



Naval Medical Force Development Center (NMFDC)

Monthly Newsletter

July 2022 | Volume 3, Number 7

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FEATURE

July is a month to celebrate the Armed Services, remember the sacrifices of service members, and reflect on the history of the United States. In that spirit, this month's edition of the NMFDC Newsletter highlights unique facts about the Navy and Naval Medicine.



The Continental Navy was established in **1775** and then disbanded after the Revolutionary War. President Adams created the [permanent standing U.S. Navy](#) in **1794**.

Hospital Corps	19,300 AC/2,300 RC
Medical Corps	3,240 AC/330 RC
Nurse Corps	2,590 AC/990 RC
Dental Corps	890 AC/130 RC
Medical Service Corps	2,320 AC/190 RC



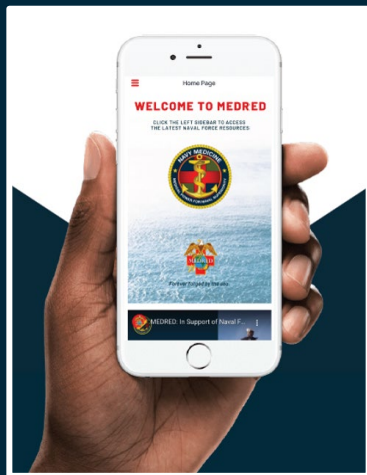
6 Presidents have served in the Navy or Navy Reserves.

The first U.S. Navy hospital was established in **1811**. Each Sailor contributed **20 cents** per month ([2% of an average monthly salary](#)) to bolster the fund to support the construction of additional hospitals. [Click here](#) to learn more about the first Naval hospitals.



MEDRED APP SPOTLIGHT

MEDRED provides Sailors and Marines with real-time access to extensive and specialized readiness-related informational resources directly on your mobile device — making it easy to download and utilize information necessary to maintain ready medical forces while keeping forces medically ready. Download the app today on the Navy App Locker, Apple App Store, or on Google Play!



Navy App Locker



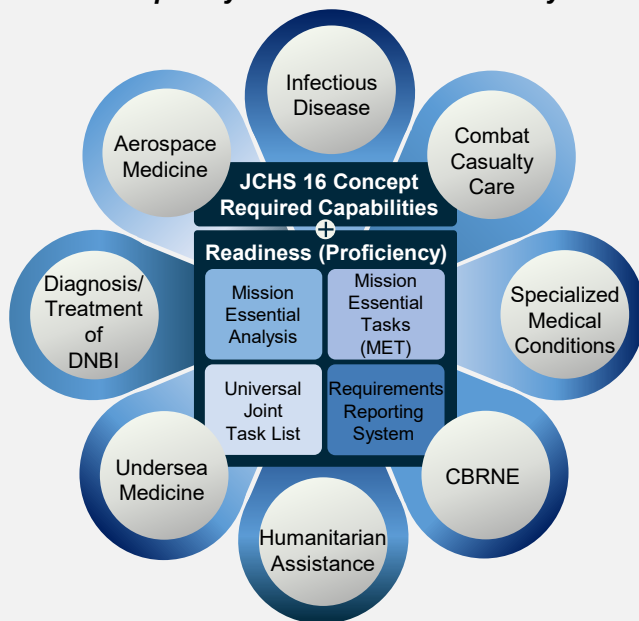
Apple App Store



Android Google Play

GRAPHIC OF THE MONTH

Complexity of Readiness Proficiency



Complexity across readiness proficiency comes from connecting joint required capabilities and NDAA 2017 §725 domains.



LEADERSHIP

Office of Primary Responsibility
M5 (Mr. John Zarkowsky)

Clinical Coordination SME
M35 (CAPT Emori Moore)

Training & Education SME
M71 (CDR Dana Dones)





PHASE III NMRC POLICY

On 23 June 2022, BUMED Acting Chief G.D. Shaffer signed BUMEDMEMO 6000 "Naval Medical Readiness Criteria", aligning medical force readiness enhancement through the Naval Medical Readiness Criteria (NMRC). This memo achieves the following:

- Outlines the **NMRC requirements for an additional 32 non-combat casualty care team** specialties and enlisted classifications (bringing the total to 117 NMRC, covering approximately 140 occupational codes)
 - ‡ 4 Hospital Corps Specialties ‡ 17 Medical Service Corps Specialties
 - ‡ 7 Medical Corps Specialties ‡ 4 Nurse Corps Specialties
- Gives instruction on monitoring and executing the NMRC on a monthly basis
- Implements a medical readiness assessment process for wartime medical skills

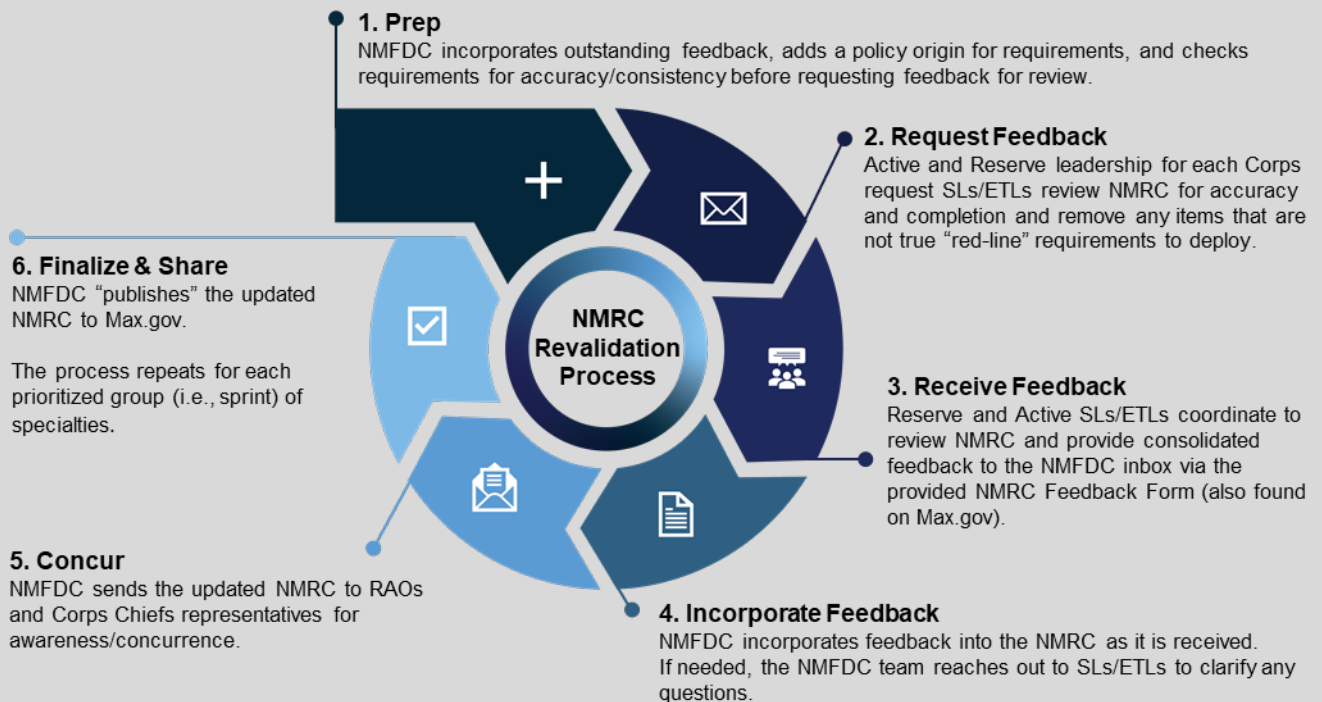
The NMFDC is working separately with Reserve Component (RC) Specialty Leaders (SLs), Enlisted Technical Leaders (ETLs), and Reserve Affairs Officers (RAOs) to incorporate RC feedback into the NMRC.

Phase III NMRC has been signed!

[Click here](#) to view all three (Phase I, II, III) NMRC memos and enclosures located on the NMFDC Max.gov site under Attachments.

NMRC REVALIDATION PROCESS

This cyclical revalidation process (illustrated below) is designed to incorporate lessons learned and input from NMRC owners to ensure that requirements stay relevant and actionable to assess true readiness proficiency.



The NMRC are living documents and can be updated at any time to reflect evolving mission requirements.

Ask the Editor

Have a question for the NMFDC? Let us know by emailing us!
usn.ncr.bumedfchva.mbx.nmfdc---navy-ksa@mail.mil

