



DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH INFANTRY DIVISION AND FORT CARSON
6105 WETZEL AVENUE, BLDG 1435
FORT CARSON CO 80913-4289

AFYB-CG

19 February 2025

MEMORANDUM FOR RECORD

SUBJECT: Policy Letter #5 – Administrative Medical Procedures

1. In order to simultaneously protect the health of our Soldiers and efficiently process administrative actions for individuals with significant health care needs, the enclosed medical policies shall remain in effect until completion of my assignment as the 4th Infantry Division Commander.
2. The point of contact for this memorandum is the Division Surgeon, LTC Matthew Westhoff at 719-503-0900 or the G1 representative Mr. Richard Giadone at 719-526-3270.


DAVID S. DOYLE
Major General, USA
Commanding

4 Encls

1. Leave Policy for 4th Infantry Division and Fort Carson Soldiers in the Disability Evaluation System
2. Delegation of Authority for Extensions of Soldiers in the Disability Evaluation System
3. Medical Extension Processing and Procedures for Soldiers Within 3 Months of ETS
4. Delegation of Authority for SRU Status and Attachment to the SRU

Enclosure 1

Leave Policy for 4th Infantry Division and Fort Carson Soldiers in the Disability Evaluation System (DES)

1. References.

- a. Army Regulation 600-8-10, Leaves and Passes, 3 June 2020.
- b. Department of Defense Instruction 1332.1, Disability Evaluation System, 5 August 2014.
- c. AR 635-40, Disability Evaluation for Retention, Retirement, or Separation, 19 January 2017.

2. Purpose. The purpose of this policy is to increase unit readiness by restricting the approval of transition leave for 4th Infantry Division Soldiers in the Disability Evaluation System (DES) for more than 120 days. This policy applies only when the time between the date on which the Soldier enters into the DES and the date on which the Soldier's name appears on the TRANSPOC Notification Roster exceeds 120 days. Soldiers assigned to the Soldier Recovery Unit (SRU) are not exempt from this policy, however the SRU commander is delegated authority to approve more than 30 days absence for unique circumstances for individuals requiring an extended transition.

3. Policy, Ordinary Leave. Approval of ordinary leave for Soldiers in the DES process is generally discouraged before their Veterans Administration Compensation and Pension Exams are complete. Commanders may grant leave as long as the leave or other required absence is communicated and coordinated immediately with the assigned physical evaluation board liaison officer (PEBLO) and does not prevent timely completion of DES exams (AR 635-40, para. 4-8a). After the requisite medical exams are completed, Soldiers in an ordinary leave status at the time their name appears on the TRANSPOC Notification Roster will be required to return to Fort Carson within six calendar days to complete the mandatory transition requirements.

4. Policy, Transition Leave.

a. AR 600-8-10, para. 4-9b, directs that transition leave begins after Soldiers complete operational requirements, out-processing requirements, and transition processing. Consistent with my intent to ensure timely transition processing, commanders are directed to limit Soldiers' transition leave to no more than 30 days to ensure unit readiness in support of current operational requirements. If a Soldier is granted administrative absence, the combination of leave and administrative absence will not exceed 30 days.

b. DODM 1332.18 v.1, para 4.13(d) states that the separation date of a Soldier should generally be within 26 days from the date of approval of the decision to separate the Soldier. Under DA PAM 635-40, Chapter 3-14, within five days after the U.S. Army Physical Disability Agency (USAPDA) approves the disability disposition, USAPDA establishes a separation date of not later than 90 days. Within the 90-day timeframe,

Enclosure 1

Leave Policy for 4th Infantry Division and Fort Carson Soldiers in the Disability Evaluation System (DES)

the transition center, in coordination with the unit command, establishes a separation or retirement date. The not later than 90 days is not intended to result in every Soldier having 90 days of transition time. To ensure a timely transition process, the transition center may only establish a separation or retirement date that is 26 days from the date of approval to separate the Soldier, excluding leave and absences.

c. Consistent with AR 600-8-10, para. 4-9j, Soldiers can sell or "cash in" no more than 60 days of leave during their military career. Failure to manage leave properly before transition may result in the loss of Soldiers' accrued leave during the DES process. Soldiers and commanders must ensure the maximum use of earned leave to minimize the loss of leave prior to transition. Soldiers who have already cashed in leave will be limited to their 26 day no-later-than date.

5. Commanders will counsel Soldiers upon their enrollment in DES to ensure they are aware of this policy and the potential limitations to their transition leave. Soldiers requesting an exception to policy will process a DA 4187 through their Brigade chain of command to the Chief of Staff, 4ID and Fort Carson.

6. The point of contact for this process is the 4ID Senior Commander Staff G1, Mr. Richard Giadone.

Enclosure 2

Delegation of Authority for Extensions of Soldiers in the Disability Evaluation System

1. Policy. In accordance with the provisions of Army Regulation 635-200 (Active Duty Enlisted Administrative Separations), para 1-25f, I hereby delegate the authority to grant extensions or retention past a Soldier's set release date when physical disability processing is required or has been delegated has been initiated to the Chief of Staff, 4th Infantry Division or the Director of Senior Commander Augmentation. Any action taken according to this delegation will state that it is taken "pursuant to authority delegated by MG David S. Doyle dated 15 June 2023." This delegation shall remain in effect until completion of my assignment as the 4th Infantry Division Commander.

2. The point of contact for this process is the 4ID Senior Commander Staff G1, Sue Allnutt, at 719-526-3270 / 719-332-6039 or susan.k.allnutt.civ@army.mil.

Enclosure 3

Medical Extension Processing and Procedures for Soldiers Within 3 Months of ETS

1. References.

- a. AR 635-200, Active Duty Enlisted Administrative Separations, dated 28 June 2021.
- b. Retention EMT Policy Message 23-06, SUBJECT: Medical Extensions, dated 1 October 2022.

2. Policy.

a. Soldiers within 90 days of ETS who require additional time to complete MEB/PEB are processed IAW AR 635-200, para 1-25, and require GCMCA Approval. The majority of these transactions are short notice and very close to the Soldier's separation date. These cases require additional coordination to prevent the Soldier from dropping from the Army personnel systems and Finance.

b. Approving authorities should approve retention in the absence of substantial evidence that such retention prejudices good order and discipline. Disapproval is withheld to HQDA and requests for disapproval will be processed IAW AR 635-200, para 1-15i(2). That disability evaluation could be accomplished by the IRR or other organization to which the Soldier is to be transferred, or that the Soldier may be eligible for Veterans Administration healthcare and disability compensation, are **inappropriate** reasons to deny a Soldier's request for extension.

c. The following steps will be followed when processing a medical extension to complete the MEB/PEB Process:

(1) The Physical Evaluation Board Liaison Officer (PEBLO) will initiate DA Form 4187 dated Dec 2022 (Annex A) for a 6-month extension when a Soldier requires additional time to complete the MEB/PEB process. The DA Form 4187 will be sent to the Soldier's Company Commander along with cc'ing the G1 POC (susan.k.allnutt.civ@army.mil). The following forms will accompany the DA Form 4187:

- (a) Affidavit (needs to be signed by Co Cdr and Soldier) (Annex B)
- (b) Profile
- (c) Soldier Talent Profile (STP)
- (d) Medical Memo from the Director DES

(2) The Company Commander will first ensure the Soldier has the proper ERUP

Enclosure 3

Medical Extension Processing and Procedures for Soldiers Within 3 Months of ETS

Code of 9H (Retention NCO can assist) unless there is a higher priority ERUP code posted and the Soldier should be slotted as a "KNOWN LOSS" so HRC can requisition another Soldier to fill that position. The Company Commander will then make his recommendation and forward the DA Form 4187 and signed affidavit back to the PEBLO for processing. If the Company Commander recommends disapproval, they must route the packet with supporting documents through their respective Battalion and Brigade Commanders for additional comments and recommendations before sending it back to the PEBLO. Again, the G1 POC (susan.k.allnutt.civ@army.mil) will be cc'd. **THESE WILL NOT BE SENT THRU S1 CHANNELS BUT THEY WILL BE CC'D FOR INFORMATIONAL PURPOSES ONLY.** NOTE: Comments are only required if the commander recommends disapproval.

(3) Once the G1 POC has the complete packet, it will be packaged and routed thru the Division Surgeon to the GCMCA authority (CG). The GCMCA has delegated this authority to the Chief of Staff or the Director, Senior Commander's Augmentation per AR 635-200, para 1-25f. Once the packet has been approved, a complete copy of the packet will be forwarded to Post Retention who will do the ETS transaction. They will in turn, send to Transitions and Finance to ensure all systems are updated, and amended orders are published, if necessary.

(4) A copy of the approval memo and amended orders (if applicable) will be forwarded to the Soldier's chain of command and PEBLO once the above processes are complete to reflect the Soldier's new ETS.

3. The point of contact for this process is the 4ID Senior Commander Staff G1, Sue Allnutt, at 719-526-3270 / 719-332-6039 or susan.k.allnutt.civ@army.mil.

Enclosure 3, Annex A
Example DA 4187

PERSONNEL ACTION																							
<small>For use of this form, see DA PAM 600-8; the proponent is the DCS, G-1.</small>																							
PRIVACY ACT STATEMENT																							
<p>AUTHORITY: 10 U.S.C. 7013, Secretary of the Army; DA PAM 600-8, Military Human Resources Management Administrative Procedures.</p> <p>PRINCIPAL PURPOSE: To request or record personnel actions for or by Soldiers in accordance with DA PAM 600-8.</p> <p>NOTE: For additional information see the System of Records Notice A0600-8-104 AHRC. https://dpcid.defense.gov/Portals/49/Documents/Privacy/SORNs/Army/A008-8-104-AHRC.pdf</p> <p>ROUTINE USE(S): There are no specific routine uses anticipated for this form; however it may be subject to a number of proper and necessary routine uses identified in the system of records notice(s) specified in the purpose statement above.</p> <p>DISCLOSURE: Voluntary, however, failure to impart pertinent information may result in a delay or error in processing the request for personnel action.</p>																							
SECTION I - PERSONAL IDENTIFICATION																							
<p>1. THRU (include ZIP Code)</p>	<p>2. TO (include ZIP Code) Commander 4th Infantry Division and Fort Carson Fort Carson, CO 80913</p>	<p>3. FROM (include ZIP Code) Commander (Unit Name) Fort Carson, CO 80913</p>																					
4. NAME (Last, First, MI)	5. GRADE OR RANK / PMOS / AOC	6. DOD ID NUMBER																					
SECTION II - DUTY STATUS CHANGE (AR 600-8-6)																							
<p>7. The above Soldier's duty status is changed from _____ to _____ effective _____ hours.</p>																							
SECTION III - REQUEST FOR PERSONNEL ACTION																							
<p>8. I request the following actions: (Check as appropriate)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Service School (Ent only)</td> <td><input type="checkbox"/> Special Forces Training/Assignment</td> <td><input type="checkbox"/> Identification Card</td> </tr> <tr> <td><input type="checkbox"/> ROTC or Reserve Component Duty</td> <td><input type="checkbox"/> On-the-Job Training (Ent only)</td> <td><input type="checkbox"/> Identification Tags</td> </tr> <tr> <td><input type="checkbox"/> Volunteering For Oversea Service</td> <td><input type="checkbox"/> Retesting in Army Personnel Tests</td> <td><input type="checkbox"/> Separate Rations</td> </tr> <tr> <td><input type="checkbox"/> Ranger Training</td> <td><input type="checkbox"/> Reassignment Married Army Couples</td> <td><input type="checkbox"/> Leave - Excess/Advance/Outside CONUS</td> </tr> <tr> <td><input type="checkbox"/> Reassignment Extreme Family Problems</td> <td><input type="checkbox"/> Reclassification</td> <td><input type="checkbox"/> Change of Name/SSN/DOB</td> </tr> <tr> <td><input type="checkbox"/> Exchange Reassignment (Ent only)</td> <td><input type="checkbox"/> Officer Candidate School</td> <td><input checked="" type="checkbox"/> Other (Specify):</td> </tr> <tr> <td><input type="checkbox"/> Airborne Training</td> <td><input type="checkbox"/> Asgmt of Pers with Exceptional Family Members</td> <td style="text-align: center;">MEDICAL EXTENSION</td> </tr> </table>			<input type="checkbox"/> Service School (Ent only)	<input type="checkbox"/> Special Forces Training/Assignment	<input type="checkbox"/> Identification Card	<input type="checkbox"/> ROTC or Reserve Component Duty	<input type="checkbox"/> On-the-Job Training (Ent only)	<input type="checkbox"/> Identification Tags	<input type="checkbox"/> Volunteering For Oversea Service	<input type="checkbox"/> Retesting in Army Personnel Tests	<input type="checkbox"/> Separate Rations	<input type="checkbox"/> Ranger Training	<input type="checkbox"/> Reassignment Married Army Couples	<input type="checkbox"/> Leave - Excess/Advance/Outside CONUS	<input type="checkbox"/> Reassignment Extreme Family Problems	<input type="checkbox"/> Reclassification	<input type="checkbox"/> Change of Name/SSN/DOB	<input type="checkbox"/> Exchange Reassignment (Ent only)	<input type="checkbox"/> Officer Candidate School	<input checked="" type="checkbox"/> Other (Specify):	<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	MEDICAL EXTENSION
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<input type="checkbox"/> Airborne Training	<input type="checkbox"/> Asgmt of Pers with Exceptional Family Members	MEDICAL EXTENSION																					
9. SIGNATURE OF SOLDIER (When required)		10. DATE (YYYYMMDD)																					
SECTION IV - REMARKS (Applies to Sections II, III, and V)																							
<p>1. In accordance with AR 635-200, para 1-25, and EMT Policy Message 23-06 dated 1 October 2022, recommend approval of my request to be extended on active duty beyond my scheduled ETS date for the purpose of continuing my medical care and completion of IDES. The following information is provided:</p> <p>a. BASD: 20150224</p> <p>b. Current ETS: 20190823 Requested ETS: 20200223</p> <p>c. Medical Reason for Extension: Completion of medical care.</p> <p>d. Length of Extension Requested: 180 days</p> <p>2. I have been fully advised of the rights and advantages that may accrue by voluntarily remaining on active duty in the Army beyond my scheduled ETS date.</p> <p>4 Encls 1. Affidavit 3. Current Profile 2. SRB 4. PEB Memo</p>																							
SECTION V - CERTIFICATION / APPROVAL / DISAPPROVAL																							
<p>11. I certify that the duty status change (Section II) or that the request for personnel action (Section III) contained herein -</p> <p><input type="checkbox"/> HAS BEEN VERIFIED <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DISAPPROVAL <input type="checkbox"/> IS APPROVED <input type="checkbox"/> IS DISAPPROVED</p>																							
12. COMMANDER / AUTHORIZED REPRESENTATIVE COMPANY COMMANDER INFO	13. SIGNATURE	14. DATE (YYYYMMDD)																					

ADDENDUM - RECOMMENDATIONS FOR APPROVAL / DISAPPROVAL

15. NAME (Last, First, MI)		16. DOD ID NUMBER	
AUTHORITY	a. TO Commander THIS WILL BE THE SAME AS THE "FROM" BLOCK ON THE FIRST PAGE Fort Carson, CO 80913	b. FROM	Commander 4th Infantry Division and Fort Carson Fort Carson, CO 80913
c. ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	
d. NAME (Last, First, MI)		e. RANK	f. DATE (YYYYMMDD)
g. TITLE / POSITION		h. SIGNATURE	
CHIEF OF STAFF			
i. COMMENTS See attached memorandum for approval			
AUTHORITY	a. TO	b. FROM	
c. ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	
d. NAME (Last, First, MI)		e. RANK	f. DATE (YYYYMMDD)
g. TITLE / POSITION		h. SIGNATURE	
i. COMMENTS			
AUTHORITY	a. TO	b. FROM	
c. ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	
d. NAME (Last, First, MI)		e. RANK	f. DATE (YYYYMMDD)
g. TITLE / POSITION		h. SIGNATURE	
i. COMMENTS			
AUTHORITY	a. TO	b. FROM	
c. ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	
d. NAME (Last, First, MI)		e. RANK	f. DATE (YYYYMMDD)
g. TITLE / POSITION		h. SIGNATURE	
i. COMMENTS			
AUTHORITY	a. TO	b. FROM	
c. ACTION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED		RECOMMEND: <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	
d. NAME (Last, First, MI)		e. RANK	f. DATE (YYYYMMDD)
g. TITLE / POSITION		h. SIGNATURE	
i. COMMENTS			

AFFIDAVIT

At *Fort Carson, CO*, **(Rank and Name)**, personally appeared before me, the undersigned, authorized by law to administer oaths pursuant to the Uniform Code of Military Justice, Article 136, one **(Rank and Name)** who after being advised by me of the rights and advantages of remaining in an active duty status in the Army beyond the scheduled date of release for the purpose of completion of hospital care and/or physical disability evaluation under the provisions of chapter 61, 10 USC, and after being duly sworn, deposes and says,

"I have been fully advised by the undersigned officer of the rights and advantages that may accrue to me by voluntarily remaining on active duty in the Army beyond the scheduled date of my release for the purpose of completing hospital care and /or physical disability evaluation under the provisions of chapter 61, 10 USC and have been further fully advised that if I elect to be discharged or released from active duty as scheduled, I will not after such discharge or release from active duty, be eligible for separation or retirement for physical disability. Wherefore, in consideration of the above I **(do)** _____ **(do not)** _____ **(circle one & initial)** desire retention on active duty in the Army beyond the scheduled date of expiration of my term of service."

CO CDR's SIGNATURE BLOCK

SOLDIER'S SIGNATURE BLOCK

Enclosure 4

Delegation of Authority for Soldier Recovery Unit (SRU) Status and Attachment to the SRU

1. Policy. In accordance with the provisions of Army Regulation 40-58 (Army Recovery Care Program), para 2-25a(2), I hereby delegate the authority to the MEDDAC Commander, Fort Carson, Colorado to serve as the final approval authority for actions attaching Soldiers to the Soldier Unit Status (SRU) and designating the Soldier's corresponding Soldier Recovery Unit Status. The exception to this rule is if any non-concurrence exists in the chain of approval regarding the Soldier's assignment to the SRU. In these instances, I reserve final approval authority for SRU assignments. Any action taken according to this delegation will state that it is taken "pursuant to authority delegated by MG David S. Doyle dated 15 June 2023". This delegation shall remain in effect until completion of my assignment as the 4th Infantry Division Commander.

2. The point of contact for this process is the 4ID Senior Commander Staff G1, Sue Allnutt, at 719-526-3270 / 719-332-6039 or susan.k.allnutt.civ@army.mil.