



Commandant
United States Coast Guard

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COMDTINST 6010.2D
29 JUN 2015

COMMANDANT INSTRUCTION 6010.2D

Subj: COAST GUARD AUXILIARIST SUPPORT TO COAST GUARD HEALTH CARE FACILITIES

- Ref: (a) Coast Guard Medical Manual, COMDTINST M6000.1 (series)
 (b) Auxiliary Manual, COMDTINST M16790.1 (series)
 (c) U.S. Coast Guard Security and Information Assurance (SIA) Manual, COMDTINST M5500.13 (series); To obtain a copy of this reference contact Commandant (CG-65) at 202-475-3637
 (d) Information and Life Cycle Management Manual, COMDTINST M5212.12 (series)

1. PURPOSE. This Instruction promulgates information for participation of U.S. Coast Guard Auxiliarists who are credentialed health care professionals to assist in Coast Guard health care facilities.
2. ACTION. All Coast Guard unit commanders, commanding officers, officers-in-charge, deputy/assistant commandants, and chiefs of headquarters staff elements will comply with the provisions of this Instruction. Internet release is authorized.
3. DIRECTIVES AFFECTED. Coast Guard Auxiliarist Participation in Coast Guard Health Care Facilities, COMDTINST 6010.2C is cancelled.
4. DISCUSSION.
 - a. For the purpose of this Instruction, Auxiliary health care professionals include physicians, dentists, physician assistants (PA), nurse practitioners (NPs), podiatrists and pharmacists. These health care professionals are eligible to volunteer in Coast Guard clinics or sickbays within guidelines and restrictions established by this Instruction.
 - b. This Instruction does not apply to other categories of health care professionals (e.g., registered nurses (RN), emergency medical services providers (e.g., emergency medical technicians (EMTs), paramedics, first responders, etc.)).

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However, Auxiliary members possessing these allied health care skills should contact the Coast Guard Auxiliary Chief Medical Officer (CMO) for further guidance.

- c. As the missions and responsibilities of the Coast Guard have expanded, so has the need for health care personnel to not only perform their usual clinical activities but to also be available for emergency mobilization and/or deployment. During surge operations, Auxiliarists' participation may further augment the health care capabilities of existing Coast Guard clinics and potentially release active duty health care personnel for operational response or deployment.
 - d. The Coast Guard Auxiliary is composed of volunteers, some of whom are trained, qualified, and licensed or registered to perform many of the same health care activities as are performed by active duty and selected reserve personnel. Some Auxiliarists are willing to perform health care activities on a volunteer basis for the Coast Guard.
5. DISCLAIMER. This document is intended to provide operational requirements for Coast Guard personnel and is not intended to nor does it impose legally-binding requirements on any party outside the Coast Guard.
 6. MAJOR CHANGES. This Instruction clarifies the mechanism of accession, the privileging and credentialing process and limits the clinical activities of Coast Guard Auxiliary health care professionals volunteering in Coast Guard sickbays.
 7. IMPACT ASSESSMENT. Coast Guard health services administrators and Auxiliary health care professionals should ensure awareness of the contents of this Instruction.
 8. ENVIRONMENTAL ASPECT AND IMPACT CONSIDERATION.
 - a. The development of this Instruction and the general policies contained within it have been thoroughly reviewed by the originating office in conjunction with the Office of Environmental Management, and are categorically excluded (CE) under current USCG CE #33 from further environmental analysis, in accordance with Section 2.B.2. and Figure 2-1 of the National Environmental Policy Act Implementing Procedures and Policy for Considering Environmental Impacts, COMDTINST M16475.1 (series). Because this Instruction implements, without substantive change, the applicable Commandant Instruction or other federal agency regulations, procedures, manuals, and other guidance documents, Coast Guard categorical exclusion #33 is appropriate.
 - b. This directive will not have any of the following: significant cumulative impacts on the human environment; substantial controversy or substantial change to existing environmental conditions; or inconsistencies with any federal, state, or local laws or administrative determinations relating to the environment. All future specific actions resulting from the general policies in this Instruction must be individually evaluated for compliance with the National Environmental Policy Act (NEPA), Council on Environmental Policy NEPA regulations at 40 CFR Parts 1500-1508, DHS and Coast Guard NEPA policy, and compliance with all other environmental mandates.

9. DISTRIBUTION. No paper distribution will be made of this Instruction. An electronic version will be located on the following Commandant (CG-612) web sites. Internet: <http://www.uscg.mil/directives/>, and CGPortal: <https://cgportal2.uscg.mil/library/directives/SitePages/Home.aspx>.
10. RECORDS MANAGEMENT CONSIDERATIONS. This Instruction has been thoroughly reviewed during the directives clearance process, and it has been determined there are no further records scheduling requirements, in accordance with Federal Records Act, 44 U.S.C. 3101 et seq., NARA requirements, and the Information and Life Cycle Management Manual, COMDTINST M5212.12 (series). This policy does not create significant or substantial change to existing records management requirements.
11. AUTHORITY.
 - a. The Coast Guard Authorization Act for Fiscal Year 1996, Title VIII, Sec 802 as codified in 14 U.S.C. § 822, provides that the “purpose of the Auxiliary is to assist the Coast Guard as authorized by the Commandant, in performing any Coast Guard function, duty, role, mission, or operation authorized by law.”
 - b. In accordance with References (a) and (b), the Commandant authorizes the utilization of Auxiliarists in the performance of health care activities for which they are already trained, found qualified, and licensed, registered or certified.
 - c. Auxiliary physicians, podiatrists and dentists who complete the accession, credentialing and privileging process contained in Reference (a) are authorized to wear two and one-half stripes with a red “A”. In accordance with Reference (b), Auxiliary NPs and PAs who complete the accession, credentialing and privileging process are authorized to wear two stripes with a red “A”. Auxiliarists are allowed to wear the insignia of the highest office elected or appointed office earned, given that it was held for at least six months. In accordance with Reference (b), Commandant (CG-11) and each Auxiliary Area Deputy National Commodore are authorized to assign one Auxiliary health care professional as a manager. Health care managers are authorized to wear the three stripes with a red “A”
12. MECHANISM OF ACCESSION.
 - a. Auxiliarists who desire to volunteer their health care skills for the Coast Guard, or who desire more information, should contact the Coast Guard Auxiliary CMO / Division Chief for Health Services (DVC-HM). Auxiliary health care professionals will be matched to a local Coast Guard clinic or sickbay according to their clinical training and competencies.
 - b. For health care professionals who currently are not members of the Coast Guard Auxiliary, but are seeking membership in the Auxiliary to provide health services, a review of the applicant’s competencies and suitability to the Coast Guard health care program will be undertaken prior to the applicant’s receipt of a favorable Auxiliary Personnel Security Investigation (PSI) and completion of the applicant’s formal accession into the Coast Guard Auxiliary. Health care professionals who are members of the Coast Guard Auxiliary and want to

- provide health care as an Auxiliarist, must follow the steps in paragraphs 12c through 12g.
- c. All applicants will send their curriculum vitae (CV), as well as a completed Information Questionnaire for Auxiliary Health Care Providers, Form CG-6032, to the Auxiliary CMO via email (with scanned attachments). If transmission of PII from a non-Coast Guard email account is necessary refer to Reference (c). The password for the document will be provided via separate correspondence. The CV and questionnaire will be reviewed by the Auxiliary CMO for applicability to the needs of the health care program and will include input from the applicant's or Auxiliarist's Flotilla Commander; and, if approved, the Auxiliary CMO will forward a copy of the applicant's CV, questionnaire, and their own endorsement to the appropriate program manager in Commandant (CG-112) for review. If acceptable, the applicable force manager will contact the Health, Safety, Work-Life Service Center (HSWL SC) to assess and identify the need for services from an Auxiliarist health care professional. The force manager will then notify the Auxiliary CMO and HSWL SC of any clinic(s) availability. In turn, the Auxiliary CMO will provide the Auxiliary health care professional with clinic contact information so that a final interview for suitability may be conducted by the clinic POC.
 - d. Assignments for Coast Guard Auxiliary health care professionals will be coordinated between Commandant (CG-112), HSWL SC, and the local Regional Practice site as well as the clinic's Senior Health Services Officer (SHSO) and Regional Manager (RM).
 - e. The Auxiliarist will be expected to provide, on average, a minimum of two (2) days of duty per month during normal clinic hours.
 - f. This program seeks to recruit Auxiliary health care professionals who are located within 50 miles of a Coast Guard clinic or sickbay. Restricting proximity reduces program cost and simplifies the logistics of placing and utilizing requested Auxiliary health care professionals.
 - (1) The 50 mile limit may be waived by Commandant (CG-11) based upon the needs of the unit as requested by the clinic or HSWL SC.
 - (2) Waiver Requests for Auxiliary Health Care Providers Residing Greater than 50 Miles from Assigned Clinic/Sick Bay, Form CG-6031, will be submitted by memorandum from the clinic or sickbay to Commandant (CG-11) through HSWL SC. The waiver request will include the specific needs of the clinic or sickbay that will be met by the Auxiliarist, the frequency of the needs, whether funding for travel will be provided (by the unit, HSWL SC or at the Auxiliarist's own expense), and that the Auxiliarist agrees to provide services per the requirements noted in the waiver request.
 - g. Applicants who are not approved as an Auxiliary health care professional at a local Coast Guard clinic will be encouraged to apply for membership into the Coast Guard Auxiliary in another capacity.

13. ASSIGNMENT.

- a. The funding authority must generate appropriate orders for each assignment. Travel expenses may be reimbursed for necessary travel to Auxiliary members who are assigned to duty pursuant to the established mileage rate as set forth in the Joint Travel Regulations. Auxiliary members will receive no compensation for clinical services performed pursuant to 14 U.S.C. § 830.
- b. Auxiliarists will have no command authority or supervisory responsibility, and will at all times be responsible to a senior health care professional assigned to the clinic.
- c. Professional liability. A Coast Guard Auxiliary health care professional who is assigned to duty shall be deemed a federal employee for purposes of 14 U.S.C. § 823a for medical liability purposes only. An Auxiliarist health care professional is required to disclose to the Coast Guard a full description of his or her professional background and health care qualifications (including any adverse or disciplinary action taken against the member), the member's medical license, or any credential by any medical board or governing agency. While performing official duties, the Auxiliarist health care professional acknowledges that he or she will perform only those operational/primary health care activities for which he/she has been credentialed and privileged. Auxiliarists may be subject to civil liability for conduct beyond the scope of their license. Performance of tasks outside the scope of written authorization (as defined by Request of Clinical Privileges) or beyond the scope of the assigned duties authorized by Commandant (CG-11) may subject the Coast Guard Auxiliary health care professional to civil liability and disciplinary action in accordance with Reference (b). An Auxiliarist's assignment to duty determination will be made in accordance with Reference (b).

14. CLINICAL UTILIZATION.

- a. Auxiliary health care professionals working in Coast Guard clinics may provide the full complement of clinical services consistent with their credentials, Coast Guard privileging and available facility/resources.
- b. In sickbays, Auxiliary physicians, PAs and NPs are only authorized to provide the following clinical services: retirement physical examinations and Occupational Medical Surveillance and Evaluation Program examinations in accordance with Reference (a). To maintain continuity of care by the member's primary care provider, Auxiliary health care professionals are not authorized to provide routine health care (medical/dental) or any associated procedures in Coast Guard sickbays. This does not preclude an Auxiliary health care professional at a sickbay from providing emergency care (e.g., threats to life, limb, or organs of special sense).
- c. Per Reference (b), medical support to the Coast Guard Academy Introduction Mission (AIM) program is an official mission of the Coast Guard Auxiliary. While Auxiliary/uniformed health care professionals are not authorized to provide routine or primary health care services to non-beneficiaries, Auxiliary/uniformed health care professionals participating in the Coast Guard

Academy AIM program are authorized to provide common first aid (typically that a parent would provide), emergency support and stabilization for transport and to provide in support of AIM participants.

- d. Auxiliary dentists who choose to provide Coast Guard services in their private dental office may only provide routine dental examinations and may not render dental treatments.
- d. Auxiliary health care professionals are not authorized to provide health care afloat onboard cutters without a formal request approved by Commandant (CG-112).

15. CREDENTIALING AND PRIVILEGING.

- a. Auxiliary health care professionals will meet and maintain all applicable credentialing and privileging requirements as specified in Reference (a). Commandant (CG-11) is the final authority for any variations from policy regarding the privileging of Auxiliary health care professionals.
- b. The application and protocol for credentialing are as follows:
 - (1) Auxiliary health care professionals will submit the information and documentation outlined in Required Application Information for Auxiliary Health Care Activities, Form CG-6034, a signed Attestation, Form CG-6040, and a Verification Conditions and Release of Information, Form CG-6041, to:

COMMANDANT (CG-1122)
ATTN: CREDENTIALING AND PRIVILEGING
US COAST GUARD STOP 7907
2703 MARTIN LUTHER KING JR AVE SE
WASHINGTON DC 20593-7907
 - (2) A National Practitioner Data Bank-Health Care Integrity Practitioner Data Bank (NPDB-HIPDB) query will be run for all health care applicants.
 - (3) A copy of the most recent clinical privileges will be requested from medical institution(s) at which the health care professional has or had privileges.
 - (4) Additional information, documentation, and/or clarifications may be required.
 - (5) Application and credentialing records will be kept in accordance with Reference (a).
- c. The application and protocol for privileging are as follows:
 - (1) Once Auxiliary health care professionals are fully credentialed and are approved for utilization within a designated Coast Guard clinic or sickbay, they may apply for clinical privileges as appropriate and in accordance with Reference (a).
 - (2) Auxiliary health care professionals are subject to the same credentialing review process and privileging standards as established for U.S. Public Health Service and Coast Guard health care professionals currently assigned

to work in Coast Guard clinics per Reference (a).

16. AUXILIARIST HEALTH CARE PROFESSIONAL RESPONSIBILITIES.

- a. The Auxiliarist must at all times adhere to Coast Guard administrative policies.
- b. The Auxiliarist is responsible, at his/her own expense, to perform all activities required to maintain his/her certification, license, and qualifications, including but not limited to, Healthcare Provider Basic Life Support Certification (BLS), Drug Enforcement Administration License (if prescribing narcotic medications) and continuing professional education.
- c. Any incident or circumstance that might impact the Auxiliarist's credentials or professional status; or if he/she no longer remains a member of the Coast Guard Auxiliary; or if he/she becomes aware of any mental or physical condition or impairment which he/she develops that may impact the performance of assigned activities; must immediately be reported to the Senior Medical Executive, Senior Dental Executive, Senior Health Services Officer, Regional Manager and/or Commanding Officer/Officer-in-Charge. The Clinic Administrator must notify HSWL SC and Commandant (CG-1122) in writing, within 14 days.
- d. By accepting orders for participation in Coast Guard health care activities, the Auxiliarist agrees to abide by the conditions and policies contained within this Instruction, Reference (b) and as promulgated by authorities empowered to do so by the Coast Guard.

17. FORMS/REPORTS. The forms referenced in this Instruction are available in USCG Electronic Forms on the Standard Workstation or on the Internet:

<http://www.uscg.mil/forms/>, CGPortal at <https://cgportal2.uscg.mil/library/SitePages/Home.aspx>; and Intranet at <http://cgweb.comdt.uscg.mil/CGForms>.

18. REQUEST FOR CHANGES. Units and individuals may recommend changes by writing via first class mail through the chain of command to:

COMMANDANT (CG-112)
US COAST GUARD STOP 7907
2703 MARTIN LUTHER KING JR AVE SE
WASHINGTON DC 20593-7907

M. K. Dollymore /s/
Rear Admiral, U.S. Public Health Service
Director of Health, Safety, and Work-life