

LIMITED DUTY FORM 6100/5 INSTRUCTIONS

1. Date should be the day of discharge. If no date is written when LIMDU is turned in do not worry, that can be filled in at a later time.
2. Make sure patients full name is printed legibly.
3. Full social, not last 4.
4. Start date should be the same as discharge date or the following day. If no date is written when LIMDU is turned in do not worry, that can be filled in at a later time.
5. End date will be approximately 6 months from start date. If no date is written when LIMDU is turned in do not worry, that can be filled in at a later time.
6. Make sure one of the six boxes is checked off.
7. At least one diagnosis must be listed, if more than one then use the extra provided lines.
8. A brief explanation of the injury to SNM.
9. A treatment plan must be listed.
10. All limitations must be listed, i.e. No PFT, CFT, heavy lifting etc.
11. **Must be signed and printed by a staff physician, not a resident. (Atleast one signature must be a Staff Physician)**
12. **Must be signed and printed by a staff physician, resident, or intern.**
13. No signature is to be listed in this slot, please leave blank.
14. Patient signs Limited Duty Form.

Along with the LIMDU form, the Marine must fill out an "Information Sheet". When both forms are completed contact Sgt Santiago for further instructions.

Make copies of both forms and store in a secure area in the event they are misplaced.

ABBREVIATED MEDICAL EVALUATION BOARD REPORT

SECTION 1: CLINICAL INFORMATION (TO BE COMPLETED BY MEDICAL OFFICERS)

Date: 1. Patient Name: 2. Patient SSN: 3.

Proposed start date for limited duty: 4. Proposed end date (≤ 6 months): 5.

This period of limited duty is for: (Select one)

6. {
- 1st LIMDU (≤ 6 months) Enlisted ADSM (no referral to service headquarters necessary).
 - 2nd LIMDU (≤ 6 months) Enlisted ADSM (no referral to service headquarters necessary). Note that the first and second TLD periods cannot exceed 12 months cumulatively from the date of the first TLD period.
 - 1st LIMDU (≤ 6 months) Officer ADSM (referral to service headquarters necessary).
 - 2nd LIMDU (≤ 6 months) Officer ADSM (referral to service headquarters necessary).
 - 3rd or subsequent LIMDU periods on Navy and Marine ADSM involving a distinctly different condition than that responsible for the first and second TLD periods (for referral to service headquarters for "departmental review").
 - Placement on LIMDU - if the patient is not already in a LIMDU status - at the same time the patient's case is referred to the physical evaluation board for adjudication.

Diagnosis: (1) 7. ICD-9 CM Code _____
(2) _____ ICD-9 CM Code _____
(3) _____ ICD-9 CM Code _____

Circumstances of injury/illness:

8.

Treatment plan:

9.

Limitations from full duty (including whether transfer/TEMU for treatment is indicated, and any PRT limitations):

10.

11.
Printed MEB Member Name and Signature/Date

12.
Printed MEB Member Name and Signature/Date

13.
Printed CA Name and Signature/Date

SECTION 2: PATIENT INFORMATION, TO BE COMPLETED BY PATIENT

I have received full information on the proposed Limited Duty period from my provider. I understand that this period of limited duty is not effective until approved by the MTF Convening Authority, and that the MTF will report this LIMDU action to my parent command. I understand I may be returned to duty prior to the date appearing above as my clinical condition warrants and upon action by my attending provider.

14.
Patient Signature/Date

SECTION 3: TO BE COMPLETED BY PATIENT ADMINISTRATION OFFICER/MEDICAL BOARDS OFFICER

The following actions have been completed:

- Completion of Patient Information Sheet
- Notification to PSD/Personnel Office
- LODD Requested from Parent Command (if LODD required)
- Entry into MedBOLTT
- Briefing to Patient on Limited Duty/MEBs
- Notification to MTF LIMDU Coordinator
- Notification to Parent Command

Patient Administration Officer/Medical Boards Official Printed Name, Signature, and Date

ROUTING: Original to Patient Health Record; copies to Patient, Parent Command, PSD, MEBR Case File, and PERS-4821 or MMSR-4

NAVMED 6100/5 (Rev. 08-2004)
PREVIOUS EDITIONS OBSOLETE