

DEPARTMENT OF THE ARMY  
U.S. Army Medical Department Center and School  
2250 Stanley Road  
Fort Sam Houston, Texas 78234-6100

Memorandum :  
Number 190-5

28 March 1994

Military Police  
COMMANDER'S CRITICAL INFORMATION REQUIREMENTS

1. **Purpose.** This memorandum establishes the Commander's Critical Information Requirements (CCIR) for the U.S. Army Medical Department Center and School (AMEDDC&S). This requirement is intended to distinguish between Serious Incident Reports (SIRs), reportable to the Department of the Army, and that information required by the Commander, AMEDDC&S, to make decisions affecting CCIRs within the AMEDDC&S.

2. **Scope.** This policy is applicable to all organizational elements subordinate to the AMEDDC&S, at Fort Sam Houston.

3. **References.**

a. AR 190-40, Serious Incident Reporting, (UPDATE, 14 Aug 85), 1 Sep 81.

b. HSC Supplement 1 to AR 190-40, Serious Incident Report, 4 Nov 85.

c. AMEDDC&S Memorandum Number 190-40, Serious Incident Reporting, 23 Dec 91.

4. **Responsibilities (CCIR).**

a. Commanders, Directors, and Chiefs of the AMEDDC&S will use appropriate command channels to report the following critical information:

(1) Destruction resulting from willful negligence of AMEDDC&S property valued in excess of \$1000.

(2) Larceny of AMEDDC&S property in excess of \$1000

(3) Incidents involving illegal use of drugs or alcohol by AMEDDC&S personnel.

(4) Training accidents resulting in serious injury to personnel and/or damage to equipment. Serious injury is defined as an injury resulting in the loss of one or more duty days; serious damage is defined as damage resulting in \$1000 or more in Estimated Cost of Damage (ECOD).

Vandalism of AMEDDC&S facilities.

(6) Apprehension by civil or military authorities of personnel in the rank of master sergeant and above.

Incidents involving the use of firearms or other weapons.

(8) Threats or actual incidents of demonstrations by special interest groups.

(9) Other incidents as determined by the reporting organization

b. AMEDDC&S Provost Marshal will:

(1) Review the Fort Sam Houston Military Police (MP) blotter daily and provide a highlighted copy to the command group.

(2) Ensure CCIRs and SIRs submitted with the daily MP blotter are properly categorized.

(3) Coordinate with the Fort Sam Houston Provost Marshal Office (PMO) to obtain information of interest to the command group.

5. **Responsibilities (SIRs).** Commanders, Directors, and Chiefs of the AMEDDC&S will report SIRs in accordance with published regulations and supplements through appropriate command channels.

6. **Forms.** Reporting organization will ensure that the proper form is used to report CCIRs and SIRs.

a. Record and report CCIRs on AMEDDC&S Form 1039 (Appendix A), available through normal supply channels

b. Record and report SIRs on HSC Form 104-R (DSEC), 1 Feb 80, or appropriate updated editions (Appendix B).

c. Forms used to report CCIRs and SIRs will be destroyed immediately after use. Under no circumstances will they be included in a permanent file.

Appendix A  
**COMMANDER'S CRITICAL INFORMATION REQUIREMENTS  
 (CCIR)**

AMEDDC&S Memo 190-5

(AMEDDC&S Memo 190-5)

1. TYPE OF INCIDENT		2. AMEDDC&S UNIT INVOLVED			3. DATE/TIME REPORT RECEIVED		
4. SUBJECT(S)							
A. Name		b. Rank	c. SSN		d. Sex	e. Age	f. Race
g. Unit		h. Duty Position			i. Security Clearance		
J. Current Status/Disposition							
5. VICTIM							
a. Name		b. Rank	c. SSN		d. Sex	e. Age	f. Race
g. Unit		h. Duty Position			i. Injury		
j. Current Status/Disposition							
6. TIME/DATE OF INCIDENT		7. LOCATION OF INCIDENT			8. INVESTIGATING AGENCY		
9. REPORT RECEIVED BY		10. REPORTED BY					
11. DETAILS OF INCIDENT							
12. FOLLOW-UP STATUS							

A SAMPLE

Appendix B

# REPORT OF SERIOUS / SENSITIVE INCIDENT

(HSC Suppl 1, AR 190-40)

1. TYPE OF INCIDENT		2. HSC ACTIVITY INVOLVED		3. TIME / DATE REPORT RECEIVED																														
4. SUBJECT (S)																																		
a. Name		b. Rank	c. SSN	d. Sex	e. Age	f. Race																												
g. Unit		h. Duty Position		i. Security Clearance																														
j. Current status / disposition																																		
5. VICTIM																																		
a. Name		b. Rank	c. SSN	d. Sex	e. Age	f. Race																												
g. Unit		h. Duty Position		i. Injury																														
j. Current status / disposition																																		
6. TIME / DATE OF INCIDENT		7. LOCATION OF INCIDENT		8. INVESTIGATING AGENCY																														
9. REPORT RECEIVED BY		10. REPORTED BY (Rank, Name, Duty Position, Unit, Phone No.)																																
11. DETAILS OF INCIDENT																																		
<p><b>NOTIFICATION:</b></p> <table border="0"> <tr> <td>Command Group</td> <td>Date</td> <td>DCSIM</td> <td>Date</td> </tr> <tr> <td>Dir of Dent Svcs</td> <td>Date</td> <td>Ofc Ch of PA</td> <td>Date</td> </tr> <tr> <td>DCSPER</td> <td>Date</td> <td>IG</td> <td>Date</td> </tr> <tr> <td>DCSOPS</td> <td>Date</td> <td>SJA</td> <td>Date</td> </tr> <tr> <td>DCSLOG</td> <td>Date</td> <td>Other:</td> <td></td> </tr> <tr> <td>DCSRM</td> <td>Date</td> <td></td> <td></td> </tr> <tr> <td>DCSCS</td> <td>Date</td> <td></td> <td></td> </tr> </table>							Command Group	Date	DCSIM	Date	Dir of Dent Svcs	Date	Ofc Ch of PA	Date	DCSPER	Date	IG	Date	DCSOPS	Date	SJA	Date	DCSLOG	Date	Other:		DCSRM	Date			DCSCS	Date		
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DCSRM	Date																																	
DCSCS	Date																																	

SAMPLE

(HSMC-OPS)

FOR THE COMMANDER:

OFFICIAL:

CHARLES E. DYER, II  
COL, MS  
Secretary of the General Staff

*for Albert Rando*  
PAUL D. ANDERSON  
CPT, MS  
Adjutant General

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