

DEPARTMENT OF THE ARMY  
MEDICAL DEPARTMENT ACTIVITY  
Fort Huachuca, Arizona 85613-7079

MEDDAC Memo  
No. 700-5

19 February 2008

Logistics  
LOAN OF GOVERNMENT EQUIPMENT AND  
SUPPLIES TO CIVILIAN INSTITUTIONS

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**1. HISTORY:** This issue publishes a revision of this publication.

**2. PURPOSE:** To establish procedures and responsibilities relative to emergency loans of government equipment and supplies to civilian institutions.

**3. APPLICABILITY:** This memorandum is applicable to all elements of Raymond W. Bliss Army Health Center (RWBAHC), USADENCOM and USAVETCOM Ft Huachuca, Arizona.

**4. REFERENCES:**

**4.1** AR 40-61, Medical Logistics Policies and Procedures

**4.2** AR 700-131, Loan of Army Materiel

**4.3** DA Pam 710-2-1, Using Unit Supply System

**5. GENERAL:**

**5.1** It is not the policy of RWBAHC to loan Government materiel to civilian institutions except for declared emergency situations. In accordance with AR 700-131, the appropriate Medical Treatment Facility (MTF) Commander may make emergency loans of medical supplies and medical equipment. Emergency loans of medical supplies may not be made without reimbursement, the loan may not exceed thirty days and the medical supplies must be replaced in

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\*This memorandum supersedes MEDDAC Memo 700-5, dated 11 Apr 2006

kind by the borrowing activity. Emergency loans of medical equipment not to exceed fifteen days will be made without reimbursement. Equipment loans which exceed fifteen days must be approved in writing by the U.S. Army MEDCOM.

**5.2** Approval of all loans will be made by the appropriate Commander or designated representative.

**5.3** Supplies will only accompany loaned equipment in the event they are not available from local vendor.

**5.4** The borrowing institution must agree to the provisions of the loan agreement and sign DA Form 3161 (Request for Issue or Turn-In) as required.

**5.5** Equipment on loan must be returned to RWBAHC immediately after the emergency has passed or a replacement item has been acquired, and must be inspected by Clinical Engineering Branch.

## **6. RESPONSIBILITIES:**

**6.1** The Chief of Logistics will:

**6.1.1** Monitor the loan program and ensure that all applicable regulations are complied with.

**6.1.2** Approve equipment/supply loans as directed by the Commander.

**6.2** When equipment is returned, the Department/Service which issued it will:

**6.2.1** Check for completeness, cleanliness and operation.

**6.2.2** Bring equipment to Clinical Engineering Branch for technical inspection.

**6.3** The Clinical Engineering Branch will:

**6.3.1** Perform a complete operational check on equipment returned from loan.

**6.3.2** Perform safety test as required.

**6.3.3** Give cost estimate for any repairs required.

## **7. PROCEDURES:**

**7.1** The organization requesting the loan must complete and sign the loan agreement provided in Appendix A.

**7.2** The department loaning the equipment must complete a DA 3161 and obtain the Commanders signature per Appendix B.

**7.3** Normal Duty Hours: Request for loan of equipment will be directed to the Chief, Clinical Engineering Branch, ext. 533-2836. Requests for supplies will be directed to the Chief, Materiel Branch, ext. 533-2070.

**7.4** After Duty Hours: To determine whether materiel is available, the AOD should contact responsible personnel from the appropriate Department/Service and get telephonic approval from the Chief of the Department. If the materiel is not available, the requesting organization will be so informed. If equipment is available for loan, the supervisor of the Department/Service which will furnish the equipment will perform a complete operational check for serviceability. They will check for completeness and ensure that all accessories are listed on the hand receipt. Clinical Engineering on-call personnel should be contacted to perform pre-issue check if safety and/or serviceability is questioned. Blank copies of the loan agreement and DA Form 3161 are on file in the AOD Office. Approval for release of the materiel will be received by the AOD who must coordinate and receive final approval from the appropriate Commander or designated representative. At the end of the AOD's tour, the loan agreement, DA Form 3161 and all allied paperwork will be turned in to the Chief, Personnel Division who will forward it to the Chief, Clinical Engineering Branch.

The proponent of this publication is the Chief, Logistics Division. Users are invited to send comments and suggested improvements on DA Form 2028 directly to USA MEDDAC, Logistics Division, ATTN: MCXJ-LO, Fort Huachuca, AZ 85613-7079.
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FOR THE COMMANDER:

OFFICIAL:

GREGORY A. SWANSON  
LTC, MS  
Deputy Commander for Administration

ROBERT D. LAKE  
Information Management Officer

DISTRIBUTION: E

APPENDIX A  
Loan Agreement

MEMORANDUM FOR Commander, U.S. Army MEDDAC, Fort Huachuca, AZ 85613-7049

SUBJECT: Loan Agreement

1. Request the loan of the following equipment/supplies:

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2. Reason: (Explain efforts to obtain from civilian sources)

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3. I certify receipt of and assume responsibility for the care and safekeeping of the Army materiel listed on DA Form 3161. The items were received in good working order and repair. I fully agree to the receipt of these items under the following conditions:

- a. Materiel loan period is not to exceed \_\_\_\_\_ days.
- b. Equipment loaned is subject to recall by RWBAHC at any time.
- c. RWBAHC accepts no liability for the improper use of the equipment by the borrower.
- d. Supplies will only accompany loaned equipment in the event they are not available from a local vendor. Supplies consumed in use will be replaced in kind.
- e. The borrower will provide necessary transportation and personnel to pick up and return the loaned equipment/supplies.
- f. Only qualified personnel will operate equipment loaned.
- g. Equipment will be properly maintained during use and returned in the condition received.
- h. Damage to the equipment will be repaired at no cost to the government.

- i. Equipment will not be further loaned without approval of RWBAHC.

4. Attach completed DA Form 3161 to this form.

(Signature of Responsible Officer)

(Signature of Borrower)

\_\_\_\_\_  
(Title/Extension Number)

\_\_\_\_\_  
(Title/Institution)

\_\_\_\_\_  
(Date Agreement was Signed)

\_\_\_\_\_  
(Phone Number)

Encl: DA Form 3161



I hereby acknowledge acceptance of the above-listed Government-owned equipment received in good working order and repair, for temporary use. During the period (\_\_\_ enter date \_\_\_) to (\_\_\_ enter date \_\_\_). I understand that I am responsible for proper care and safekeeping of the equipment and will promptly return it/them in the same condition as received, fair wear and tear expected, upon termination of the loan period specified unless an approved extension is obtained, or at such earlier date as I may elect. In the event of loss, damage or destruction of the equipment through fault or neglect, I agree to reimburse the Government the cost of repair or fair market value of the equipment as appropriate.

I have been informed that periodic maintenance services are to be performed (insert frequency). Service is required (\_\_\_\_\_ enter dates \_\_\_\_\_). When feasible, it is my responsibility to transport the equipment to (\_\_\_\_insert HCA\_\_\_\_) to obtain the required services. Prior arrangements by telephoning (\_\_\_ number\_\_\_) for services should be made. If I relocate to another area and will receive medical care from another Federal health care facility I must notify (\_\_\_ insert property manager \_\_\_\_\_) so that equipment transfer can be accomplished and designation of a new supporting maintenance activity can be established.

It is further understood that the equipment on loan is not to be permanently removed from the address indicated in block 2 of the hand receipt without prior authorization of the commander (name of the HCA).

\_\_\_\_\_  
(Signature of patient or sponsor)