This instruction implements Air Force Policy Directive 51-3, Civil Litigation, by setting guidelines and procedures for the Air Force Medical Law Program. It describes the functions, responsibilities, and activities of each program component. This instruction does not apply to the Air National Guard or the United States Air Force Reserve, except when Air National Guard or Air Force Reserve personnel are assigned to Air Force Medical Law Offices. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, Management of Records, and disposed of in accordance with the Air Force Records Disposition Schedule (RDS) located in the Air Force Records Information Management System (AFRIMS) or any updated statement provided by the AF Records Management Office (SAF/CIO A6P). Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, Recommendation for Change of Publication; route AF Form 847s from the field through the appropriate functional chain of command. This publication may not be supplemented or further implemented/extended. The authorities to waive AFLOA and wing/unit level requirements in this publication are identified with a Tier (“T-0, T-1, T-2, T-3”) number following the compliance statement. See AF1 33-360, Publications and Forms Management, Table 1.1 for a description of the authorities associated with the Tier numbers for wing-level compliance. Tier 3 waiver requests for AFLOA-level compliance items are submitted through the AFLOA/CC, while Tier 1 and Tier 2 requirements will be processed to TJAG with a recommendation from AFLOA/JACC. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the Publication OPR for non-tiered compliance items.
SUMMARY OF CHANGES

This instruction updates the previous version and provides Tier numbers to identify waiver authority for wing/unit level requirements. Administrative updates include revisions to the course numbers in Paragraph 3.1.2, to paragraph 2.4, and to Attachment 2, which updates Medical Law Consultant (MLC) locations and realigns the bases within MLC regions.

1. Purpose of the Medical Law Program. The Medical Law Program ensures the Air Force has a cadre of trained personnel ready to provide medical law advice and support to medical centers, hospitals and clinics, and to manage medical malpractice claims and litigation.

2. Responsibilities.

2.1. The Judge Advocate General (TJAG):

2.1.1. Establishes the Medical Law Program and manages its activities through the Air Force Legal Operations Agency, Claims and Tort Litigation Division (AFLOA/JACC). (T-1)

2.1.2. Provides management and professional development for the MLCs through the Chief, Medical Law Field Support Center (MLFSC). (T-1)

2.1.3. Determines the locations of the MLC positions in consultation with the Air Force Surgeon General (SG) who provides funding for the MLC positions. (T-1)

2.2. HQ USAF/JAX should coordinate with AFLOA/JACC to select qualified MLC applicants, subject to TJAG approval of the assignments.

2.3. AFLOA/JACC:

2.3.1. Oversees and directs the Medical Law Program through its MLFSC and the Medical Law Branch (MLB). (T-1)

2.3.2. Dedicates a field grade judge advocate position for the MLFSC Chief. (T-1)

2.3.3. Provides TDY funding for JACC members who are not MLCs to visit MLC offices and Military Treatment Facility (MTF) locations as appropriate. (T-3)

2.3.4. Provides teaching and logistical support to the annual MLC Course. (T-3).

2.4. MLFSC Chief:

2.4.1. Provides reach-back medical-legal support to MLCs in coordination with subject matter experts in the MLB. (T-1)

2.4.2. Supervises, oversees, manages and rates each MLC. (T-3) In an office with more than one MLC, the senior MLC manages the office and acts as the functional supervisor for that office, but is not in the rating chain of the junior MLC.

2.4.3. Visits each MLC Office at least annually. (T-3) The MLFSC Chief will meet with the host MTF/CC during these visits. (T-3)

2.4.4. Seeks the input of the MTF/CC or other Office of Air Force Surgeon General (AF/SG) personnel where MLCs are stationed before drafting MLC OPRs and PRFs. (T-3) The MLFSC Chief will evaluate an MLC’s performance, in part, on the degree to which the MLC provided responsive, timely, and accurate medical-legal advice to the
MTF/CC where the MLC is stationed and to the commanders of other MTFs within the MLC’s region through reach-back medical-legal services to the base legal offices. (T-3)

2.4.5. Conducts meetings with the MLCs regularly to provide guidance, feedback, updates on all medical-legal issues, and JAG Corps professional development information. (T-3)

2.4.6. Hosts an annual MLC Update Course and develops the agenda for the course. (T-3)

2.5. MLCs are stationed at United States Air Force MTFs and at the Office of the Surgeon General of United States Air Forces in Europe (USAFE/SG). Generally, MLCs provide medical-legal advice directly to the MTF/CC and staff of the facility where they are assigned. (T-1) MLCs also ensure that other MTFs within their regions receive medical-legal advice by providing reach-back support to the base Staff Judge Advocate (SJA) or by providing advice to the MTF in coordination with the base SJA. (T-1) (See Attachment 2 for MTFs within each region). The functions of the MLCs vary depending on the specific needs and missions of their region’s facilities. In performing these services, MLCs will:

2.5.1. Advise the MTF/CCs and staffs on all medical-legal matters, including but not limited to release of medical information consistent with the Freedom of Information Act, the Privacy Act, and the Health Insurance Portability and Accountability Act. (T-1)

2.5.2. Serve on MTF committees and boards, as appropriate, to help improve the quality of medical care at MTFs and assist with the administration of the MTF’s healthcare operations, to include, among other responsibilities, serving as a government representative or a legal advisor in hearings on adverse clinical privileging actions and advising MTFs on any associated investigation. (T-1) The MTF conducting the hearing funds the MLC’s TDY expenses incurred when preparing for and attending these hearings. (T-1)

2.5.3. Review local operating instructions and prepare legal documents concerning the operations of the MTFs. (T-1)

2.5.4. Lecture at meetings, seminars, and conferences on medical-legal matters. (T-3)

2.5.5. Advise the MTF/CCs and staffs on all Training Affiliation Agreements IAW AFI 41-108, Training Affiliation Agreement Program, and on Memoranda of Understanding entered into between the MTFs and federal medical institutions, other MTFs or Air Force Reserve Components. (T-1)

2.5.6. Visit each MTF and base legal office within the MLC’s region once a year, or more often if needed, to lecture and teach on medical-legal matters, and assist with medical-legal issues. (T-3) These visits shall be coordinated well in advance with the legal office attorney designated to support the MTF in accordance with paragraph 2.7.2. (T-3) The MTF where the MLC is stationed funds these visits. (T-3)

2.5.7. In coordination with MAJCOM SJAs, provide medical-legal advice to MAJCOM/SG offices on matters affecting the command. (T-1) If the MAJCOM/SG requests advice about a facility in another MLC’s region, the MLC also coordinates with that region’s MLC. (T-1)
2.5.8. Assist MAJCOM/SGs and MAJCOM SJAs, as needed, in any Medical Incident Investigation (MII). (T-3)

2.5.9. Prepare and distribute medical-legal newsletters as appropriate, advising the MTFs and base legal offices within the MLC’s region of medical-legal developments and trends. (T-3)

2.5.10. Assist the MLB attorneys by providing support in investigating medical malpractice claims and defending suits arising at the MTF where the MLC is stationed and at MTFs within the MLC’s region. (T-3) The support includes, but is not limited to, arranging and conducting witness interviews and locating documents and other evidence.

2.5.11. MLCs are to refer all non-medical-legal matters pertaining to the MTF to the servicing base SJA. (T-1) MLCs will keep the base SJA apprised of important medical-legal issues concerning the base MTF. (T-3) MLCs are to promptly brief the base SJA on all matters brought to the MLC’s attention where legal advice is sought, but outside the medical law area. (T-1) If an MLC is unsure as to whether a matter is outside the medical law area, the MLC should consult with the MLFSC Chief. MLCs will not advise the MTF commander and staff on matters pertaining to:

- Military justice, including nonjudicial punishment, courts-martial, administrative discharge, and other administrative disciplinary action taken against military members.
- Labor issues, including unfair labor practice and Equal Employment Opportunity Office complaints, and adverse disciplinary actions taken against civilian personnel.
- Contract claims and cases against the Air Force.
- Fiscal law issues.
- Environmental issues and MTFs’ obligations under various environmental statutes.
- Civil law issues, including but not limited to legal assistance, fundraising, private organizations, religious accommodation, and ethics issues falling under the Joint Ethics Regulation.

2.6. MLB: The MLB consists of the MLB Chief and attorneys who are subject matter experts in medical law and specialize in medical malpractice claims and litigation. These specialized attorneys:

- Guide, and coordinate all medical claims activities. (T-1)
- Investigate, adjudicate, and settle medical malpractice claims under AFI 51-501, *Tort Claims* (T-1); report all closed claims to the AF/SG (T-1); and provide assistance to the Air Force Medical Operations Agency (AFMOA/SG3OQ) for reporting to the National Practitioner Data Bank. (T-1) See paragraph 2.7.5 for all locations outside the 50 states.
- Serve as lead agency counsel in the defense of all medical malpractice cases in litigation (T-1); prepare litigation reports according to AFPD 51-3 (T-1); assist with
discovery (T-1); and direct the litigation support provided by MLCs and base legal offices. (T-1)

2.6.4. Instruct at Air Force medical law and claims courses, conferences, and seminars, and participate in other government health law programs. (T-3)

2.6.5. Provide advice and support in medical-legal matters to the MLCs. (T-1)

2.6.6. Cross-feed information to Air Force medical and legal communities on medical malpractice and quality assurance issues. (T-3)

2.6.7. Advise on all medical-legal and other health law issues confronting the Air Force SG and staff. (T-1)

2.6.8. Assist MTFs, as needed, by serving as legal advisors in adverse privileging hearings. (T-1) The MTF conducting the hearing provides funding for TDY expenses of MLB personnel at these hearings. (T-1)

2.7. Base legal offices: The base SJA furnishes professional legal services to the MTF commander on all matters that are outside the medical law area. Base legal offices, particularly at installations where there is no MLC co-located at the MTF, also serve a vital role in the Air Force’s Medical Law Program. The base legal office maintains a key interface with the MTF, ensures that medical-legal concerns are promptly raised to the regional MLC, and facilitates legal support to MTFs. (T-1) At those bases with no co-located MLC at the MTF, the base SJA will designate an attorney to serve as a liaison to the MTF for a minimum of one year. (T-2) The liaison will:

2.7.1. Serve as an “on-the-ground” legal contact for the MTF. (T-2)

2.7.2. Serve as a legal representative on MTF committees, government representative at adverse privilege hearings, and in coordination with the MLC, provide medical-legal advice to the MTF. (T-2)

2.7.3. Provide initial legal review of all MTF’s Training Affiliation Agreements (TAAs) with non-federal institutions and Memoranda of Understanding with federal institutions and other MTFs or Air Force Reserve Components under AFI 41-108, Training Affiliation Agreement Program. (T-3) MTFs forward the base legal review and TAA package to the regional MLC. (T-1)

2.7.4. Provide administrative support to MLB staff on medical malpractice claims and litigation, including locating witnesses, obtaining documents and medical records, participating in witness interviews, providing office space for TDY personnel, and other logistical support. (T-3)

2.7.5. At all locations outside the 50 states, base legal offices investigate medical malpractice claims under AFI 51-501, Tort Claims. (T-1) Upon completion, the claim investigation is forwarded to the MLB for expert review and final action. (T-1)

3. Courses. There are three annual courses pertaining to the Medical Law Program.

3.1. MLC Course. To the extent possible, each attorney selected for any medical law position will attend the MLC Course before being assigned to that position. (T-2) The Air Force SG funds MLCs attending this course. (T-2) The Senior MLC assigned to Wright-
Patterson US Air Force Medical Center is the course director and coordinates the curriculum with the MLFSC Chief. (T-3)

3.1.1. The course curriculum shall include briefings on relevant medical specialties and laws, and related medical-legal training to include MLC student observation of a variety of surgical procedures.

3.1.2. The MLC Course is held at Wright-Patterson US Air Force Medical Center and AFLOA/JACC (Course numbers J5OZO51J4 00AB & J5OZO51J4 00AC respectively).

3.2. MLFSC Update Course. All MLCs shall attend the annual MLFSC Update Course hosted at AFLOA/JACC for an update on the law and medical-legal issues, and on current policies of the Office of the Surgeon General, the JAG Corps, and the Department of Justice. (T-3) The Update Course shall coincide with the MLC Course so that the attendees can also attend and benefit from the practical experience of the incumbent MLCs. The MTF where the MLC is assigned funds the MLC’s attendance at the course.

3.3. Medical Law Mini-Course. This four-day course trains base-level attorneys and paralegals on medical-legal issues arising in a number of medical specialties. To the extent possible, SJAs will nominate MTF liaisons and paralegals who routinely work on medical-legal issues and fund their attendance. (T-3) All aspects of the course are coordinated with the Air Force Judge Advocate General’s School. The MLFSC Chief is responsible for final approval of the curriculum. (T-3)

ROBERT G. KENNY
Major General, USAF
Mobilization Assistant to The Judge Advocate General
Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFMAN 33-363 AFGM 1, Management of Records, 29 August 2013
AFPD 51-3, Civil Litigation, 21 May 1993
AFI 33-360, Publication and Forms Management, 25 September 2013
AFI 41-108, Training Affiliation Agreement Program, 4 May 2011
AFI 51-501, Tort Claims, 15 December 2005
Memorandum of Understanding between HQ USAF/SG and HQ USAF/JA for the Medical Law Field Support Center, 17 September 2008

Adopted Forms

AF FORM 847, Recommendation for Change of Publication

Abbreviations and Acronyms

AFB—Air Force Base
AFLOA—Air Force Legal Operations Agency
AFLOA/JACC—Air Force Legal Operations Agency/Claims and Tort Litigation Division
AFMOA/SG30Q—Air Force Medical Operating Agency/Surgeon General Clinical Quality Assurance Division
AFMS—Air Force Medical Service
CLE—Continuing Legal Education
HQ AF/JAX—Headquarters Air Force/Professional Development Division
IAW—In accordance with
JAG Corps—Judge Advocate General’s Corps
MAJCOM—Major Command
MII—Medical Incident Investigation
MLB—Medical Law Branch of AFLOA/JACC
MLC—Medical Law Consultant
MLFSC—Medical Law Field Support Center of AFLOA/JACC
MTF—Military Treatment Facility
OPR—Officer Performance Report
PRF—Promotion Recommendation Form
SG—Surgeon General
SJA—Staff Judge Advocate
TDY—Temporary Duty
TAA—Training Affiliation Agreement
TJAG—The Judge Advocate General
USAFE/SG—United States Air Force Europe/Surgeon General
Attachment 2

MEDICAL LAW CONSULTANT REGIONS

Figure A2.1. 79th Medical Wing, Joint Base Andrews, Maryland.

79th Medical Wing

Joint Base Andrews, Maryland
Joint Base Anacostia-Bolling, District of Columbia
Dover AFB, Delaware
Hanscom AFB, Massachusetts
McGuire AFB, New Jersey

Figure A2.2. 88th Medical Group, Wright-Patterson AFB, Ohio.

88th Medical Group

Ellsworth AFB, South Dakota
Grand Forks AFB, North Dakota
Malmstrom AFB, Montana
McConnell AFB, Kansas
Minot AFB, North Dakota
Offutt AFB, Nebraska
Scott AFB, Illinois
US Air Force Academy, Colorado
Whiteman AFB, Missouri
Wright-Patterson AFB, Ohio

Figure A2.3. 1st Medical Group, Langley AFB, Virginia.

1st Medical Group

Joint Base Charleston, South Carolina
Langley AFB, Virginia
Moody AFB, Georgia
Pope AAFB (Ft Bragg), North Carolina
Robins AFB, Georgia
Seymour Johnson AFB, North Carolina
Shaw AFB, South Carolina

Figure A2.4. 60th Medical Group, Travis AFB, California.

60th Medical Group

Beale AFB, California
Edwards AFB, California  
Fairchild AFB, Washington  
Los Angeles AFB, California  
Travis AFB, California  
Vandenberg AFB, California

**Figure A2.5. 81st Medical Group, Keesler AFB, Mississippi:**

81st Medical Group
- Altus AFB, Oklahoma  
- Barksdale AFB, Louisiana  
- Columbus AFB, Mississippi  
- Keesler AFB, Mississippi  
- Little Rock AFB, Arkansas  
- Tinker AFB, Oklahoma  
- Vance AFB, Oklahoma

**Figure A2.6. 59th Medical Wing, Lackland AFB, Texas:**

59th Medical Wing
- Brooks AFB, Texas  
- Cannon AFB, New Mexico  
- Dyess AFB, Texas  
- Goodfellow AFB, Texas  
- Holloman AFB, New Mexico  
- Kirtland AFB, New Mexico  
- Lackland AFB (& 37th Medical Group), Texas  
- Laughlin AFB, Texas  
- Randolph AFB, Texas  
- Sheppard AFB, Texas

**Figure A2.7. 99th Medical Group, Nellis AFB, Nevada:**

99th Medical Group
- Buckley AFB, Colorado  
- Davis-Monthan AFB, Arizona  
- F.E. Warren AFB, Wyoming  
- Hill AFB, Utah  
- Luke AFB, Arizona  
- Mountain Home AFB, Idaho  
- Nellis AFB, Nevada
Peterson AFB, Colorado
Schriever AFB, Colorado

Figure A2.8. 96th Medical Group, Eglin AFB, Florida:

96th Medical Group

Eglin AFB, Florida
Hurlburt Field, Florida
MacDill AFB, Florida
Maxwell AFB, Alabama
Patrick AFB, Florida
Tyndall AFB, Florida

Figure A2.9. U.S. Air Forces in Europe

U.S. Air Forces in Europe

Aviano AB, Italy
RAF Croughton, United Kingdom
Geilenkirchen AB, Germany
Incirlik AB, Turkey
Lajes Field, Azores
RAF Lakenheath, United Kingdom
Landstuhl Regional Medical Center (435 MDS), Germany
RAF Menwith Hill, United Kingdom
Ramstein AB (and Sembach AB), Germany
Spangdahlem AB (& Bitburg AB), Germany
RAF Upwood (and RAF Alconbury), United Kingdom

Figure A2.10. 673d Medical Group, Joint Base Elmendorf, Alaska

673d Medical Group

Andersen AFB, Guam
Eielson AFB, Alaska
Hickam AFB, Hawaii
Joint Base Elmendorf AFB, Alaska
Kadena AB, Japan
Kunsan AB, Korea
Misawa AB, Japan
Osan AB, Korea
Yokota AB, Japan