responsibilities shall be agreed in a memorandum of understanding prior to embarkation. Normally, contingents will designate a lead representative, who will report to the master with respect to overall embarked operations. For clinical operations and regulations, the representative will report to the CO MTF. (See subparagraph 7b below.)

## 7. Manning Plan

a. Manning Levels. CIVMAR operating crew manning levels are specified in reference (c). Approved CIVMAR manning levels are established for the following operational conditions: ROS maintenance and FOS with full or partial MTF crew embarked. MSC will adequately man the ships, both officers and crew, with maritime personnel who are trained, qualified, and medically fit consistent with the ship's mission and USCG Certificate of Inspection (COI) requirements.

b. MTF Personnel. To ensure the MTF is appropriately manned, trained, and prepared to meet activation requirements and timelines, medical and non-medical personnel will be assigned to either the ROS crew or FOS crew. All personnel assigned to the MTF, ROS, and FOS crews shall be screened for operational (sea) duty, and maintain sea duty eligibility and meet requirements for world wide assignment (see figure 1).

(1) ROS Crew. The ROS personnel are permanently assigned to the embarked MTF and report directly to CO MTF. The number and mix of billets are identified in the current, approved activity manning document (AMD) contained in the Total Force Manpower Management System (TFMMS).

(2) FOS Crew. FOS personnel are permanently assigned to a designated component UIC for the T-AH's. This UIC identifies them as part of the MTF staff if the ship is activated, but day-to-day they perform their activities at an assigned Continental United States (CONUS) shore-based RMC. The number and mix of

billets comprising the FOS crew are identified in the current, approved AMD contained in the TFMMS. To ensure the readiness of the hospital ship MTF for activation, while maintaining a necessary level of continuity for the shore-based RMC, the FOS crew is organized in a tiered readiness system, as follows:

(a) The highest readiness-level component of the FOS crew designated as FOS nucleus personnel will be fenced to the FOS crew and be part of the critical core of personnel deemed necessary for activating the MTF aboard so the ship can get underway. These personnel will be responsible to and immediately available to the CO MTF for all training and other platform evolutions as deemed necessary. In concert with the ROS crew, they will provide sufficient quantity and quality of expertise to train the balance of the critical core.

(b) The next level component of the FOS crew, designated as FOS activation personnel, will be fenced to the FOS crew and be part of the critical core of personnel deemed necessary for activating the MTF aboard so the ship can get underway. These personnel will be primarily responsible to the commander of the CONUS, shore-based RMC and attend a minimum of one training evolution per year as specified by the CO MTF.

(c) A third component of the FOS crew designated as FOS tailored capability personnel will be assigned to a T-AH MTF component UIC, but will not be required at routine training or operational evolutions unless the MTF CO determines that crewmember supports a specific mission requirement. The FOS tailored capability crew can be augmented through the request for forces (RFF) process for those capabilities not resident in the T-AH MTF AMD (e.g., linguists for the anticipated area of operations). In some situations, augmentees may be provided by other Services/agencies as part of a Joint or interagency task force. Since they will not normally be assigned to training evolutions, both the FOS tailored capability crew and RFF globally sourced personnel will be trained by the critical core personnel when they report aboard for the mission.

(3) Critical Core. The ROS, FOS nucleus, and FOS activation personnel make up the critical core who are necessary for activating the MTF. The critical core provides components at a tiered readiness so the ship can get underway with the capability to minimally meet the requirements of reference (a). As such, these billets shall be afforded CNO priority equivalent

to other sea going commands, and personnel shall be fenced to the platform for their entire tour. The critical core provides the expertise necessary to rapidly integrate personnel to the MTF during activation and ensures unity of effort in readying the MTF for deployment. As permanently assigned or fenced personnel, readiness reporting for the MTF will be based on the critical core.

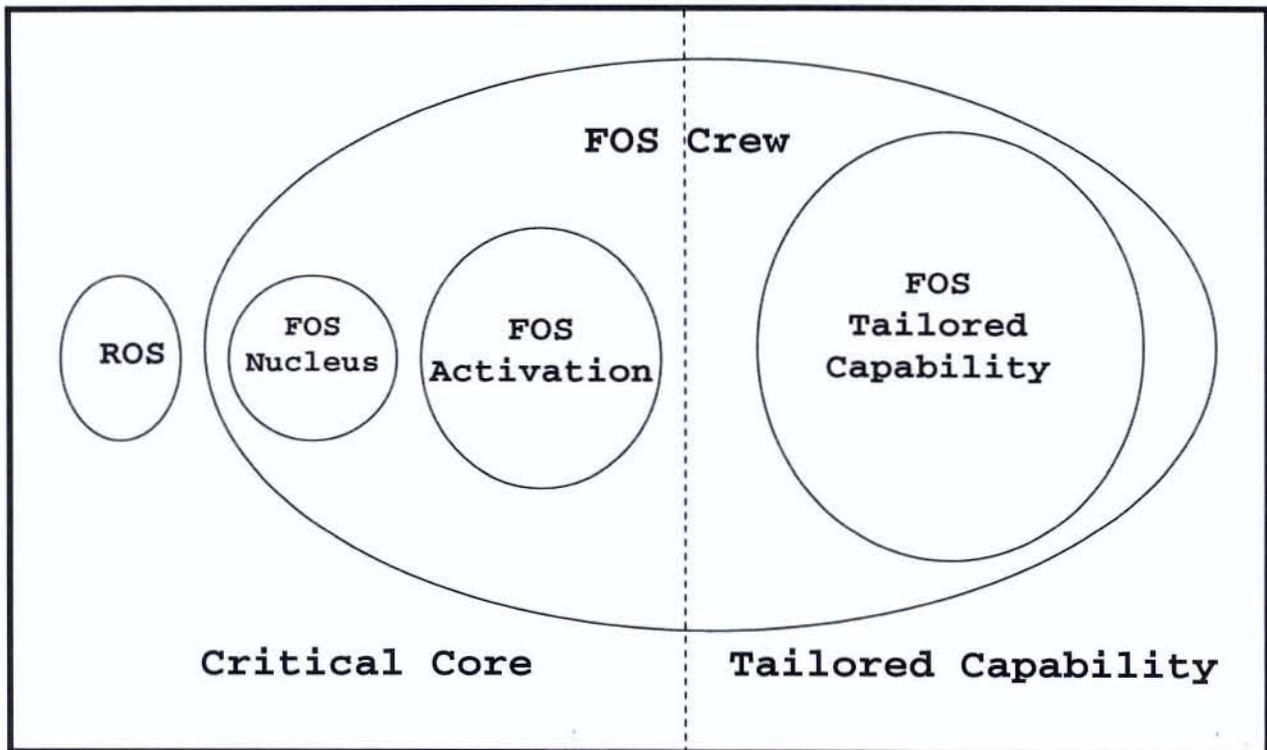


Figure 1: Hospital Ship Manning Components

c. Technical Contingents

(1) For secondary missions in support of disaster relief, humanitarian assistance, and DSCA, a technical contingent comprised of civilian and military personnel designated by the COCOM (possibly including foreign nationals, NGOs, etc.) may be embarked within the limitations of shipboard capabilities and appropriate USCG and MSC regulations.

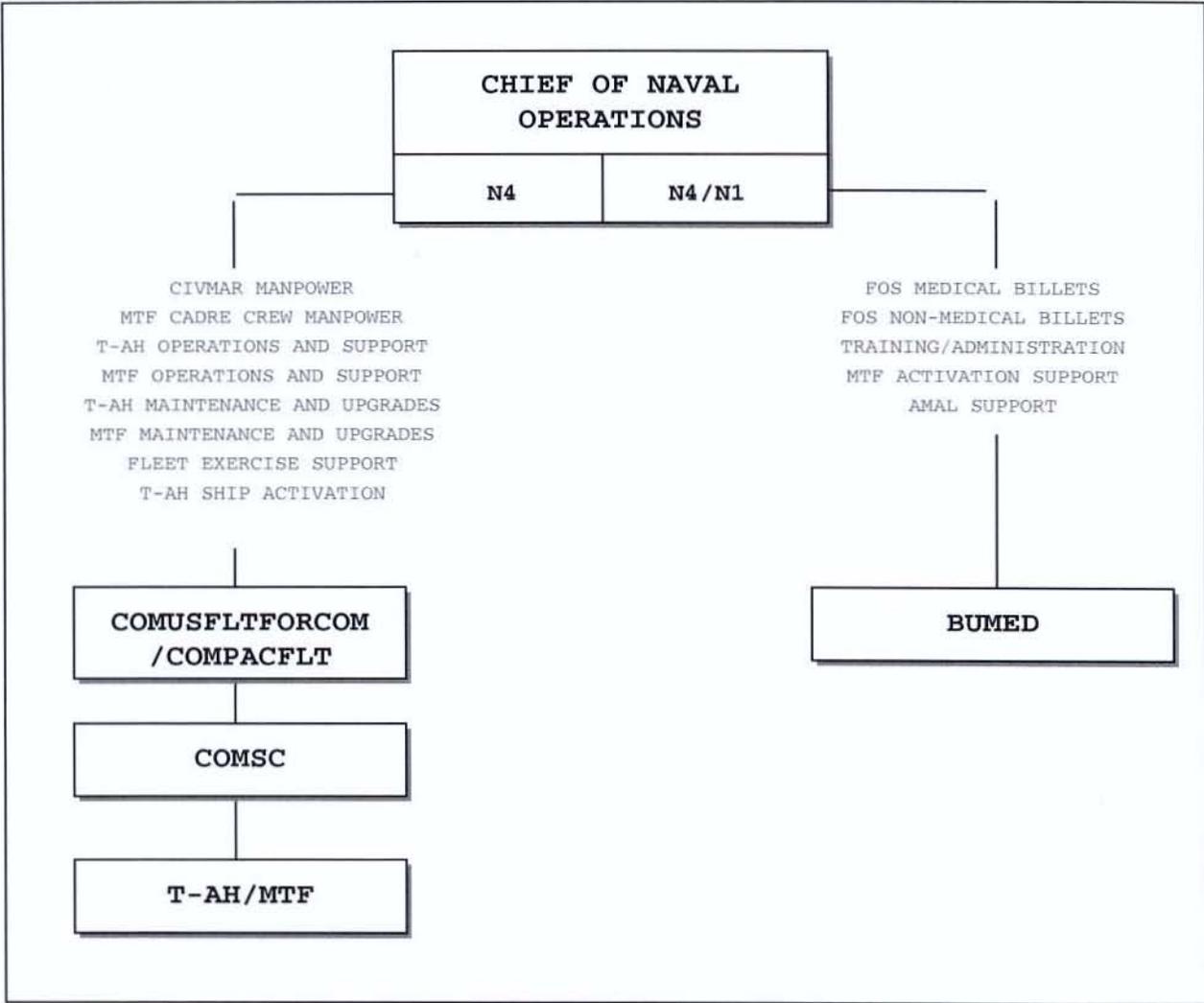
(2) The CIVMAR, MTF and technical contingents programming, planning, and manning control responsibilities are depicted in figure 2.

	<b>Civilian Operating Crew</b>	<b>MTF Military</b>	<b>Technical Contingent</b>
Resource Sponsor	Director, Strategic Mobility and Combat Logistics Division (OPNAV (N42))	Deputy CNO for Manpower, Personnel, Education and Training (CNO (N1))	Sponsoring Agency
Manpower Budget Submitting Office (BSO) ROS Crew FOS Crew	COMSC COMSC	COMSC BUMED(BSO-18)	Not applicable Not applicable
Manning Control  ROS Crew  FOS Crew	COMSC  COMSC	COMUSFLTFORCOM /COMPACFLT COMUSFLTFORCOM /COMPACFLT	Not applicable  COMUSFLTFORCOM/ COMPACFLT

**Figure 2: MANPOWER PROGRAMMING, PLANNING AND MANNING CONTROL RESPONSIBILITY**

8. Programming and Budgeting. Programming and budgeting for the hospital ships will be exercised under reference (d), with specific functional responsibilities as set forth in paragraph 9 of this instruction and illustrated in figure 3.

	<b>T-AH</b>	<b>MTF</b>
<b>RESOURCE SPONSOR</b>	OPNAV (N42)	Head, Supply, Ordnance and Logistics Operations (OPNAV (N41))
<b>BUDGETING</b>	COMUSFLTFORCOM/COMPACFLT	COMUSFLTFORCOM /COMPACFLT



**Figure 3: PROGRAMMING AND BUDGETING - RESOURCE ALLOCATION RESPONSIBILITY**

9. Responsibilities. Responsibilities assigned during ROS remain applicable when the ships are in FOS. The responsibilities set forth below are unique to the hospital ships and require special emphasis to clarify complex relationships. Where routine responsibilities are not highlighted, they are similar to those required for any other units of the operating forces of the Navy. All supporting commands providing technical advice to either the MTF/ship should coordinate through the force surgeon or COMSC's Naval Fleet Auxiliary Force (PM1) Program Office.

a. Deputy Chief of Naval Operations (Fleet Readiness and Logistics) (CNO (N4))

(1) Act as program resource sponsor for the T-AH 19 class hospital ships, as set forth above, for both the hull and the MTF, to include: all shipboard MTF training, modernization of medical support systems and equipment unique to the MTF, and alterations/modifications to MTFs and equipment.

(2) Coordinate CNO staff activities for all T-AH 19 class issues and requirements which cross organizational boundaries, or require CNO policy review or decision at the Service level.

(3) Issue reference (a) reflecting T-AH 19 class projected operational environment and required operational capabilities, consistent with reference (c).

(4) Incorporate the T-AH class ships in long range fleet modernization program planning.

(5) Establish supply/resupply guidance for the ships in coordination with COMSC; Deputy Director, Navy Medicine(OPNAV N0931)); BUMED; and COMNAVSUPSYSCOM.

(6) Program and budget sufficient resources for the operation of the hull to support ship readiness, training, periodic engineering dock trials, local coastal fleet exercises in conjunction with an engineering sea trial, maintenance, and ship modernization.

(7) In coordination with other affected CNO staff organizations, direct activation of the ship(s), consistent with the unified commander and NCC's requirements.

(8) As resource sponsor, monitor/evaluate implementation of the Navy Training Plan (NTP), review T-AH NTP, and initiate an update if significant changes occur.

b. Surgeon General of the Navy (CNO (N093)). Monitor and assess BUMED's ability to support COMSC in ensuring the readiness of the MTF onboard the hospital ship for deployment in support of their primary and secondary mission.

c. NCC; COMPACFLT; COMUSFLTFORCOM; Commander, U.S. Naval Forces Europe; Commander, U.S. Naval Forces Central Command; Commander, U.S. Naval Forces Southern Command; and U.S. Naval Forces Africa Command

(1) Exercise OPCON of assigned T-AH 19 class hospital ships during FOS as directed by respective COCOMs.

(2) Advise the affected naval commander and request formal activation of the T-AH through the appropriate chain of command.

(3) Develop and issue appropriate CONOPS for employment and logistics support of the T-AH 19 class for both primary and secondary missions, or such other missions as may be assigned.

(4) Include T-AHs in short and long-range fleet exercise plans and schedules.

(5) During planning and activation, notify COMSC and the CNO resource sponsors of shortcomings in T-AH capabilities which will inhibit the ships' mission accomplishment.

d. Fleet Commander (COMUSFLTFORCOM, COMPACFLT)

(1) Act as BSO for assigned T-AH 19 class hospital ships' MTF and for ships' operations during FOS, coordinating as necessary with COMSC and CNO resource sponsors to ensure requisite funds are programmed and budgeted for sufficient FOS days, to include support of local coastal fleet exercise participation. COCOMs shall determine the extent the T-AHs shall be exercised within the guidelines provided. However, exercises are limited to those which can be supported by the funding authorized and appropriated.

(2) Act as manning control authority for assigned ROS MTF staff.

(3) Periodically test MTF's ability to activate to FOS in accordance with this policy.

(4) As the Navy's executive agent for individual augmentation, COMUSFLTFORCOM consider sourcing personnel to support operational requirements that are not resident within the MTF manning document through the Individual Augmentation Manpower Management (IAMM) system. IAMM assignments provide the flexibility to meet COCOM demand signals and are not to be used merely to overcome routine staffing shortages in the MTF.

(5) Maintain ships at levels of readiness as specified by reference (a), advising CNO and respective COCOM NCC when those requirements cannot be met.

(6) Fleet surgeon, through the MSC force surgeon is responsible for credentialing, licensure, granting of privileges, and medical quality assurance in accordance with reference (e).

e. COMSC

(1) Act as TYCOM for all aspects of the hull and the MTF for T-AH 19 class hospital ships. Coordinate with respective fleet commanders and CNO resource sponsors for resource support.

(2) Perform overall program management and oversight responsibilities for the hull and the MTF, to include: hull and MTF integration, staffing, manpower, training, programming/budgeting, budget execution oversight, life cycle management, and major systems/equipment procurement.

(3) Coordinate with appropriate technical authorities (BUMED; Commander, Naval Space and Warfare Systems Command; (COMSPAWARSYSCOM), and NAVSUPSYSCOM) to integrate respective infrastructure requirements, installation, and maintenance.

(4) Develop, in coordination with appropriate technical authorities, MTF-specific readiness indicators and report as required to the Fleet Readiness Enterprise.

(5) Ensure that the ships are American Bureau of Shipping classified and in receipt of a USCG COI.

(6) Delegate in a command instruction specific roles and responsibilities of MSC program managers, functional directors,

special assistants, and subordinate commands in program management and TYCOM execution of the hospital ship program.

f. COMNAVSUPSYSCOM

(1) Provide technical assistance and support to COMSC as required to meet the unique logistics, distribution, supply chain support, and asset visibility requirements of the hospital ship and MTF.

(2) In coordination with the Defense Logistics Agency (DLA) and Defense Supply Center, Philadelphia, establish supply/resupply and vendor contracts to provide the appropriate level of supply chain and husbanding services to the hospital ship and MTF. Assist TYCOMs with offloading material (repair parts, medical supplies and food) for credit with DLA and prime vendors.

g. BUMED

(1) Provide COMSC technical guidance on patient care, medical/dental equipment, materiel and equipment/facility design, and overall configuration management.

(2) Coordinate with CHNAVPERS to ensure that medical ratings and critical Navy enlisted classification (NEC) inventories are maintained to support MTF billets. Billets shall be filled to the Navy Manning Plan (NMP) levels.

(3) Monitor and evaluate designated Navy medical regions' plans and systems for executing T-AH activation.

(4) Develop systems and procedures that enable ongoing monitoring and evaluation of the readiness of medical and non-medical military FOS support personnel assigned to medical and dental activities under their command authority.

h. CHNAVPERS

(1) Assign personnel to MTF component UIC billets who meet naval officer billet code and NEC and subspecialty requirements and are properly screened for sea duty.

(2) Maintain manning levels for MTF personnel at levels consistent with established NMP policy and guidelines.

13 May 2010

(3) Designate command-screened medical department officers to serve as MTF commanding and executive officers via BUPERS orders.

i. CO, Naval Medical Region (NMR)

(1) Maintain liaison with CO MTF via COMSC force surgeon to accommodate training, rotation, exercise activation, and operational requirements of MTF personnel assigned temporary duties to NMR.

(2) Provide necessary credentialing/licensure information to all temporarily assigned MTF health care providers in accordance with reference (e).

(3) Develop plans and systems to conduct routine operations during MTF activation to provide continuity of care (at a reduced level). Consideration may be given to Reserve Component backfill or commercial contractors to replace activated MTF crew.

j. COMSPAWARSYSCOM. As the technical authority to COMSC, provide technical guidance, project design, and implementation in coordination with COMUSFLTFORCOM, COMPACFLT and Naval Network Warfare Command requirements in the configuration and accreditation of information technology infrastructure and communications systems for the hospital ships.

10. Records Management. Records created as a result of this instruction, regardless of media and format, shall be managed per Secretary of the Navy (SECNAV) Manual (M-)5210.1 of November 2007.

11. Reports Control. The reporting requirements contained in this instruction are exempt from reports controlled per SECNAV M-5214.1 of December 2005.



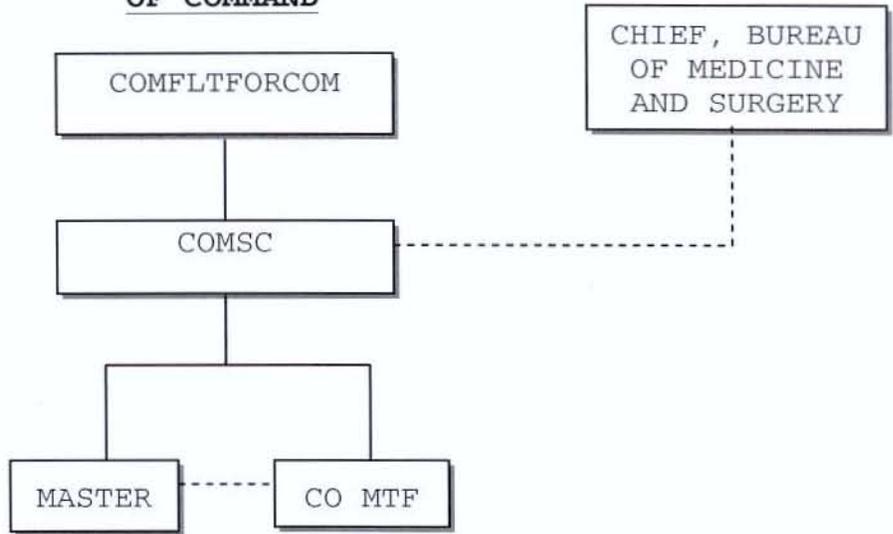
W. R. BURKE  
Vice Admiral, U.S. Navy  
Deputy Chief of Naval Operations  
(Fleet Readiness and Logistics)

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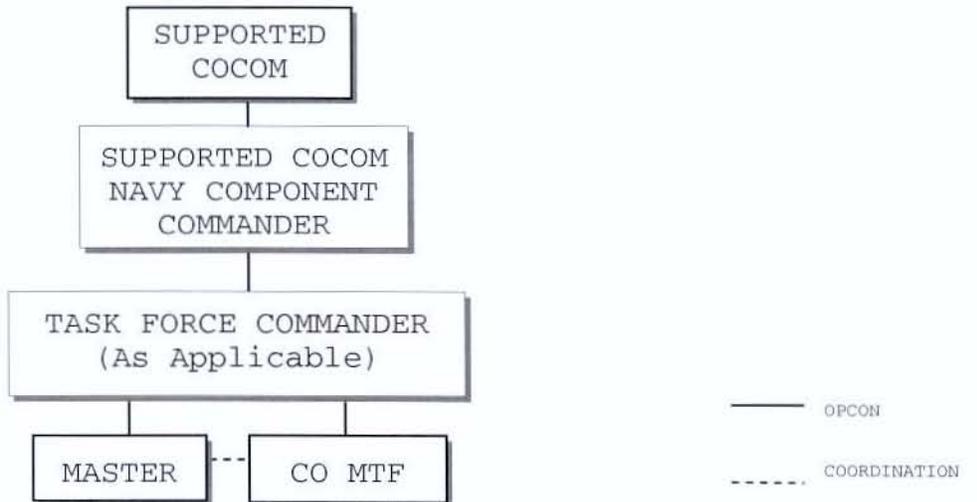
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**COMMAND RELATIONSHIPS**

**ADMINISTRATIVE CHAIN  
OF COMMAND**

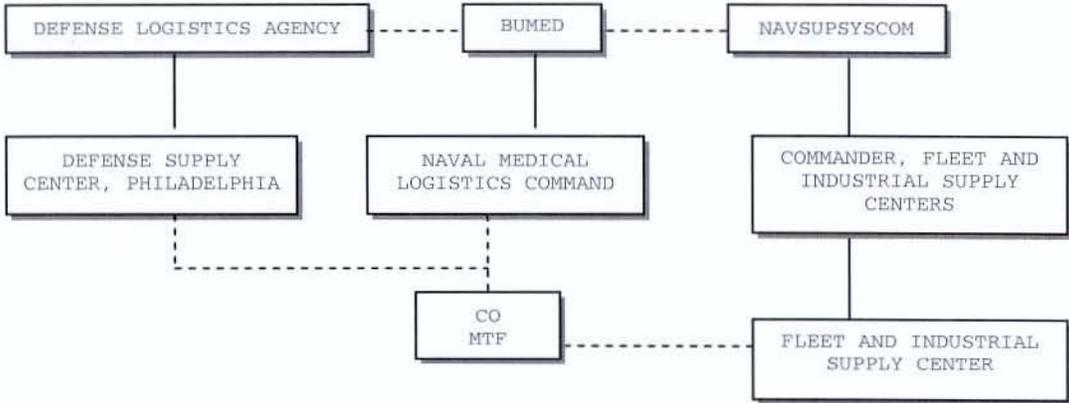


**OPERATIONAL CHAIN OF  
COMMAND**



**Hospital Ship Chain of Command  
(Part 1 of 2)**

**LOGISTICS RELATIONSHIPS**



**Hospital Ship Chain of Command  
(Part 2 of 2)**

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