



DACOWITS RFI #4

BUMED N332, Office of Women's Health

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Pregnancy in the Military

4d. M&RA/MPP/COMP/Military Services: Have guidelines been provided addressing when commanders may disapprove CONLV, since such leave requires a commander's approval? If so, provide copies of such guidance.

No Service level guidelines have been provided for when commanders may disapprove CONLV.

[DoDI 1327.06](#) provides overarching guidance on CONLV. [DTM 23-001](#) "Expansion of the Military Parental Leave Program" directs that CONLV may be authorized immediately following childbirth if such leave is recommended in writing by the healthcare provider and is approved by the unit commander. [MILPERSMAN 1050-180](#) gives further Service level guidance for CONLV.



DACOWITS RFI #4

Pregnancy in the Military

4e. Military Services: Are there differences in command consideration of CONLV recommendations made by network providers in the private sector versus those made by MTF providers?

Service members who receive care from a non-DoD health care provider are responsible for coordinating their individual medical readiness status with a DoD health care provider at the Navy Medicine Readiness and Training Command with medical cognizance or with their individual medical unit. Navy medical providers play a key role in ensuring medical readiness of Sailors and Marines. A Navy medical provider may receive medical documentation for a Service member from a network provider and assist in providing recommendations for duty limitations and CONLV that ensure the medical readiness of the member.



DACOWITS RFI #4

Pregnancy in the Military

4f. Military Services: What Service guidance has been published clarifying the provision of CONLV for birth events? Provide copies thereof.

[NAVADMIN 008/23](#) specifies that Military Parental Leave is in addition to CONLV.

The Navy Surgeon General has provided guidance to the Navy Medicine community on considerations for providing CONLV recommendations associated with birth events. The guidance includes recommendations for CONLV across gestational ages and includes recommendations following perinatal loss. The guidance was developed to assist medical providers in ensuring physical recovery from pregnancy and birth that ensures Service members are fully medically ready before returning to duty. The guidance issued for medical providers in providing CONLV recommendations is included as an attachment.



DACOWITS RFI #4

Pregnancy in the Military

4g. Military Services: Have the Services provided guidance regarding command authority to disapprove a medical provider's recommendation for CONLV for birth events? What is that guidance and provide copies thereof.

The Navy has not provided additional guidance on command authority to disapprove a medical provider's recommendations for CONLV for birth events.

4h. Military Services: Must commanders document their reasons for denying convalescent care following a birth event?

There is not a Service level policy that directs documentation of denial of CONLV.



DACOWITS RFI #4

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4i. Military Services: If a commander disapproves CONLV for a birth event, is there an appeal mechanism for the affected servicewoman? Is there an automatic escalation to higher command authority? How are servicewomen protected from retaliation if they elect to challenge/appeal a disapproval?

There is no Service level guidance specific to appealing denial of CONLV. Sailors would follow usual processes for appealing decisions up the Chain of Command to the ISIC via the unit commander.