

# Airman and Guardian Medical Transition Unit (AGMTU) Attachment (TDY) Worksheet

**Instructions:** The Airman's Home Station Chief of the Medical Staff (SGH) completes all sections and signs the form below when requesting Attachment (TDY) to an AGMTU at another AF installation.

## Patient Information:

Name (Last, First):  
Full SSN:  
Rank:  
Current Unit of Assignment:  
AFSC:  
DEROS (if OCONUS): Click or tap to enter a date.  
Airman's Commander or First Sergeant Rank/Name and Cell Number:  
Diagnosis(es)/condition(s):  
Onset:  
Expected duration of TDY treatment:

## AGMTU Attachment (TDY) Criteria (check all that apply):

- TDY exceeds or is expected to exceed 20 days
- Care delivered while Airman is TDY will take place at or near an AF installation with permanent AGMTU [NOTE: medical TDY of short duration (i.e., < 20 days), for routine evaluations or assessments in the absence of other factors identified below may not always warrant AGMTU Attachment (TDY)]:
  - \_\_\_ Travis AFB (David Grant Medical Center)
  - \_\_\_ JBSA Lackland (Wilford Hall Ambulatory Surgical Center/SAAMC or associated facilities)
  - \_\_\_ Joint Base Andrews (Walter Reed National Military Medical Center or associated facilities)
- Airman's Home Station Primary Care Manager (PCM), Medical Management Team member, or SGH determine the condition requiring treatment while TDY to be high acuity, examples include but are not limited to:
  - \_\_\_ advanced stage cancer
  - \_\_\_ polytrauma requiring extensive treatment/rehabilitation
- Airman's Home Station PCM, Mental Health Provider (MHP) or SGH identify risk factors requiring close oversight and coordination of care during TDY, examples include, but are not limited to:
  - \_\_\_ current or history of traumatic brain injury (TBI)
  - \_\_\_ current or history of suicidal ideation or attempt
  - \_\_\_ TDY is for mental health and/or substance use disorder partial hospitalization program
  - \_\_\_ TDY is for mental health and/or substance use disorder inpatient hospitalization
- Required by law or regulation [NOTE: when an Airman is sent to a civilian facility as an inpatient, TRICARE Operations and Patient Administration (TOPA) at the Airman's home station is required to send an Absent Sick notification to the nearest Air Force MTF]
- Other consideration by the Airman's Commander or any member of the Airman's care team that it would be in the Airman's best interest to be attached to an AGMTU while receiving treatment TDY (specify on next page):

**Approval:** Case Meets Criteria for AGMTU Attachment (TDY): Choose an item.

Date discussed with Accepting SGH: Click or tap to enter a date.

Name of Accepting SGH:

Accepting AGMTU Installation/MTF/Address:

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## For cases meeting criteria for AGMTU Attachment (TDY) support discussed and agreed upon (check all that apply):

- Support for No Shows for Scheduled Appointments  
\_\_\_ For care delivered at the AGMTU MTF, AGMTU SGH will ensure designated AGMTU staff are notified when the Airman No Shows for scheduled appointments.  
\_\_\_ For care delivered at a civilian facility or another service/DHA MTF, Home Unit SGH will work with Accepting SGH (or designated member of Accepting AGMTU staff) and the civilian or other service/DHA MTF to be notified if the Airman No Shows for a scheduled appointment.  
\_\_\_ For all No Shows for scheduled appointments while an Airman is Attached (TDY) to the AGMTU, designated Accepting AGMTU staff members will make contact with the Airman for safety and accountability, and notify Home Unit SGH and Airman's Commander or First Sergeant (listed on page one of this form).
- Home Station SGH identified transportation needs for Airman necessary to enable care.
- Continuity of mental health and/or substance use treatment is required while the Airman is TDY for care for a non-mental health or substance use medical condition.
- Other support requested or special circumstances from page 1 (please describe):

## Additional Information for cases meeting criteria for AGMTU Attachment (TDY):

Proposed Date of Arrival (TDY): Click or tap to enter a date.

Name of Accepting AGMTU/CC:

Email/phone number:

Will a Non-medical Attendant (NMA) accompany Airman? Choose an item.

NMA Name/Rank (if military)/cell phone number:

Is Medical Retention of Airman in question? Choose an item.

Is the Airman currently enrolled in Integrated Disability Evaluation System (IDES)? Choose an item.

Home Station PEBLO informed of Airman's AGMTU Attachment (TDY)? Choose an item.

Will the case likely become an AGMTU Assignment (PCS) case in the future? Choose an item. [NOTE: if yes, notify AFPC/DPMNR]

## Certification by Home Unit SGH:

Date this form was emailed (encrypted) to Accepting AGMTU SGH: Click or tap to enter a date.



Home Unit SGH Stamp/Signature: