

U.S. DEPARTMENT OF HOMELAND SECURITY U.S. COAST GUARD CG-6000-2 (Rev. 10-10)		<h1>Annual Command Afloat Medical Screening</h1>			
Name		Rank/Grade		Date of Screening	
EmpID	Date of Birth	Work Telephone			
Unit OPFAC		Unit Name			
To be completed by the member: <i>(use reverse side as needed)</i>					
List any significant medical history since your last periodic health assessment (PHA) or Medical screening <i>(describe any illnesses, injuries etc.):</i> 					
Have you experienced any significant changes in stress level, mood or family life?		YES		NO	
If yes, describe					
Do you have any alcohol-related problems <i>(including DWI)</i> ?		YES		NO	
If yes, describe					
Are you presently taking any medication <i>(including over-the-counter)</i> ?		YES		NO	
If yes, describe					
The information I have provided above is complete and accurate.					
_____ Signature of Member			_____ Date		
The following section is to be completed by health services personnel					
Review of Health Record performed. Significant findings are:					
Best Distant Visual Acuity <i>(with correction, if required)</i> : R: _____ L: _____ Sitting blood pressure: _____					
NOTE: ATTACH A COPY OF LAST APPROVED PHA					
Signature/Title of Health Record Reviewer			Date		
Signature/Title of Reviewing Authority			Date		
Signature/Title of Approving Authority			Date		

Privacy Act Statement for Annual Command Afloat Medical Screening

AUTHORITY: 5 U.S.C. § 301; 10 U.S.C. §§ 1071-1107; 14 U.S.C. § 93(a)(17);
14 U.S.C. §§ 632-33; 44 U.S.C. § 3101; 29 C.F.R. § 1630.14(d);
45 C.F.R. § 164.524; Executive Order 9397.

PRINCIPAL PURPOSES: The primary purpose is to facilitate and document your health care. Other possible purposes are to: determine normal duty rotations; suitability of personnel for overseas assignments; develop automated information relating to medical readiness in wartime and contingency operations; determine eligibility for disability; maintain health care records as a function of general health maintenance.

ROUTINE USES: The primary use of this information is to provide, plan, and coordinate health care. Other possible uses are to: aid in preventive health and communicable disease control programs; report medical conditions required by law to federal, state, and local agencies; compile statistical data; conduct research; teach; determine suitability of personnel for service or assignments; adjudicate claims and determine benefits; other lawful purposes, including law enforcement and litigation; conduct authorized investigations; evaluate care rendered; determine professional certification and hospital accreditation; provide physical qualifications of patients to agencies of federal, state, or local government upon request in the pursuit of their official duties.

DISCLOSURE: Mandatory for military personnel. Voluntary for all other personnel. If the requested information is not provided, comprehensive health care may not be possible, but care will not be denied.