



*Considerations for members who are (or may be) terminally ill, injured or wounded.*

Procedure is used to provide comprehensive support for a terminally ill member or dependent.

## Contents

Overview.....	2
Forms and documents available.....	2
Internet availability of procedure.....	2
Required Procedure: Immediate Command Action.....	3
Clarify Status frequently.....	3
Communication – Notifying NOK.....	3
<b>“Death Imminent”</b> .....	3
Invitational travel for personnel casualties.....	4
Personnel Casualty Report (CASREP) message.....	4
Required Procedure: Immediate support and who provides it.....	4
CACO – Casualty Assistance Calls Officer.....	4
Chaplain, clergy, spiritual advisors.....	5
DAO – Decedent Affairs Officer (includes non-fatal or not-yet-fatal casualties).....	5
Legal assistance.....	5
PDR action by Member.....	5
PDR action by SPO.....	5
Recommended Procedure: Follow-on concerns, issues, and benefits.....	6
Benefits.....	6
DD-1300.....	6
Dental coverage.....	6
Disability benefits from VA.....	6
Ebenefits at VA.....	6
Funeral and burial plans.....	7
GI Bill.....	7
Grief Support.....	7
Insurance – Life insurance.....	7
Insurance – Traumatic injury insurance.....	8
Marriage.....	8
MEB or PEB.....	8
Parents.....	8
Progeny.....	8
Address the person directly.....	9
Live.....	9
Background details.....	9
References (IN PROGRESS).....	9
Funding.....	10
Glossary and acronyms.....	12



## Considerations for members who are (or may be) terminally ill, injured, or wounded

---

### Overview

---

A member or dependent may become ill or be injured, or a member may be wounded, resulting in a terminal prognosis. In other words, the person may die soon.

If an adult person is conscious and able to make decisions, items in this Procedure such as legal assistance should be tackled instantly.

If an adult person is not able to make responsible decisions, the Procedure may be exercised with someone empowered to act on the person's behalf.

In any case, do not delay. There are documented cases where a terminal prognosis of "estimated four months to live" turned into "actually had four days to live."

This document has three related Procedures—two required, one recommended--written in a style meant for an internal Coast Guard audience familiar with acronyms and Service jargon. A Glossary is included at the back of this Procedure to resolve any fuzziness with acronyms or terms.

### Forms and documents available

---

- CG-2020D, Designation of Beneficiaries & Record of Emergency Data  
[http://www.uscg.mil/forms/cg\\_cg\\_2020d.pdf](http://www.uscg.mil/forms/cg_cg_2020d.pdf)
- SGLV-8284, SGLI Accelerated Benefits Option  
<http://www.insurance.va.gov/sglisite/forms/8284.pdf>
- SGLV-8284A, FSGLI Accelerated Benefits Option  
[http://www.insurance.va.gov/SGLIsite/forms/8284A\(09-07\).pdf](http://www.insurance.va.gov/SGLIsite/forms/8284A(09-07).pdf)
- SGLV-8286, SGLI Election & Certificate  
<http://www.insurance.va.gov/sglisite/forms/8286.htm>
- SGLV-8286A, FSGLI Family Coverage Election  
<http://www.insurance.va.gov/sglisite/forms/8286A.htm>
- DOD Survivor's Guide to Benefits; Taking Care of Our Own  
<http://www.uscg.mil/psc/psd/fs/Casualty.asp>
- Dependent Death Checklist,  
[http://www.uscg.mil/hswlBoston/docs/Checklist%20-%20Dependent%20Death\\_23feb10.pdf](http://www.uscg.mil/hswlBoston/docs/Checklist%20-%20Dependent%20Death_23feb10.pdf)

### Internet availability of procedure

---

- Procedures for Casualty Matters are posted at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.
- Procedure owner determined that this procedure is authorized for internet release.



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

### Required Procedure: Immediate Command Action

---

In addition to the dying person and family, stakeholders include commands, chaplains, SPOs, DAOs, WorkLife, Legal Assistance, shipmates and other support personnel. Use this Procedure to ensure timely and comprehensive support is provided when a member or dependent has a terminal prognosis due to illness, injury or wound.

This is an optional Procedure, not required by CG policy. Use is considered good practice.

For stillborns, see **[NEED PROCEDURE]** at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.

### Clarify Status frequently.

---

Is member SI or VSI? Send personnel casualty report.

### Seriously ill, injured, or wounded (SI).

Illness, injury or wound requires medical attention, and medical authority declares that death is possible, but not likely within 72 hours, or the severity of the injury is such that it is permanent and life-altering.

### Very seriously ill, injured, or wounded (VSI).

Illness, injury or wound is such that medical authority declares it more likely than not that death will occur within 72 hours.

### Communication – Notifying NOK.

---

The Coast Guard is responsible to notify next-of-kin (NOK) of all casualties. The process for ill, injured and wounded has special considerations.

- 24/7 notification. Telephone is acceptable.
- If member is conscious, check with member before notifying NOK. Member may direct that no notification be made. Respect that adult decision as a matter of personal privacy.
- If member is not conscious, notify NOK without member's authorization. This is particularly key if NOK may want to travel swiftly to the member's bedside.

### "Death Imminent"

---

The "expedited review/death imminent" procedure in COMDTINST M1850.2C was cancelled by ALCOAST 121/04 and omitted from the replacement version, COMDTINST M1850.2D. In general it is "better" for a member to die on active duty than retired. See *Generic Benefits Comparison: death on AD vs. Retired*, at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.

- **Exception: There is one lingering exception for Reservists with at least 15 satisfactory years of federal service but less than 20 years, who may be swiftly retired under 10 USC 12731B. **[NEED POLICY CLARIFICATION & PROCEDURE]** Check to see if a dying Reservist has at least 15 years but less than 20. For a quick check, look at the member's date of initial entry on military service, or pay entry base date. If those are less than fifteen years ago then the 15-year criterion cannot be met. For any reservist who is not on active duty and has at least fifteen years since entry, check further by**



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

**getting the Reserve Point Statement in Direct Access. Also, contact RPM at PSC.**

- **If the Reservist is currently on active duty, a 12731B retirement is not needed.**
- There never was a death imminent procedure for dependents.

When a person has a terminal illness, all support personnel should be engaged long before death is imminent. Unless the dying person clearly and knowingly insists they want no support, it is a mistake to “protect their privacy” by not engaging the support personnel who are responsible to help the dying person.

### *Invitational travel for personnel casualties.*

---

Several people may be funded to travel at Government expense to a member’s bedside if the member is SI or VSI, and medical authority recommends their presence. See JFTR U5246. Use invitational travel authorizations. File travel claims to PPC using hardcopy DD-1351-2.

- Getting this started is a 24/7 scramble.
- Exception: if the traveler is a military member or government employee, use normal TAD procedures and normal electronic travel claim procedures.
- Note: There is no ITA provision for ill or injured dependents. Look to emergency leave procedures.

### *Personnel Casualty Report (CASREP) message.*

---

In addition to other required reports such as hospitalization or Mishap, a personnel casualty report message IAW PPPM enclosure (7) is required for members who are SI or VSI. A casualty report for a dependent is only used for death, not for SI or VSI. A condensed guide intended for watchstanders is available at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.

For casualties still living, use EMPLID vice SSN, and ICD codes vice plain language details.

Federal law authorizes the member’s chain of command to have medical information that in other circumstances would be completely restricted due to privacy. Some plain language may be reasonably private while meeting the chain of command’s need to know:

- “broken leg” may be okay, but “multiple compound fracture of tibia with torn anterior cruciate ligament” should be coded;
- “coma” may be okay, but medical details of a traumatic brain injury should be coded.

It is smart to draft a CASREP to report the death of a terminally ill member or dependent, in advance of death, obviously leaving the date of death blank.

- The four-hour rule applies even for reporting an expected death.

## **Required Procedure: Immediate support and who provides it**

---

### *CACO – Casualty Assistance Calls Officer.*

---

Work with the DAO to select and task an appropriate Casualty Assistance Calls Officer (CACO). A CACO will be needed well before the dying person actually dies. If a dependent is dying the role is really a “courtesy CACO.” A courtesy CACO’s job is more limited but still essential.

This may be more complex than it seems. The DAOs have training on this, and the CACO will be working for the DAO anyway. For example, the DAO will discourage assignment of a close friend of the dying person. **[NEED PROCEDURE]**



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

The face-to-face work of a CACO can make a remarkable impression and be enormously helpful to the people being supported. At the same time, the CACO needs support, empathy, and a trained outlet to vent a variety of feelings. The same resources the CACO connects with the family are also available to the CACO personally: CG SUPRT (formerly EAP), TriCare, chaplain, CISM, etc. We ask a lot of our CACOs. This challenging role should yield growth, not nightmares. It is a matter of leadership to help CACOs personally weather the challenges of the assignment.

### *Chaplain, clergy, spiritual advisors.*

---

Connect people. Don't assume. The old saying that "There are no atheists in a foxhole" is usually apt for the terminally ill. Respect this even if you, personally, have little affinity for spiritual matters or for those who provide spiritual support. Start by contacting a CG chaplain.

### *DAO – Decedent Affairs Officer (includes non-fatal or not-yet-fatal casualties).*

---

Advise the Decedent Affairs Officer immediately of any terminal illness or injury.

- **Do not wait until someone is dead.** DAOs are trained to support living casualties as well as the dead.
- DAOs are located at each BASE, at TRACENS, and at many HQ units such as PPC, DOG, and CGRC. Some Sectors and Air Stations have opted to maintain a trained DAO. A **roster of DAOs and their work phone numbers** is posted at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.

### *Legal assistance.*

---

A member or dependent is entitled to free legal assistance from a Legal Assistance attorney. Anyone who is terminal should have a will, durable power of attorney, advance directive, etc. And, there should be no secret about where the will is safely stored. This should be one of the first things done when a person learns they may be terminally ill. See [http://www.uscg.mil/legal/la/Legal\\_Assistance\\_Home.asp](http://www.uscg.mil/legal/la/Legal_Assistance_Home.asp).

### *PDR action by Member.*

---

Member should review Part 4 of his or her PDR, with particular attention to forms CG-2020D, SGLV-8286, and (if married) SGLV-8286A. Make absolutely sure that the Person Authorized to Direct Disposition of remains (PADD), on CG-2020D page 2, is correct. Check SGLI beneficiaries carefully. Also, review emergency contact info in Direct Access, self-service.

- If the dying person is a CG member who is married to a military member of any service, that spouse also needs to check his or her PDR to make sure FSGLI is correct. SGLI and FSGLI status can also be verified through the eBenefits account online with VA.
- Occasionally a member will use the DD-93 Record of Emergency Data instead of CG-2020D, usually for practical reasons in a joint-service environment. That's okay.

### *PDR action by SPO.*

---

SPO must **immediately** review Part 4 of the PDR to make sure it is crystal clear and airtight, and **immediately** scan and email a copy of Part 4 to the Decedent Affairs Officer (DAO) and to PSC PSD FS—Casualty Matters.

- If this news pops up at COB, *don't even go home until this has been done.*
- If PDR is in transit, such as between duty stations during PCS, figure something out.



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

### Recommended Procedure: Follow-on concerns, issues, and benefits

---

#### *Benefits.*

If time permits, meet with the dying person and family members. Deliver copies of the DOD Survivors' Guide to Benefits.

- Available on line at <http://www.uscg.mil/psc/psd/fs/Casualty.asp>.
- Print it locally, in color.
- In addition to benefits the Guide provides excellent support resources such as TAPS, Gold Star Wives, and Gold Star Mothers that can be helpful before a person dies.

Propose to the dying person and family members that all claim forms be prepared in advance, except for date of death and claimant's signature. If they agree, show them the forms in advance. This may be comforting because they are confident the benefits will be there. When the death actually happens, the claimant can work quickly through a clipboard of forms since the explanations were already done.

#### *DD-1300.*

PSC PSD FS—Casualty Matters will prepare a Report of Casualty, DD-1300, in advance (minus date of death of course) so someone can verify the many details. It can be surprisingly hard to find estranged parents, for example. DO NOT leave detective work for the day before the funeral.

This Report of Casualty is different from a personnel casualty report message.

The SPO should complete the "DD-1300 data elements" worksheet found at <http://www.uscg.mil/psc/psd/fs/Casualty.asp> and email it to the DAO and to Casualty Matters at PSC.

#### *Dental coverage.*

TriCare Dental is optional for members with dependents. If the LES shows a deduction for dental then coverage is in place. If the member has dependents and the LES shows no deduction, consider starting coverage while the member still lives. For advice call the Health Benefits Advisor (HBA) at 1-800-9HBAHBA (800-942-2422).

#### *Disability benefits from VA.*

In general, fitness for duty in the Coast Guard is based on the retention standards in section 3.F of the Medical Manual. Some medical conditions that may be ratable disabilities with VA are not disqualifying for fitness for duty in the Coast Guard.

Reserve members may apply to VA for disability compensation (yes, even drilling SELRES members!). They may accept disability compensation on any day they are not paid by the Coast Guard.

- This applies only to Reservists, not to regulars.

A Reservist with a terminal diagnosis should make a claim to VA for disability benefits. This may help secure benefits for the reserve member's dependents if VA finds the condition to be service-connected.

Death while on active duty of a regular or reserve member is enough to establish VA benefits for dependents. No disability rating is needed.

- Exception: If a member's death is later determined to have been due to Misconduct, even though the death occurred while in a duty status, the member and dependents may be disqualified for many VA benefits (as well as many Coast Guard benefits).

#### *Ebenefits at VA.*



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

If the member has not already established an eBenefits account, register at <https://www.ebenefits.va.gov/ebenefits-portal/ebenefits.portal> . This has three benefits:

- shows the member's SGLI and FSGLI according to VA,
- shows the member's education benefits, and
- provides current info to VA on people who may have benefits or entitlements.

### *Funeral and burial plans.*

---

Most Americans ignore death. This changes when faced with the reality of a terminal prognosis. It is reasonable to ask a terminally ill person where they want to be buried, etc. There may be questions about religion if the member or member's family participated in more than one religious or spiritual organization or practice in their lives. There should be questions about burial vs. cremation. For cremation, address questions of traditional burial vs. inurnment in a columbarium, vs. burial at sea, or some other private disposition that may include simply taking ashes home in an urn. There should be questions about funeral homes, funeral services, etc. A funeral director can be engaged in advance ("preneed" as they say in the funeral industry)—often a wise and frugal action. VA has good info on burial and memorial benefits at <http://www.cem.va.gov/> . [easy access point to funeral industry?]

### *GI Bill.*

---

A member's Chapter 33 education benefits under the New GI Bill may be transferred to family members, but only while the member is alive and on active duty. This action may be worth something like \$50K. If already transferred, the transfer remains in effect after death. The member has some options to revise the transfer prior to death. Contact [PSC GI Bill desk] .

### *Grief Support.*

---

Grief has many styles. It may be immediate or delayed. It may be huge and then taper off, or chronic for a very long time. There are actually ways to deal with grief—more than the traditional "time heals all wounds" approach. Resources and people who can help include CG SUPRT (formerly EAP), TriCare, CG chaplains and other clergy or spiritual advisors. VA offers grief counselors. Shipmates may benefit from CISM support.

Even with widespread support, grief endures. For survivors, the entire first year after a death is a year of firsts: first Thanksgiving without, first Christmas or other holiday without, first birthday, first wedding anniversary without, and the first anniversary of the death. Dedicated, long-term patience is much more than a couple months of support for a friend with a deep grief.

Death of a child is said to be the incomprehensibly painful, and has been known to lead to divorce. Patient, persistent, supportive, gentle interest and support may help but it still may be a painful road.

### *Insurance – Life insurance.*

---

Confirm status of SGLI (hopefully, already in place with max coverage of \$400K) and SGLI beneficiaries. If married, confirm status of FSGLI (hopefully, FSGLI already in place with max coverage of \$100K). Confirm status of any other life insurance.

- Life insurance benefits are free of all federal and state income tax.

### *Advance Benefits Option (ABO)*

If a doctor certifies that the member has less than nine months to live, the member may use the Accelerated Benefits Option (ABO) to collect up to half of the life insurance prior to death. See





## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

<http://www.insurance.va.gov/sgrisite/ABO/ABO.htm> . This may be attractive because it allows bills to be settled, achieves peace of mind, or enables completion of something that was on the person's bucket list. ABO applies to both SGLI and spousal FSGLI, but not to the \$10K FSGLI for kids. To apply for ABO use form SGLV-8284 for SGLI, or SGLV-8284A for FSGLI.

### *Member married to member.*

Some servicemembers are married to other servicemembers. Each spouse can individually have SGLI coverage. They also can have FSGLI coverage on the other spouse, even if the other spouse is covered already by SGLI. In that case the death of one spouse would pay \$400K SGLI, and the other spouse's FSGLI policy would also pay \$100K.

### *Insurance – Traumatic injury insurance.*

---

This only applies for injury or wounds to members, not for illness, not for dependents. Depending on circumstances there may be a claim under the Traumatic injury SGLI (TSGLI) policy for members. See <http://www.uscg.mil/psc/psd/fs/Casualty.asp> for TSGLI information.

### *Marriage.*

---

An unmarried member may wish to complete a marriage for a variety of reasons. The terminally ill person and a fiancé or fiancée may seek the joy or closure of a marriage, no matter how brief. A divorced member may wish to remarry a former spouse as a form of reconciliation, or closure, or the “right thing to do” to provide benefits for the former spouse. An estranged couple in the process of divorce may want to put the divorce on hold.

Very rarely, a “divorced” person turns out to be not quite divorced. This really has happened. It's worth checking with the appropriate court to get ironclad proof of the completed status of an old divorce.

### *MEB or PEB*

---

This only applies to members with a service-connected condition, not to dependents.

If a Medical Evaluation Board (MEB) or Physical Evaluation Board (PEB) is in process or being contemplated, contact PSC PSD DE at 202-493-1734 for guidance. In general, if the period prior to death is expected to be less than six months, no MEB need be initiated and a PEB in process should be put on hold. This is because the member's condition is “unstable.”

For Reservists with a non-service-connected terminal illness or injury might not meet retention standards in the RPM. A SelRes member may need to be released from their drilling billet. They have an option to convert SGLI to VGLI.

### *Parents.*

---

TBD. As complex as Progeny...

### *Progeny.*

---

It is not always clear how many children a member has. Make sure we have all the facts. There may be:

- biological children not known to the Coast Guard, or even to the member (for males).
- estranged children from prior relationships, or multiple children from multiple relationships, or adopted children, or stepchildren of a current marriage.





## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

- children not yet born, in which case documentation of parentage (for males) is very important if the parents are not married.
- children not yet conceived, pending posthumous *in vitro* action with a sperm or egg bank.
- deposits at a sperm or egg bank that the member wants closed out.

The member may also have wishes regarding posthumous harvest of sperm or eggs (technically very feasible, but never done at Government expense). This is rare but has been done.

### Address the person directly.

---

Differentiate the situation of terminal illness from terminal injury or wound. Timelines may vary dramatically.

Particularly with terminal illness, it is a mistake to avoid the subject of the person's illness. This becomes more true as illness progresses and makes publicly visible changes to appearance. The dying person is way ahead of you on dealing with their reality. You honor them profoundly as a friend or shipmate when you speak honestly, even while being tactful. In other words, "too much tact" may be offensive.

For members, their personal sense of identity and worth is sometimes closely connected to their contributions in the Coast Guard. Don't just send them home. Maintain their identity. Keep blue suits visible. Give them something to do (if they can). Their final contribution may be one of inspiration and leadership for a generation of shipmates.

As hard as it may be, do not avoid the dying person. Make an effort to visit. Send cards. Send emails. Concrete offers make a huge difference. Volunteer to drive someone, or make dinner, mow the lawn or shovel snow. Vague offers like "Let me know if there is anything I can do" may be well-meant, perfectly sincere, but their fuzziness is a namby-pamby copout.

- Recommended reading: *The Grief Recovery Handbook*, by John W. James and Russell Friedman.

### Live.

---

A person who is diagnosed with a terminal illness may still have months of good living ahead. **Live them.**

- Recommended reading: *The Last Lecture*, by Randy Pausch.

### End of procedure section

## Background details

---

### References (IN PROGRESS)

---

(a) 10 USC 1475-1491	Title 10, U.S. Code, Chapter 75, subchapter II: Death Benefits
(b) COMDTINST M6000.1D	Medical Manual, Chapter 3
(c) COMDTINST M1001.28A	Reserve Policy Manual (RPM)
(d) COMDTINST (tbd)	Invitational Travel due to Military Personnel Casualties (in development)



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

### Funding.

---

ITAs under JFTR U5246 are unit-funded. Smaller units should reach up their chain for funding.  
Legal assistance to members and dependents is free.  
TriCare Dental is paid monthly by the member.  
SGLI is paid monthly by the member (unless they decline insurance).  
FSGLI is paid monthly by a married member (unless they decline insurance on the spouse).

### Timing of procedure

Use this Procedure before someone dies.  
Start using it as soon as someone has a terminal diagnosis.

### Procedure Users

A dying person	
DAOs	Decedent Affairs Officer at BASEs, TRACENs, etc.
CACOs	Casualty Assistance Calls Officers
PADD or other NOK	Person Authorized to Direct Disposition, or Next-Of-Kin
SPOs	Servicing Personnel Offices
Commands	

### Procedure Owner

Chief, Casualty Matters	CG PSC (PSD FS—Casualty Matters), Arlington VA 202-493-1931 <a href="mailto:Terrence.w.walsh@uscg.mil">Terrence.w.walsh@uscg.mil</a>
-------------------------	--------------------------------------------------------------------------------------------------------------------------------------------

USCG Casualty Matters  
Personnel Casualty Procedure



**Considerations for members who are (or may be)  
terminally ill, injured or wounded.**

---

Procedural support

Support for DAOs is available from the Casualty Matters program, Field Support branch, Personnel Support Division, at PSC, Arlington, VA. CACOs and Claimants are supported by DAOs. If DAO is not known, contact the Casualty Matters office.

Chief, Casualty Matters	202-493-1931
LT Terrence W. Walsh	<a href="mailto:Terrence.w.walsh@uscg.mil">Terrence.w.walsh@uscg.mil</a>
Alternate Casualty Manager	<a href="mailto:Charles.a.thompson2@uscg.mil">Charles.a.thompson2@uscg.mil</a>
CWO Charles "Al" Thompson	202-493-1922
Administrative support	202-493-1932
Generic contact for Casualty Matters	Fax 202-493-1939
	(email TBD)

History of Procedure

11 Feb 2011	First draft
15 Feb 2011	First post online
31 Mar 2011	Rev 1
1 Aug 2012	Latest revision



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

### Glossary and acronyms

---

- ABO: Advance Benefits Option. Life insurance option for person with less than nine months to live, who may withdraw up to 50% of the policy prior to death.
- AD: active duty. Includes all regular members, and intermittently includes some reserve members depending on their orders.
- Adult person: A person 18 years of age or older.
- ALCOAST: A general message directed to all Coast Guard personnel.
- ALCON: brevity code for “all concerned.” Used conversationally, as in “Notify ALCON that form SGLV-8286A is required of all married members.”
- Bucket list: List of things a person wants to do before they die.
- CACO: Casualty Assistance Calls Officer.
- CASREP: personnel CASualty REPort.
- CG: Coast Guard.
- CG-2020D: Designation of Beneficiaries & Record of Emergency Data. CG version of DD-93.
- CG SUPRT: Formerly the Employee Assistance Program (EAP). Available 24/7 at 1- 855-CG SUPRT (855-247-8778). Members and dependents may have up to twelve free sessions with a professional counselor, privately. Includes grief support. Sessions are not reported in a member’s medical record. **CG SUPRT is also the Suicide Prevention Lifeline for all CG members and their dependents.** Information online at [www.cgsuprt.com](http://www.cgsuprt.com).
- Chapter 33: Chapter in title 38, U.S. Code, that deals with education benefits for veterans under the New GI Bill.
- CISM: Critical Incident Stress Management.
- COB: brevity code for Close Of Business. “Applications will be accepted through COB today.”
- COMDTINST: Commandant Instruction. A means to promulgate policy and regulation.
- DAO: Decedent Affairs Officer. Note that the title is traditional. A DAO coordinates support for non-fatal casualties as well as the fatal ones.
- DD-###: DD means Department of Defense. Forms are designated with DD and a number, such as DD-1300.
- DD-93: Record of Emergency Data. CG normally uses CG-2020D instead.
- DD-214: Discharge Certificate. Issued when a member is separated, released, or retired from the Service. Not used if member died while in service.
- DD-1300: form titled “Report of Casualty.” Used when a member dies while in service, or is in some other official casualty status. The form documents the details of a death. It also lists beneficiaries. Issued by Casualty Matters at PSC. Not the same as a CASREP message.
- DEERS: Defense Eligibility Enrollment Reporting System. Used to verify a person’s eligibility for benefits such as TriCare.
- Dependent: immediate family who are supported by the military member. Includes the current spouse, plus all children (legitimate, illegitimate, prior relationship, adopted, and any stepchildren of current marriage) who are unmarried and under the age of 21 (or under 23 if a full-time student in college). May include an older child who was certified as disabled. Occasionally includes a parent of the member. Dependents should be enrolled in DEERS.
- DHS: Department of Homeland Security. Includes Coast Guard.
- Direct Access: personnel database used in Coast Guard. Occasionally written DA.
- DOD: Department of Defense. Includes Army, Navy, Marine Corps and Air Force.
- EAP: Employee Assistance Program. In 2012 changed to CG SUPRT at 855-CG SUPRT (855-247-8778).



## Considerations for members who are (or may be) terminally ill, injured or wounded.

---

- EMPLID: EMPLOYEE Identification number. Seven digits. Routinely used instead of SSN.
- FSGLI: Family Servicemembers' Group Life Insurance. All of a member's children are covered for free if the member has any amount of SGLI. Includes some stillborn children. By law it includes the member's spouse beginning at the moment of marriage. There is a monthly fee for spousal coverage. Married member has option to cancel. Documented on SGLV-8286A. Note: FSGLI does not cover an ex-spouse. The law does not provide coverage for an ex-spouse.
- GI Bill: GI is a common term for a servicemember. There have been several versions of the GI Bill including the Montgomery GI Bill and the New GI Bill. See also Chapter 33.
- HBA: Health Benefits Advisor. An individual who has received additional training on TriCare who is available to answer healthcare benefit questions and assist with TriCare problems. Large units have a part-time HBA. There is also an 800 hotline available during working hours at 1-800-942-2422 (800-9HBAHBA).
- Hospice: A location where someone goes to die, or the care provided to someone who is definitely dying. Considered an extension of a hospitalization even if the person was "sent home under hospice care."
- IAW: brevity code for In Accordance With. Often cites a reference, as "ITA issued IAW JFTR U5246."
- ICD: International Classification of Disease. A book of numeric diagnosis codes for any medical condition or diagnosis. Use of ICD codes provides a measure of privacy when communicating medical conditions. For example, "Member hospitalized for 540.9" gives a lot of information but does not inform most people that the member has *Acute appendicitis without peritonitis*.
- Ill: In the context of ill, injured, or wounded, refers to disease that was not caused by injury or hostile action. Appendicitis is an illness but a broken leg is not.
- Injured: Generally a medical condition with a cause external to the patient, not caused by hostile action. Significant for TSGLI because it meets the definition of a *traumatic event*.
- IRR: Individual Ready Reserve. IRR members not selected for paid drills and not assigned to a field unit are commanded by PSC (RPM).
- ITA: Invitational Travel Authorization. (Not an ITO because we don't issue *orders* to people who are not in the Coast Guard. This is America. We can *authorize* funding and assistance for their travel, particularly in emergencies.)
- JFTR: Joint Federal Travel Regulations. Volume 1 deals with military and dependent travel, and some invitational travel.
- K (as in \$400K): one thousand. 10K equals 10,000. 400K equals 400,000.
- LES: Leave and Earning Statement. Provided monthly. Shows a member's leave balance, entitlements such as basic pay, allotments such as dental, and deductions such as SGLI. Available electronically in DA. If it's not easy to read, ask any YN for help.
- MEB: Medical Evaluation Board.
- Member: a person in the regular or reserve component of the Coast Guard. Depending on context, may include a retiree. Does not include civilian employees or dependents.
- PADD: Person Authorized to Direct Disposition of human remains. Members designate their PADD on form CG-2020D (or, occasionally, on DD-93). If there is a problem such as a missing form, there is a default hierarchy that begins with the member's spouse.
- Part 4: The last section of a PDR. Includes key documents such as CG-2020D, SGLV-8286, and SGLV-8286A. (Occasionally, DD-93 may be used instead of CG-2020D.)
- PCS: Permanent Change of Stations. The transfer process.
- PDR: Personnel Data Record. Maintained by a YN at the SPO. PDR Part 4 is vital for casualties.
- PEB: Physical Evaluation Board.
- PPC: Pay & Personnel Center in Topeka KS. See <http://www.uscg.mil/ppc/>.
- PPPM: Personnel & Pay Procedures Manual, PPCINST M1000.2A. Also known as the Three Pee Em (3PM). See <http://www.uscg.mil/ppc/3pm.asp>.
- Prognosis: \_\_\_\_\_



## Considerations for members who are (or may be) terminally ill, injured or wounded.

**Regular:** One of the two components of military personnel, or a person in that component. The duty status of a regular member is active duty.

**Reserve:** One of the two components of military personnel, or a person in that component. The duty status of a reserve member varies widely, including AD, ADT, ADSW, ADHC, IDT, traveling to or from duty, or simply not in a duty status.

**SELRES:** Selected Reserve. Reservists not on active duty, selected for paid drilling status. Separate from IRR. SELRES members may be on duty or off duty depending on orders. SELRES members are normally assigned to a drilling unit in one of the paid billets authorized each year by Congress.

**SGLI:** Servicemembers' Group Life Insurance. Max \$400K. (The S used to mean *Servicemen*'s. It was changed many years ago but occasionally pops up anyway.)

**SI:** Seriously ill, injured or wounded. Defined in Joint Pubs as "Illness, injury or wound requires medical attention, and medical authority declares that death is possible, but not likely within 72 hours; or the severity of the injury is such that it is permanent and life-altering."

**SPO:** Servicing Personnel Office.

**SSN:** Social Security Number.

**Suicide:** self-inflicted death. Always a tragedy. Usually preventable. If you or someone you know has suicidal thoughts, get help immediately.

Call CG SUPRT (formerly EAP) 24/7 at 1- **855-CG SUPRT (855-247-8778)**.

**CG SUPRT is the Suicide Prevention Lifeline for all CG members and their dependents.** Information online at [www.cgsuprt.com](http://www.cgsuprt.com). Free. Or call locally for help – 911 works almost everywhere.

**TAD:** Temporary Additional Duty. In common usage means much the same as TDY.

**TDY:** Temporary Duty.

**Terminal:** dying.

**TriCare:** medical program of the uniformed services that provides healthcare for dependents.

**TSGLI:** Traumatic injury SGLI.

**VA:** Department of Veterans Affairs.

**VGLI:** Veterans's Group Life Insurance. Max \$400K. Members may transition from SGLI to VGLI when they leave the Service, regardless of medical condition.

**VSI:** Very Seriously Ill, injured or wounded. Defined in Joint Pubs as "Illness, injury or wound is such that medical authority declares it more likely than not that death will occur within 72 hours."

**Wounded:** Injury caused by hostile action.

**YN:** Yeoman. The hardworking people who manage personnel in the Coast Guard.