

Medical Actions (NGGA-PEM)

Line of Duty (LOD)

Joint Force Headquarters
Georgia Army National
Guard Marietta, GA
1 October 2025

SUMMARY of CHANGE

SOP

Line of Duty (LOD)

- o. Adds LOD 180-day time limit (para 1-2).**
- o. Adds DA Form 1379 requirements with image (para 1-3, a).**
- o. Adds Orders requirements with image (para 1-3, b).**
- o. Adds Medical treatment notes requirements (para 1-4, a,1).**
- 0. Removes HRC Guidance for Army National Guard, Soldiers Requesting Re-Consideration for Line of Duty (LOD) Investigation beyond 180 Days from a Qualified Duty Status (QDS) memo (para 1-10).**
- o. Adds new Guidance for Army National Guard, Soldiers Requesting Re-Consideration for Line of Duty (LOD) Investigation beyond 180 Days (para 1-10).**
- o. Adds Appointing Authority requirements (para 1-11, c)**
- o. Adds Commanders' responsibilities (para 4-1, a)**
- o. Adds time requirement to initiate a LOD (para 4-1, b)**
- o. Adds S1 responsibilities (para 4-1, c)**
- o. Adds LOD documents Appendix A**

Proposed changes, modifications, and/or deletions should be made known to GAARNG G-1, HR Plans using DA Form 2028. Your feedback on providing a quality product is always welcome.

Contents

Chapter 1 Overview

- 1-1 Purpose
- 1-2 Applicability
- 1-3 Authorized Duty Status
- 1-4 When to Initiate a LOD
- 1-5 DA Form 2173, JUN 2021 vs Line of Duty Determination
- 1-6 Non-Emergency Injury/Illness Not Requiring Medical Evaluation
- 1-7 Types of LODs
- 1-8 Medical Pre-Authorization of Continued Medical Care for Duty-Related Conditions
- 1-9 Miscellaneous LOD Information
- 1-10 LOD Investigations Beyond 180 Days from a Qualified Duty Status
- 1-11 Formal LOD

Chapter 2 Time Requirements for Completion and Forwarding Action

- 2-1 GAARNG Processing Timelines
- 2-2 NGB Processing Timelines

Chapter 3 Common Errors on LODs

Chapter 4 LOD Tracking

- 4-1 Responsibilities
- 4-2 LOD Workflows

Chapter 5 Requirements for MEDCHART (eMMPS) Access

- 5-1. Requirements for Initial Access
- 5-2. Access Roles
- 5-3. Required State Training

Appendix A

References

Appendix B

Figures list (Not Used)

Appendix C

Glossary

Chapter 1 Overview

1-1. Purpose.

To provide clear procedural guidance for initiating, routing, and processing line of duty (LOD) investigations. It includes policies and procedures for investigating the circumstances of injury, illness, disease, or death of a Soldier, and provides standards and considerations used in making LOD determinations.

1-2. Applicability.

It is important to note that the Army LOD Program is a **Commander's program**, which essentially protects the interest of both the Soldier and the U.S. Government in accordance with (IAW) Army Regulation, Line of Duty Policy, Procedures, and Investigations (AR 600-8-4; 2-1). A line of duty determination is required whenever a Soldier incurs an injury, illness, or disease, which incapacitates him/her from performing duty for more than 24 hours. The injury, illness, or disease is of lasting significance (to be determined by a provider, paragraph 5-4b). There is a likelihood that an injury, illness, or disease will result in a permanent disability, or the Soldier requires follow-on care. Examples of follow-on care are physical therapy, surgery or continuous care for several visits.

a. LOD determinations for injury, illness, or disease that have no lasting effect, defined as not requiring follow-on care ultimately affecting a Soldier's overall health or career, will not be accepted IAW AR 600-8-4; 2-2. LODs where the diagnoses are minor and resolved without further medical care, including abrasions, generalized pain, headaches (not associated with behavioral health or other more serious, continuing issues such as tumors), hernia, pregnancy, among others, are injuries or illness that leave no lasting effect on the Soldier or require hospitalization for further treatment. These are not appropriate cases for LOD determinations.

b. An LOD is generally warranted for conditions including, but not limited to, fractures, severe sprains, lacerations requiring surgical closure (sutures, staples), psychological issues, and diseases incurred while performing duty-related tasks.

c. An LOD must be completed promptly, including Title 10 United States Code (USC) and Title 32 USC Active Guard Reserve (AGR) Soldiers as the determination will impact the Soldier's eligibility for benefits such as access to medical care, compensation, and disability entitlements.

d. Effective 12 November 2020, Soldiers will have up to 180 days following the completion of their qualified duty to request consideration for a line of duty determination, absent special circumstances. Special circumstances are those in which the covered condition pre-dates the 180-day period, for example, latent onset symptoms of post-traumatic stress and unreported Sexual Assault. (AR 600-8-4; 4-4c), (AR 600-8-4; 5-4)

1-3. Authorized Duty Status.

Soldiers must be on military orders or in a duty status whenever an injury/illness occurs to initiate a LOD. The mere fact that the Soldier was in an "authorized" duty status does not necessarily support a determination of "In Line of Duty" (ILD) in and of itself. Duty status includes:

a. IDT: Inactive Duty Training. This is generally drilling weekends for a National Guard Soldier; documented with a DA Form 1379 generated by the MyUnitPay System. The DA Form 1379 must include the cover page, the page or pages the Soldier is on and the signature page. All other names and social security numbers must be redacted as shown in example below.



In accordance with Department of Defense Financial Management Regulation, Volume 5, Chapter 21 all original records and associated papers will be retained and shall be readily accessible for 6 years and 3 months.

This policy is consistent with the guidance set forth by the National Archives and Records Administration General Records Schedule 6.

CUI // SP-MIL

Page 1 of 13

	E04	08-AUG-2024	11	11-FEB-2022 1	P
	E04	08-AUG-2024	11	11-FEB-2022 2	P
	E04	08-AUG-2024	11	12-FEB-2022 1	P
	E04	08-AUG-2024	11	12-FEB-2022 2	P
	E04	08-AUG-2024	11	13-FEB-2022 1	P

IN APPROPRIATE COLUMNS BY THE LETTER 'A' OR OTHER APPROPRIATE CODE.

C. ENTITLEMENT TO PAY AND ALLOWANCE ARE SUPPORTED BY REQUIRED DOCUMENTATION ON FILE IN THIS UNIT.

NAME, GRADE AND BRANCH OF OFFICER-IN-CHARGE (Typed or printed)	Signature and Date
Horatio M. Crunch CPT GAARMG Commanding	Crunch, Horatio Me Digitally signed by Crunch Horatio Magellan 123456789 Date 20250302

b. Title 32: Soldiers who are AGR or State Active-Duty Operational Support (ADOS), Title 32 orders for Annual Training (AT), and schools such as Non-commissioned Officer (NCO) Academy, Re-Classification, Secondary Military Occupational Specialty Qualification (MOSQ), etc. All orders must be CAC certified as shown in example below.

Period (TDY) : 02 June 2025 - 13 June 2025
Report to: FT STEWART, GA
Reporting date/time: NLT 08:00hrs, 02 June 2025
Purpose: Regular Unit AT CONUS
Additional instructions:
(a) This order is for pay and allowances only. Travel and per diem will be processed in DTS. Round trip distance traveled in my privately owned vehicle to comply with this order was _____ miles. As owner/ operator of the POV, I was primarily responsible for payment of its operating expense.
Soldier Signature: _____
(b) Performance Certification: I certify that I have personal knowledge or I have personally verified the duty requested above has been performed.
Typed Name: CPT Crunch, Horatio
Signature: Crunch, Horatio Me Digitally signed by Crunch Horatio Magellan 123456789 Date 20250302 Date: 20250505
(c) Travel of dependents and shipment of other than TDY weight allowance is not authorized.
(d) Payroll will be submitted by the Unit of Assignment.
(e) Subject to availability of funds.
(f) Reserved for future use.

c. Title 10: All mobilization orders are Title 10, IADT orders, National Guard Bureau (NGB) ADOS.

1-4. When to Initiate an LOD.

If a Soldier must be treated at a Hospital, Emergency Department, or Clinic during IDT or AT, the unit will send the Statement of Medical Examination and Duty Status form (DA Form 2173), dated June 2021 with the Soldier, or escort (if operationally possible) and complete a LOD Incident Packet for record. The attending physician will complete Section I of the DA Form 2173, and the Soldier will return the form to the unit for processing. The DA Form 2173 and medical treatment notes must have a definitive diagnosis in the form of an Initial Capabilities Document (ICD) 10 code for a LOD to be completed. An example of an ICD 10 definitive diagnosis code is M23.92: Unspecified internal derangement of left knee.

Note: “Pain” is not a medical diagnosis and will result in the LOD being returned to the unit for corrections and additional medical documentation.

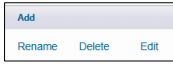
a. The Commander has the overall responsibility for tracking the status and ensuring the LOD is completed. The minimum required documents for a LOD are:

1. DA Form 2173.
2. Medical Treatment with a with a definitive diagnosis by a medical provider. **(NOT DISCHARGE NOTES or AFTER VISIT SUMMARIES)**
3. Soldier's Rights and Warning Statement, signed by a commission officer. If the Soldier is also suspected or accused of any offense under the Uniform Code of Military Justice (UCMJ) or Georgia Code of Military Justice (GaCMJ), the Soldier should also be advised of his or her rights and right to counsel. A Rights Warning Procedure/Waiver Certificate (DA Form 3881) should generally be used for such advice.
4. DA Form 2823, Sworn Statement from the Soldier.
5. Disability Counseling Statement.
6. DA Form 4856, Developmental Counseling Form.
7. Orders or DA Form 1379.
8. DA Form 2870 (Authorization for Disclosure of Medical or Dental Information).

b. Once the unit Readiness NCO (RDNCO) or designee receives all the above items, the unit will upload to the Electronic Medical Management Processing System (eMMPS) at <https://medchart.cloud.mil/MEDCHARTWeb/Default.aspx>

1. If the date entered in the End of Authorized Duty Status section is within 180 days of the current date, you will not be able to select an exception to the policy. If the End of Authorized Duty Status date entered is greater than 180 days from the current date or an Exception to Policy option is selected, you must explain in the comment box.

2. Documents with a lock  icon can only be viewed.

3. Documents with action links  are in a pending status and may be renamed or deleted.

4. Required documents vary according to the selected workflow. If any required documents are missing, the LOD must be sent back to the initiator.

5. All documents marked as required must be uploaded.

6. Review the validation section information.

- i. An orange text indicates a warning message.
- ii. Red validation text indicates an error, and the user must enter or upload the required information before forwarding the case.

iii. Users can forward a case if there is an orange warning displayed, but not if red validation is displayed.

- c. The unit administrator or S-1 will upload informal or formal investigation documents (DA Form 2173, DD Form 261 Report of Investigation Line of Duty and Misconduct Status, approval memorandum for informal LOD, Investigating Officer's (IO's) appointment order, IO's findings for an injury, illness, or disease investigation) which results in an ILD finding into the Soldier's Interactive Personnel Electronic Records Management System (iPERMS). Medical records and criminal investigation department reports are not to be uploaded.

1-5. DA Form 2173, JUN 2021 vs Line of Duty Determination.

A DA Form 2173 is not a Line of Duty determination. A DA Form 2173 is a "Statement of Medical Examination and Duty Status." A Line of Duty determination is a memorandum (By the Authority of the Secretary of the Army) that specifically states, "Approved in the line of duty" for a specific injury or illness, and at a minimum contains the phrase "Reviewed for Completeness."

1-6. Non-Emergency Injury/Illness Not Requiring Medical Evaluation.

Examples of non-emergency injuries/illnesses include muscle strain, sprains, viral illness, contusions, lacerations (not requiring stitches), bruises, rashes, headaches, and sore throat.

- a. Soldier recovers by the end of the training period.
- b. No follow-up care is required.
- c. No loss of civilian income. In such cases, the unit should complete a LOD incident packet to document any of the above occurrences administratively if the Soldier was seen at a civilian treatment facility and incurred a bill, the bill can be paid following the instructions outlined in the *"Defense Health Agency-Great Lakes (DHA-GL) SOP, dated October 2025."*

1-7. Types of LODs Workflow.

- a. Normal Drill Weekend LODs will be entered as "M-Day."
- b. Annual Training and Military School LODs will be entered as "Title 32."
- c. Overseas Training as a National Guard member will be entered as "OCONUS."
- d. Overseas or Mobilization Training converting to federal status LODs will be entered as "Title 10."
- e. LODs stemming from Basic Training, AIT will be entered as "Title 10."
- f. LODs with an approval "In the Line of Duty Memo" from Basic Training or AIT will be entered as "Pre-Approved."

1. Informal: LOD investigations are required to document an injury, illness, or disease; so long as misconduct or gross negligence is not suspected on the part of the Soldier and a formal investigation is not required in accordance with AR 600-8-4, paragraph 2-2a. All informal line of duty investigations must be initiated within 5 calendar days of the command's discovery of the injury, illness, disease, or death. The timeline for completing an informal investigation is no more than 60 days.

Informal LOD Criteria:

- i. Not an injury or condition that occurs under strange/unusual or doubtful circumstances.
- ii. Not a vehicle accident.
- iii. Not resulting in permanent disability.
- iv. No drugs/alcohol involved.

2. Formal LOD investigations are more detailed and are required to arrive at a determination of whether misconduct or gross negligence was involved in the disease, injury, or death of a Soldier (e.g., if misconduct is suspected); and if so, how much did it contribute to the disease, injury, or death. A unit may initiate a formal LOD for any incident involving questionable circumstances or outcomes. All formal line of duty investigations must be

initiated within 5 calendar days of the command's discovery of the injury, illness, disease, or death. The timeline for completing a formal investigation, to include approving authority's findings, is no more than 180 days.

Formal LOD Criteria:

- i. Injury, illness, disease, or death that occurs under strange or doubtful circumstances or is apparently due to misconduct or gross negligence.
- ii. Injury, illness, or death involving the abuse of alcohol or other drugs.
- iii. Self-inflicted injuries or suspected suicide.
- iv. Injury, illness, or death incurred while Absent Without Leave (AWOL).
- v. Injury or death that occurs while an individual was traveling to final acceptance in the Army.
- vi. When a Soldier serving on orders for less than 30 days who becomes disabled due to injury, illness, disease, or death.
- vii. When directed by higher authority (AHRC, approval authority, or appointing authority).
- viii. Conditions that the Military Treatment Facility (MTF) Commander or another medical provider determine Existed Prior to Service (EPTS).
- ix. Injury or death of a United States Army Reserve (USAR) or Army National Guard (ARNG) Soldier while traveling to or from authorized training or duty.
- x. Death of a Soldier while participating in authorized training or duty.
- xi. Under any circumstances the Commander believes it should be fully investigated.
- xii. Disease - requires a formal LOD when a Soldier is serving on an active-duty tour 30 days or less or IDT and is disabled due to disease. The reason for this investigation is to determine if the disease existed prior to service and whether it was service aggravated.
- xiii. Soldiers involved in motor vehicle accidents, while in an approved duty status.
- xiv. All behavioral health related LODs will be processed as a formal investigation.

1-8. Medical Pre-Authorization of Continued Medical Care for Duty-Related Conditions.

- a. Pre-authorization for follow-up care can be initiated after the Unit Commander signs the DA Form 2173 in eMMPS. The LOD does NOT have to be complete in the eMMPS module, but there must be a reasonable assumption that the condition will be found ILD.
- b. Before initiating Pre-Authorization, the Soldier must have a specific need for follow-on care; either a recommendation from the initial visit or have residual issues from the original injury which needs evaluation.
- c. Pre-Authorizations are initiated in eMMPS under Military Medical Support Office ("MMSO") by clicking "Start New Pre-Authorization". The Soldier's name, SSN or Case ID will be entered to begin pre-authorization.
- d. Pre-Authorization requests will need medical notes from previous visits and a copy of the current Physical Profile (DA Form 3349). Medical notes will need to have current diagnosis (anything other than "pain") and recommended course of treatment.

1-9. Miscellaneous LOD information

- a. Duplicate or erroneous LODs are deleted by the G-1. Requests to delete a LOD should be submitted in a memo format to Medical Actions through the Major Subordinate Command (MSC) Medical Readiness Non-Commissioned Officer (MRNCO).
- b. LODs can always be administratively closed if sufficient supporting documentation is not received within 60 days. A digitally signed memo detailing the reason for administrative closure and a Developmental Counseling Form (DA Form 4856) is required.
- c. To re-open a LOD, S-1 personnel must submit a digitally signed memo. **Note: No LOD will be reopened without the missing documentation.**

d. New incoming Unit Commanders, RDNCOs, and MRNCOs will register in eMMPS as the Unit Commanders or Unit Administrators. Access requirements are described in Chapter 5 of this SOP. Questions relating to this process can be directed to the MSC MRNCO or the G-1 LOD Program Manager.

f. Medical, dental, or behavioral health care is authorized by an ILD determination. Care will be provided until:

1. The ILD injury, illness or disease is satisfactorily resolved, or the resulting disability cannot be materially improved by further hospitalization or treatment.
2. The Soldier is identified for referral to the DES within 1 year of the diagnosis of the condition for which he or she received an ILD finding, and the member receives a final determination of fit for duty, separated, or retired.
3. One year has transpired since the date of the initial diagnosis and neither of the actions referred to in paragraphs f (1) or (2) has occurred.

1-10. LOD Investigations Beyond 180 Days from a Qualified Duty Status.

a. Army National Guard Soldiers regardless of status (Title 32, Title 10, Active Guard Reserve, M-Day) have up to 180 days following the completion of their qualified duty to request consideration for an LOD determination, absent special circumstances. (AR 600-8-4 paragraph 4-4(c).

b. To request a LOD beyond the 180-day time limit, re-consideration requests must meet the following criteria for consideration:

1. The Soldier must provide evidence that they submitted all required documentation to the unit administration personnel within the 180-day time limit, but the LOD was not initiated by unit personnel.
2. The Soldier must still need immediate medical care for the injury illness or disease. The request is based on the diagnosis on the signed DA Form 2173.
3. A Soldier requiring emergency medical or dental care while in a qualified duty status is authorized an interim line of duty, unless clear and unmistakable evidence showing gross negligence or misconduct.
4. Care for latent onset behavioral health, unreported Restricted or Unrestricted sexual assault or Integrated Disability processing.
5. LODs directed by the Army Board of corrections to Military Records.

c. Disqualifying factors for the requests are:

1. LODs initiated to document historical injury, illness, or disease that the Soldier has received treatment for and returned to duty.
2. To validate or document an Injury, illness, or disease for Veterans Administration benefit or entitlements (Incapacitation Pay).
3. To validate a historical injury, illness, or disease for an end of career retirements, separations, or discharges.

d. All requests must be submitted in writing from the unit commander explaining why the LOD was not submitted during the 180-day timeframe. The subject of the email will begin with "Request for Reconsideration to initiate past 180-days.

e. The process step-by-step:

1. The Unit/MSD initiates the LOD and process the LOD in eMMPS as normal.
2. State Admin will review and process the LOD and forward it to NGB for review. NGB will review the LOD and provide a denial memo and return it to LOD the state.

3. State Admin will return the LOD to draft.
4. Unit admin will send an email to Medical Actions with the following.
 5. Attach the denial memo from NGB.
 6. A memo from the Soldier with specific details/circumstances surrounding the incident. The memo needs to include but not limited to:
 - I. History of injury, illness, or disease.
 - II. The 5Ws and H. Who, What where, when why and how.
 - III. The current medical status of the Soldier.
 - IV. Why should it be allowed to proceed.
 - V. The 5 Ws should also be included in the MMSO portion of MEDCHART if necessary.
 - VI. If the Soldier is requesting INCAP, RCMC, in the DES process or has made a Congressional/IG complaint.
- f. Medical Actions will review the Soldiers memo and complete a memo to request NGB to review the LOD.
- g. The LOD is then forward to NGB for review. NGB will respond with approval (the case can proceed) or a denial (the case will be admin-closed).

1-11 Formal LOD.

- a. Point of Contact Information will be full name, rank, title, phone number (including area code), home of record, and email address of the person that can be contacted regarding the LOD. You may include more than one person.
- b. Date and hour of training information is required for Active Duty for Training or Inactive Duty Training.
- c. The appointing authority is the commander in the rank of O-6 or above in the Soldier's unit. The appointing authority may delegate duties and responsibility to a field grade officer. The delegation will be in writing and valid until revoked in writing (AR 600-8-4 paragraph 1-5b(4)).
- d. The appointing authority will appoint an IO to investigate the incident in writing (AR 600-8-4 paragraph 1-5b (1)). The appointment memo will be uploaded into the eMMPS module.
- d. Block 10, section 1 and section 2 on the DD Form 261 must match block 5, section "a" and section "b" on the DA Form 2173.
- e. The Investigating Officer (IO) will be a commission (O2 or above) or warrant officer (CW2 or above) who is 6 months senior in rank to the Soldier being investigated (AR 600-8-4 paragraph 3-8). The IO will be familiar with the Investigating Officers Guide in Appendix B and C. The IO will provide a memo of findings. The findings memo will be uploaded into LOD documents tab.
- f. Not in the Line of Duty (NLD) findings require the IO, Appointing Authority, or Approving Authority to notify the Soldier in writing via certified mail of the NLD findings (AR 600-8-4 paragraph 3-12 and Appendix C). The mailing return receipt will be uploaded into the eMMPS module.

Chapter 2

Time Requirements for Completion and Forwarding Action.

2-1. GAARNG Processing Timelines.

a. The following processing timelines are implemented by the Georgia Army National Guard (GAARNG) to meet the regulatory timelines for formal LODs established by **AR 600-8-4, Revision (11 July 2025)** Line of Duty Policy, Procedures, and Investigations, dated 12 December 2020.

1. Unit Administrator- initiate automated LOD in eMMPS within 7 calendar days after incident, treatment, or knowledge that an incident has occurred.
2. Unit Commander- review, sign, and forward to the Appointing Authority through the Intermediate Command Reviewer using eMMPS within 5 calendar days.
3. Intermediate Command Reviewer- conduct quality review of all documents submitted in eMMPS within 5 calendar days.
4. IO- complete the investigation within 30 calendar days. The IO will return the LOD to the Appointing Authority within 30 calendar days after receipt of the Appointment Memo.
5. Appointing Authority – review and forward the LOD to State Administrative Review within 5 calendar days.
6. State Surgeon Review- review and forward back to State Administrative Review within 5 calendar days.
7. State JAG Advocate Review- review and forward to State Administrative Review within 10 calendar days.
8. State Approving Authority- review and forward to NGB LOD Review within 5 calendar days.

Note: If the above timelines are missed, annotate the reason in block 30 of the DA Form 2173 or block 10g on DD Form 261 and provide a letter of lateness.

b. The following processing timelines are implemented by the Georgia Army National Guard (GAARNG) to meet the regulatory timelines for informal LODs established by **AR 600-8-4, Revision (1 July 2025)** Line of Duty Policy, Procedures, and Investigations.

1. Unit Administrator- initiate automated LOD in eMMPS within 30 calendar days after incident, treatment, or knowledge that an incident has occurred.
2. Unit Commander- review, sign, and forward to the State Administrative Review within 10 calendar days.
3. State Administrative Review- review and forward the LOD to State Approving Authority within 10 calendar days.
4. State Approving Authority- review and forward to NGB LOD Review within 10 calendar days.

Note: If the above timelines are missed, annotate the reason in block 30 of the DA Form 2173.

2-2. NGB Processing Timelines.

a. Soldiers will have up to 180 calendar days following the completion of their qualified duty to request consideration for a line of duty determination unless they meet exception to policy (ETP) criteria. ETPs are those in which the covered condition pre-dates the 180-day period, e.g., latent onset symptoms of post-traumatic stress and unreported Sexual Assault IAW AR 600-8-4; 3-10. If a LOD is inactive for 180 days, it will be automatically closed by eMMPS. If the LOD is inactive for 365 days, it will be automatically deleted by eMMPS.

1. Examples are as follows:

- i. A Soldier attends Inactive Duty Training (IDT) from Friday to Sunday afternoon. On Sunday morning the Soldier incurs an injury to his/her knee during afternoon cargo sling-load training. The last qualified duty status ended Sunday, the Soldier has 180 days from the following day (Monday), to file an injury report.

ii. A Soldier returning from deployment with an injury, illness, or disease (other than Behavioral Health (BH) without a complete LOD, has 180 days from the effective REFRAD date on his/her DD214 to file a report of his/her injury.

2. LODs for Active Guard Reserve (AGR) Soldiers are not initiated if the date of incident happened more than 180 days in the past. IAW AR 600-8-4, para 4-4 c, submission of AGR Line of Duty Investigations solely for the purpose of retirement is not authorized.

3. LOD processing timelines IAW DODI 1241.01 and AR 600-8-4, Revision (11 July 2025):

i. Informal Investigations – 60 days

ii. Formal Investigations – 180 days

b. Effective 4 June 2020 all LOD's will be sent to NGB for final approval. The DA Form 2173 will read "FROM" the unit, "THROUGH" JFHQ Georgia Army National Guard, "TO" National Guard Bureau.

Chapter 3

Common Errors on LODs.

- a. Medical documentation does not reflect a definitive diagnosis, (pain, head injury, blurred vision, "pop in the knee" are not a definitive diagnosis)
- b. The IO does not give the facts, (HOW, WHEN, WHERE, WHAT, TO WHOM IT HAPPENED).
- c. If a Soldier has incurred two unrelated injuries, then two LODs are required, even if it is the same incident.
- d. DD Form 261 and DA Form 2173 incident dates not match.
- e. Insufficient documentation, incomplete docs, or missing signatures.
- f. Adverse finding notice, and certified mailing was not mailed or uploaded in the module. (Soldier must be mailed a certified notice of a "NLD determination" prior to forwarding the LOD. This notice will be completed by the G-1).
- g. Using after visit summaries, discharge summaries, clinic summaries, summary Letters, standalone test results, and other similar documents by themselves as primary medical documents.
- h. Documents not uploaded as PDF documents.
- i. Date and hour of training information not entered in the eMMPs module.
- j. The date and time on the DA Form 2173 and DA Form 261 do not match.

Chapter 4

LOD Tracking.

4-1. Responsibilities.

- a. The Commander reviews the LOD for completeness and will track their LODs in eMMPS and ensure they are moving through the module in a timely manner.
- b. Commanders, S1s, unit administrators, and NCOs who learn of a Soldier's injury, illness, disease, or death that occurred under circumstances that might warrant an LOD investigation/determination, must take an active role in ensuring that an LOD is initiated, completed, and uploaded into eMMPS in a timely manner (AR 600-8-4 Paragraph 5-3).
- c. The S1 has overall responsibility for the management and processing of LODs (AR 600-8-4 Paragraph 5-3d).
- d. G-1 Medical Actions tracks all LODs, and generates weekly LOD status reports for the G1, Chief of Staff, and MSC Commanders.

4-2. LOD Workflows.

- a. NG Pre-Approved Title 10 - the purpose of the Pre-Approved Title 10 workflow is to document LODs that have already been completed and approved by a military training facility while on title 10 orders to include DA Form 2173, medical documentation, and memorandum signed by the Approval Authority.
- b. NG M-Day (Informal) - the purpose of the M-Day (informal) workflow is to identify all LODs associated with typical ARNG Soldier status, such as IDT and RMAs. Informal M-Day LODs start at the unit level and are signed by the Unit Commander and submitted to state level for determination.
- c. NG M-Day (Formal) - the purpose of the M-Day (formal) workflow is to identify all LODs associated with typical ARNG Soldier status, such as IDT and RMAs, and those who require an investigation to complete the adjudication process. Formal M-Day LODs are routed through Unit Admin, Intermediate Command Admin, Appointing Authority, Investigating Officer, and back to Intermediate Command Approval for submission to State and NGB Levels.
- d. NG Title 32 (Informal) - the purpose of the Title 32 (informal) workflow is to identify all LODs associated with personnel who were on state level AGR, Full-time, ADOS, or AT orders when their injury occurred. Informal Title 32 LODs start at the unit level and are signed by the Unit Commander and submitted to state level for determination.
- e. NG Title 32 (Formal) - the purpose of the Title 32 (formal) workflow is to identify all LODs associated with personnel who were on state level AGR, Full-time, ADOS, or AT orders when their injury occurred, and who require an investigation to complete the adjudication process. Formal Title 32 LODs are routed through Unit Admin, Intermediate Command Admin, Appointing Authority, Investigating Officer, and back to Intermediate Command Approval for submission to State and NGB Levels.
- f. NG Title 10 (Informal) - the purpose of the Title 10 (informal) workflow is to identify all LODs associated with personnel who were in a federal status for over 30 days when their injury occurred. The documentation requirements for Title 10 LODs are minimal compared to the other workflows. The required documents for informal Title 10s are the Soldier's original DA Form 2173, Title 10 orders, and medical documents. Informal Title 10 LODs start at the unit level, are signed by the Unit Commander, and routed to the State and NGB Levels.
- g. NG Title 10 (Formal) - the purpose of the Title 10 (formal) workflow is to identify all LODs associated with personnel who were in a federal status for over 30 days when their injury occurred, and who require an investigation to complete the adjudication process. Formal Title 10 LODs are routed through Unit Admin, Intermediate Command Admin, Appointing Authority, Investigating Officer, and back to Intermediate Command Approval for submission to State and NGB Levels.
- h. NG OCONUS (Informal) - The purpose of the OCONUS (informal) workflow is to identify those LODs for Soldiers who were on overseas orders and who remained in a National Guard status. Informal OCONUS LODs follow the same routing as informal Title 10 LODs. The only difference between informal OCONUS LODs and informal Title 10 LODs is that OCONUS LODs are only created for personnel who did not convert to a federal status.

i. NG OCONUS (Formal) - The purpose of the OCONUS (formal) workflow is to identify those LODs for Soldiers who were on overseas orders, who remained in a National Guard status, and who require an investigation to complete the adjudication process. Formal OCONUS LODs follow the same routing as formal Title 10 LODs.

Chapter 5

Requirements for MEDCHART (eMMPS) Access

5-1. Requirements for initial access.

- a. To gain access to MEDCHART and eMMPS, all personnel must have an approved System Access Authorization Request (SAAR), DA Form 2875, on file with the G-1 HR Systems Branch. The SAAR must be current within one year and must be renewed annually for continued systems access.
- b. All personnel requiring access to MEDCHART to process LODs must complete a Health Insurance Portability and Accountability Act (HIPAA) certification course and register in eMMPS using the MEDCHART database at <https://medchart.cloud.mil/MEDCHARTWeb/Default.aspx>. The HIPAA certification course can be completed in eMMPS or in JKO at <https://jkodirect.jten.mil>. Personnel completing the course in JKO will upload a copy of the certificate when they are registering for access in MEDCHART. HIPAA refresher training is required annually.
- c. Access to eMMPS will be approved at the State Admin level when all required training has been completed. Users will need to log into MEDCHART to confirm they have access. Users must request UICs to access Soldier information within the eMMPS LOD module. For expired users recertifying their HIPAA certification, inform the G-1 Medical Actions LOD Program Manager that training is complete (MEDCHART does not send notifications that access is pending approval).

5-2. Access Roles.

- a. Unit, BN/MSR RNCOs, MRNCOs, and other S-1 personnel requiring access to initiate LODs will request the Unit Admin Role.
- b. Unit Commanders and other personnel authorized to sign for the Commander will request the Unit Commander Role.
- c. Personnel requiring access to complete investigations for formal LODs will request the IO role.
- d. Personnel requiring access to review and forward formal LODs to the MSC for appointment of the IO will request the Intermediate Command Review role.
- e. Personnel requiring access to appoint IOs, review and forward formal LODs to the G-1 will request the Appointing Authority Role.
- f. Other specialty roles for select state personnel are available upon request.

Reminder: All roles mentioned, except for IO, must also request access to their unit or MSC UICs. IOs will be entered into the pool of available personnel for their MSC. Roles can be changed upon request.

5-3. Required State Training.

- a. State LOD training is required for all personnel registered to process LODs in eMMPS. The G-1 offers quarterly training to review roles, policies, procedures, and regulation updates. Training also includes group scenarios, workshops to work actual cases, and a live walkthrough in eMMPS. Notification of training dates will be published in the State FRAGORD.
- b. Annual refresher training is required for all active users, mainly the Unit Admin, Unit Commander, and IO roles. This is accomplished through scheduling directly through Medical Actions Branch or by submitting a request to the G-1 for classes at an alternate location. Approval of alternate locations depends on the number of personnel scheduled to attend and the mission requirements of the G-1.

5-4 Suspension of Access.

MEDCHART access to eMMPS can be suspended for all users who continually make errors in LOD processing. All suspended users will require retraining by the Medical Actions Branch LOD Program Manager before access is restored.

Appendix A References

AR 600-8-4 Revision 11 July 2025

Line of Duty Policy, Procedures, and Investigations, dated 12 November 2020

AR 600-77

Administrative Management of Wounded, Ill, or Injured Soldiers, dated 5 March 2019

AR 40-501

Standards of Medical Fitness, dated 27 June 2019

AR 40-502

Medical Readiness, dated 27 June 2019

DODI 1241.01

Reserve Component Line of Duty Determination for Medical and Dental Treatments and Incapacitation Pay Entitlements, dated 19 April 2016

DODI 1332.18

Disability Evaluation System, dated 17 May 2018

Required Informal LOD Checklist Documents

- DA Form 2173 digitally signed by the Commander
- Medical Documents (civilian/military) related to injury/illness/disease
- Certified DA Form 1379/Title 32 Orders/AGR Orders
- Disability Counseling Statement
- Witness Statement (optional)
- Soldier's Rights and Warning Statement
- AARNG Counseling

Required Formal LOD Checklist Documents

- DD Form 261
- Investigating Officer Appointment Letter
- DA Form 2173 digitally signed by the Commander.
- Soldier's Rights and Warning Statement signed by an officer
- Medical Documents (civ/mil) related to injury/illness/disease
- JAG Review/Opinion (Requested by State Admin)
- Disability Counseling Statement
- Certified DA Form 1379/Title 32 Orders/AGR Orders
- Profiles**
- Last two Annual Medical Certificates**
- Soldier's Statement (DA Form 2823)
- Witness Statement (optional) (DA Form 2823)
- SF 88 & SF 93 or DD 2808 & DD 2807-1 (last two periodic exams)**
- Photographs/Maps/Sketches**
- Adverse Notification Letter with signed Certified Return Receipt on "Not In Line Of Duty Findings"
- Previous LODs civilian injury medical records
- Police Report (in the event of vehicle accident/ suicide)
- Surgeon Review (Requested by State Admin)

Appendix A

References

- Death Certificate or Autopsy Report (required in case of death)

Each supporting document attached to formal LODs will be marked as exhibit A, B, C, etc.

Items with ** are optional.

Appendix C

Glossary

AGR

Active Guard/Reserve

ARNG/ARNGUS

Army National Guard / Army National Guard of the United States

AWOL

Absent Without Leave

eMMPS

Electronic Medical Management Processing System

GaCMJ

Georgia Code of Military Justice

HIPAA

Health Insurance Portability and Accountability Act

IAW

In Accordance With

ICD

Initial Capabilities Document

ILD

In the Line of Duty

IO

Investigating Officer

iPERMS

Soldier's interactive Personnel Electronic Records Management System

LOD

Line of Duty

LODI

Line of Duty Investigation

MEDCHART

Medical Electronic Data Care History and Readiness Tracking

M-Day

That unnamed date in the future upon which a traditional drilling Guardsman is called into active service under Presidential authority for a mobilization.

MOSQ

Military Occupation Specialty Qualification

MRNCO

Medical Readiness Non-Commissioned Officer

MSC

Major Subordinate Command

MTF

Military Treatment Facility

Appendix C

Glossary

NCO

Non-commissioned Officer

NGB

National Guard Bureau

NLD

Not In the Line of Duty

RNCO

Readiness Non-Commissioned Officer

SAAR

System Access Authorization Request

SOP

Standard operating procedure (formerly standing operating procedure, changed by JP 3-31 and JP 1-02)

TAG

The Adjutant General

UCMJ

Uniform Code of Military Justice

USAR

United States Army Reserve

USC

United States Code