Guide 8

Managing Physical Fitness Assessment Records for Pregnant Servicewomen
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1. **Pregnancy Status Defined.** The Navy defines pregnancy status from the time pregnancy is confirmed by a military Health Care Provider (HCP) or civilian HCP, in cases of inaccessibility to a Military Treatment Facility (MTF), until the end of the 12-months following a qualifying birth event (QBE).

2. **Pregnancy Status Policy.** Navy Guidelines Concerning Pregnancy and Parenthood (OPNAVINST 6000.1 series) and Guidance on Pregnant Sailors in the Navy Reserve (COMNAVRESFOR 6000.1 series) states “Pregnancy and parenthood status must be made known to designated command officials while ensuring the service member's privacy.”

   a. Pregnant Servicewomen must provide the CFL with proof of pregnancy (DD 689, Individual Sick Slip). To comply with Health Insurance Portability and Accountability Act of 1996 (HIPAA), the CFL is prohibited from keeping a copy.

   b. The CFL must assign the member a “pregnant” participation status in PRIMS for both the BCA and PRT. If the member participated in the BCA and was later confirmed pregnant, a Letter of Correction (LOC) signed by the commanding officer (CO) and with supporting documentation (e.g. NAVMED Form 6000/10) from the Servicewoman’s HCP requesting the members BCA results be changed to “pregnant” must be sent to the Physical Readiness Program (PRP) office. CFLs do not have the capability to make this change.

   c. The member will remain in the “pregnant” status in PRIMS during each PFA cycle until the end of the 12-months postpartum period following a QBE. If an AMDR or HCP grants the member additional time past the 12-months postpartum period, a medical waiver is required.

   d. If a Servicewoman failed her PFA and is able to provide documentation from her HCP that she was pregnant at the time the BCA and/or PRT was conducted, annotating the date of conception, the Servicewoman’s official PFA record will be updated in PRIMS and correctly documented as “Pregnant” once the PRP office receives the LOC.

   e. The overriding concern for CO’s, supervisory personnel, and HCPs who are responsible for pregnant Servicewomen is to provide for the health and safety of the Servicewoman and her unborn child while maintaining optimum job and career performance. Pregnant Servicewomen will not be mandated to participate in command/unit PT or FEP. It is the HCP’s responsibility, not the CFL, to provide exercise guidance. After 1 July 2021, CFLs may provide pregnant/postpartum Servicewomen with the official Navy Pregnancy and Postpartum Physical Training (P3T) resources. These resources will include information on pregnancy/postpartum nutrition and a safe physical training program complete with recommended exercises and contraindicated exercises.
f. The postpartum Servicewoman is encouraged to maintain a regular fitness routine
during their pregnancy and is required to gradually resume an exercise program under
the guidance of their HCP and/or the Navy P3T resources.

3. Postpartum PFA Schedule. Postpartum Servicewomen are exempt from
participating in an official PFA for 12-months following a QBE. At the conclusion of their
12-month period and with medical approval from their HCP, Servicewomen are required
to participate in the official PFA cycle, as prescribed below:

<table>
<thead>
<tr>
<th>QBE Month</th>
<th>6-months postpartum medical screening by HCP/AMDR</th>
<th>Participation Cycle</th>
<th>Next Required PFA Cycle Begins (months after QBE)</th>
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<tbody>
<tr>
<td>January</td>
<td>July</td>
<td>2</td>
<td>July (+18 months)</td>
</tr>
<tr>
<td>February</td>
<td>August</td>
<td>2</td>
<td>July (+17 months)</td>
</tr>
<tr>
<td>March</td>
<td>September</td>
<td>2</td>
<td>July (+16 months)</td>
</tr>
<tr>
<td>April</td>
<td>October</td>
<td>2</td>
<td>July (+15 months)</td>
</tr>
<tr>
<td>May</td>
<td>November</td>
<td>2</td>
<td>July (+14 months)</td>
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<tr>
<td>June</td>
<td>December</td>
<td>2</td>
<td>July (+13 months)</td>
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<tr>
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<tr>
<td>December</td>
<td>June</td>
<td>1</td>
<td>January (+13 months)</td>
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4. Wellness PFA Screening. Postpartum Servicewomen will participate in a wellness
(unofficial) PFA between six and nine months postpartum, following a QBE.

   a. Postpartum Servicewomen must complete a PARFQ and be medically screened
      (complete NAVMED 6110/4) for participation in the wellness PFA by their HCP/AMDR
      at 6-months. If the postpartum Servicewoman is not cleared to participate, they must be
      rescreened by their HCP/AMDR until they are medically cleared to participate in the
      wellness PFA. Within 10-days of receiving medical clearance to participate in the
      wellness PFA, a postpartum Servicewoman must coordinate with their CFL/ACFL to
      schedule their wellness PFA.

   b. Once the postpartum Servicewoman passes the wellness PFA, they may return
to command/unit PT. CFLs should be mindful of the various fitness levels of all of their
Sailors, to include postpartum Servicewomen, when conducting command/unit PT and
provide modified exercises as needed.
c. If the postpartum Servicewoman fails, there will be no negative consequences for failing and they will not be placed on FEP. They will be provided postpartum nutrition and fitness resources to assist with their postpartum recovery.

d. The wellness (unofficial) PFA provides COs and CFLs visibility on the health and fitness level of their postpartum Servicewomen as well as an opportunity to provide assistance to Servicewomen during their postpartum recovery.

**Important note:** Servicewomen should participate in the Wellness PFA to the best of their ability, without overexerting themselves in order to pass. The goal is to assess a postpartum Servicewoman’s fitness level, midway through the 12-month PFA exemption period in order to assist them with returning to Navy PFA standards.

5. **Termination of Pregnancy.** Servicewomen who miscarry or have an abortion must seek evaluation by their HCP to determine the appropriate convalescent leave period. A member who suffers a miscarriage or abortion may receive a “pregnant” status based on the recommendation from their HCP.

6. **Stillborn Birth.** Servicewomen who give birth to a stillborn child(ren) are exempt from participating in a PFA for 12-months following the birth event.

7. **In-vitro Fertilization (IVF).** During the actual IVF cycles, CO/OICs are authorized to approve a “medical waiver” to exempt Servicewomen from participating in the PFA to better ensure IVF success. If the IVF treatment results in a successful pregnancy, the provisions of the pregnancy policy will pertain. If the IVF treatment is unsuccessful, the Servicewoman must participate in the PFA (current cycle), if cleared by their HCP.

8. **Physical Readiness Information Management System (PRIMS) Documentation.** A pregnancy is not considered a medical waiver. The CFL must choose the “pregnant” status when entering the member’s PRIMS data for each cycle during the pregnancy and postpartum stages. At no time, will a pregnancy status be considered terms for a medical evaluation board when counting medical waivers. Servicewomen in a “pregnancy” status are not required to complete the PARFQ.