

APPENDIX B
ESTIMATES

	EXAMPLE	PAGE
Format for the Health Service Support Estimate	B-1	B-1
Format for the Dental Estimate	B-2	B-7
Format for the Veterinary Estimate	B-3	B-12
Format for the Preventive Medicine Estimate	B-4	B-18
Format for the Combat Stress Control Estimate	B-5	B-25

Example B-1. FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE

(Classification)

*Headquarters
Location
Date, time, and zone*

HEALTH SERVICE SUPPORT ESTIMATE OF THE SITUATION

References: *Maps, overlays, charts, or other documents required to understand the plan. Reference to a map will include the map series number and country or geographic area, if required; sheet number and name, if required; edition; and scale.*

1. MISSION *(Statement of the overall HSS mission.)*
2. SITUATION AND CONSIDERATIONS
 - a. Enemy situation.
 - (1) Strength and disposition.
 - (2) Combat efficiency.
 - (3) Capabilities.
 - (4) Logistic situation.

(Classification)

Example B-1 FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE (Continued)

(Classification)

- (5) State of health.
- (6) Weapons.
- b. Friendly situation.
 - (1) Strength and disposition.
 - (2) Combat efficiency.
 - (3) Present and projected operations.
 - (4) Logistic situation.
 - (5) Rear area protection plan.
 - (6) Weapons.
- c. Characteristics of the area of operations.
 - (1) Terrain.
 - (2) Weather and climate.
 - (3) Dislocated civilian population and EPW.
 - (4) Flora and fauna.
 - (5) Disease.
 - (6) Local resources.
 - (7) Nuclear, biological, and chemical and DE weapons.
- d. Strengths to be supported.
 - (1) United States uniformed services.

(Classification)

Example B-1. FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE (Continued)

(Classification)

- (a) Army.
 - (b) Navy.
 - (c) Air Force.
 - (d) Marines.
 - (e) Coast Guard.
 - (2) Department of Defense Civilians.
 - (3) Allied forces.
 - (4) Coalition forces.
 - (5) Enemy prisoners of war.
 - (6) United States national contract personnel.
 - (7) Indigenous civilians and third country civilians. *(Refer to discussion of Articles 15 and 16 of the Geneva Convention for the Amelioration of the Condition of the Wounded and The Sick in Armed Forces in the Field in FM 8-10.)*
 - (8) Detainees.
 - (9) Internees.
 - (10) Others.
- e. Health of the command.
- (1) Acclimation of troops.
 - (2) Presence of disease.
 - (3) Status of immunizations and/or chemoprophylaxes.

(Classification)

Example B-1. FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE *(Continued)*

(Classification)

- (4) Status of nutrition.
- (5) Clothing and equipment.
- (6) Fatigue.
- (7) Morale.
- (8) Status of training.
- (9) Other, as appropriate.

f. Assumptions. *(Assumptions may be required as a basis for initiating, planning, or preparing the estimate. Assumptions are modified as factual data when specific planning guidance becomes available.)*

g. Special factors. *(Mention items of special importance in the particular operation to be supported such as the unique conditions to be encountered in NBC or DE warfare, or the impact that patients suffering from combat stress will have on the HSS system.)*

3. HEALTH SERVICE SUPPORT ANALYSIS

a. Patient estimates, (Indicate rates and numbers by type unit /division)

- (1) Number of patients anticipated.
- (2) Distribution within the AO (space).
- (3) Distribution in time during the operation (evacuation time).
- (4) Areas of patient density.
- (5) Possible mass casualties.
- (6) Lines of patient drift and evacuation.

b. Support requirements. *Consider separately the estimated support requirements for—*

(Classification)

Example B-1. FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE (Continued)

(Classification)

- (1) Patient evacuation and medical regulation.
- (2) Hospitalization.
- (3) Health service logistics, to include blood management.
- (4) Medical laboratory services.
- (5) Dental services.
- (6) Veterinary services.
- (7) Preventive medicine services.
- (8) Combat stress control services.
- (9) Area medical support.
- (10) Command, control, communications, computers, and intelligence.
- (11) Others, as appropriate.

c. Resources available. *Consider Air Force/Naval support in addition to—*

- (1) Organic medical units and personnel.
- (2) Attached medical units and personnel.
- (3) Supporting medical units.
- (4) Civil public health capabilities and resources. *(Civil Affairs personnel are responsible for obtaining host-nation support.)*
- (5) Enemy prisoner of war medical personnel.
- (6) Health service logistics.
- (7) Medical troop ceiling.

(Classification)

Example B-1. FORMAT FOR THE HEALTH SERVICE SUPPORT ESTIMATE (Continued)

(Classification)

d. Courses of action. *(As a result of the above considerations and analysis, determine and list all logical COA which will support the commander's OPLAN and accomplish the HSS mission. Consider all SOPs, policies, and procedures in effect. Courses of action are expressed in terms of what, when, where, how, and why.)*

4. EVALUATION AND COMPARISON OF COURSES OF ACTION

a. *Compare the probable outcome of each COA to determine which one offers the best chance of success. This may be done in two steps:*

(1) *Determine and state those anticipated difficulties or difficulty patterns which will have a different effect on the COA listed.*

(2) *Evaluate each COA against each significant difficulty or difficulty pattern to determine strengths and weaknesses inherent in each.*

b. *Compare all COA listed in terms of significant advantages and disadvantages, or in terms of the major considerations that emerged during the above evaluation.*

5. CONCLUSIONS

a. *Indicate whether the mission set forth in paragraph 1 can (cannot) be supported.*

b. *Indicate which COA can best be supported from the HSS standpoint.*

c. *List the limitations and deficiencies in the preferred COA that must be brought to the commander's attention.*

d. *List factors adversely affecting the health of the command.*

/s/ _____
Surgeon (Command)

Annexes *(as required)*

Distribution:

(Classification)

Example B-2. FORMAT FOR THE DENTAL ESTIMATE

(Classification)

Headquarters
Place
Date, time, and zone

DENTAL ESTIMATE OF THE SITUATION

References: *Maps, overlays, charts, or other documents required to understand the plan. Reference to a map will include the map series number and country or geographic area, if required; sheet number and name, if required; edition; and scale.*

1. MISSION *(Statement of the specific dental support mission.)*
2. SITUATION AND CONSIDERATIONS
 - a. Enemy situation.
 - (1) Strength and disposition.
 - (2) Combat efficiency.
 - (3) Capabilities.
 - (4) Logistics situation.
 - (5) State of health.
 - (6) Weapons.
 - b. Friendly situation.
 - (1) Strength and disposition.
 - (2) Combat efficiency.
 - (3) Present and projected operations.
 - (4) Logistics situation.

(Classification)

Example B-2. FORMAT FOR THE DENTAL ESTIMATE (Continued)

(Classification)

(5) Weapons.

c. Characteristics of the area of operations.

(1) Terrain.

(2) Weather.

(3) Civilian population.

(4) Local resources.

(5) Other.

d. Patient population to be supported.

(1) United States uniformed services.

(a) Army

(b) Navy.

(c) Air Force.

(d) Marines.

(e) Coast Guard.

(2) Department of Defense Civilians.

(3) Allied forces.

(4) Coalition forces.

(5) Enemy prisoners of war.

(6) United States national contract personnel.

(Classification)

Example B-2. FORMAT FOR THE DENTAL ESTIMATE (Continued)

 (Classification)

- (7) Indigenous and third country civilians.
 - (8) Detainees.
 - (9) Internees.
 - (10) Others.
- e. Oral health of the command.
- (1) Emergency rate.
 - (a) Preventable.
 - (b) Nonpreventable.
 - (2) Soldier's individual level of oral health.
 - (3) Unit dental readiness indexes.
 - (4) Dental readiness status of soldiers deploying into the theater.
 - (a) Individuals.
 - (b) Units.
- f. Assumptions.
- g. Special factors.
3. ANALYSIS
- a. Dental service personnel estimate.
 - b. Patient estimates. *(Indicate rates and numbers by type unit/division.)*
 - c. Support requirements and resources available.

 (Classification)

Example B-2. FORMAT FOR THE DENTAL ESTIMATE (Continued)

(Classification)

- (1) Supply.
 - (a) Requirements.
 - (b) Availability.
 - (c) Limiting factors.
- (2) Transportation.
 - (a) Requirements.
 - (b) Availability.
 - (c) Limiting factors.
- (3) Services.
 - (a) Requirements.
 - (b) Availability.
 - (c) Limiting factors.

d. Evacuation.

- (1) Requirements.
- (2) Availability.
- (3) Limiting factors.

e. Hospitalization.

- (1) Requirements.
- (2) Availability.

(Classification)

Example B-2. FORMAT FOR THE DENTAL ESTIMATE (Continued)

 (Classification)

(3) Limiting factors.

f. Miscellaneous. *(Indicate any special or unusual organizational or other logistical considerations.)*

g. Dental courses of action.

4. EVALUATION AND COMPARISON OF DENTAL COURSES OF ACTION

a. *Determine the probable outcome of each COA listed in paragraph 3g when opposed by each significant difficulty identified.*

b. *Compare all significant advantages and disadvantages.*

5. CONCLUSIONS

a. *Indicate whether the mission set forth in paragraph 1 can (cannot) be supported.*

b. *Indicate which COA can best be supported from the dental service standpoint.*

c. *Indicate the disadvantages of nonselected COA.*

d. *List the deficiencies in the preferred COA that must be brought to the attention of the commander.*

/s/ _____
 Dental Surgeon

Annexes *(as required)*

Distribution:

 (Classification)

Example B-3. FORMAT FOR THE VETERINARY ESTIMATE

(Classification)

Headquarters
Place
Date, time, and zone

VETERINARY ESTIMATE OF THE SITUATION

References: Maps, overlays, charts, or other documents required to understand the plan. Reference to a map will include the map series number and country or geographic area, if required; sheet number and name, if required; edition; and scale.

1. MISSION (Statement of the specific veterinary support mission.)
2. SITUATION AND CONSIDERATIONS
 - a. Enemy situation.
 - (1) Strength and disposition of animals.
 - (2) State of health of animals and threat concerning zoonotic diseases.
 - (3) Capabilities that affect the ability of the Veterinary Service to accomplish its mission.
 - b. Friendly situation.
 - (1) Size and posture of Class I supply system.
 - (2) Type of rations to be used.
 - (3) Status of Class I supplies.
 - (4) Strength and disposition of animals, if applicable.
 - (5) Status of veterinary supply.
 - (6) Number and extent of civic action programs.

(Classification)

Example B-3. FORMAT FOR THE VETERINARY ESTIMATE (Continued)

(Classification)

c. Characteristics of the area of operations. *(Factors that affect the veterinary mission and veterinary support.)*

- (1) Terrain.
- (2) Weather and climate.
- (3) Animal population (health, types, and disposition [domestic and wildlife]).
- (4) Flora.
- (5) Zoonotic diseases posing a serious threat to the health of the command or the local population.
- (6) Local food supply system.
- (7) Location, quantity, and quality of indigenous veterinary services.
- (8) Nuclear, biological, chemical, and DE weapons.
- (9) Animal diseases having a disruptive impact on the economy.

d. Strengths to be supported. *(Normally a table is used to include food inspection support and animal support.)*

- (1) United States uniformed services.
 - (a) Army.
 - (b) Navy.
 - (c) Air Force.
 - (d) Marines.
 - (e) Coast Guard.

(Classification)

Example B-3. FORMAT FOR THE VETERINARY ESTIMATE (Continued)

(Classification)

3. ANALYSIS

a. Veterinary service personnel estimate.

- (1) Distribution of Class I installations.
- (2) Distribution of subsistence (perishable and nonperishable).
- (3) Extent of local procurement.
- (4) Extent of inspection load of indigenous foods for indigenous personnel, if applicable.
- (5) Estimate of animal casualties, if applicable.
- (6) Evacuation of animal casualties, if applicable.

b. Veterinary support requirements.

- (1) Food inspection.
- (2) Veterinary PVNTMED and veterinary public health.
- (3) Veterinary supply.
- (4) Veterinary treatment.
- (5) Evacuation.
- (6) Other (civil-military).

c. Veterinary resources available.

- (1) Organic veterinary personnel.
- (2) Attached veterinary units.
- (3) Supporting veterinary units.

(Classification)

Example B-3. FORMAT FOR THE VETERINARY ESTIMATE (Continued)

(Classification)

- (4) Veterinary personnel in CA units and SFGs.
- (5) Staff veterinarians in MEDCOM and medical brigades.
- (6) Area medical laboratories.
- (7) The veterinary troop ceiling.
- (8) Status of veterinary supply.

d. *Courses of action. (As a result of the above considerations and analysis, determine and list all logical COA which will support the commander's OPLAN and accomplish the HSS mission. Consider all SOPS, policies, and procedures in effect. Courses of action are expressed in terms of what, when, where, how, and why.)*

4. EVALUATION AND COMPARISON OF COURSES OF ACTION

a. *Determine the probable outcome of each COA listed in paragraph 3d when opposed by each significant difficulty identified. This may be done in two steps:*

(1) *Determine and state those anticipated difficulties or difficulty patterns that will have an equal affect on the COA listed.*

(2) *Evaluate each COA against each significant difficulty or difficulty pattern to determine strengths and weaknesses inherent in each COA.*

b. *Compare all COA listed in terms of significant advantages and disadvantages, or in terms of the major considerations that emerged during the above evaluation.*

5. CONCLUSIONS

a. *Indicate whether the mission set forth in paragraph 1 can (cannot) be supported.*

b. *Indicate which COA can best be supported from the veterinary service standpoint.*

c. *Indicate the disadvantages of nonselected COA.*

(Classification)

Example B-3. FORMAT FOR THE VETERINARY ESTIMATE *(Continued)*

(Classification)

d. *List the deficiencies in the preferred COA that must be brought to the attention of the commander.*

/s/ _____
Veterinary Staff Officer

Annexes *(as required)*

Distribution:

(Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE

(Classification)

Headquarters
Place
Date, time, and zone

PREVENTIVE MEDICINE ESTIMATE OF THE SITUATION

References: *Maps, overlays, charts, or other documents required to understand the plan. Reference to a map will include the map series number and country or geographic area if required; sheet number and name, if required; edition; and scale.*

1. MISSION *(Statement of the specific PVNTMED mission.)*
2. SITUATION AND CONSIDERATIONS
 - a. Enemy situation.
 - (1) Communicable disease.
 - (2) Sanitation levels.
 - (3) Public health capabilities.
 - (4) Immunization status.
 - (5) Level of field sanitation training.
 - (6) Nuclear, biological, and chemical capabilities.
 - (7) Directed energy capabilities.
 - b. Friendly situation.
 - (1) Status of PVNTMED individual and unit supplies.
 - (2) Operational situation.
 - (3) Types of rations used.

(Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE (Continued)

 (Classification)

- (4) Unit PVNTMED readiness.
 - (a) *Field sanitation team training and equipment.*
 - (b) *Individual and unit PVNTMED measures training and enforcement.*
 - (5) Potable water and ice.
 - (a) *Sufficient production and distribution units.*
 - (b) *Sufficient availability and quantity.*
 - (6) Availability of aircraft for aerial spray operations.
- c. Characteristics of the area of operations. *Discuss the following:*
- (1) Terrain.
 - (a) *Does AO favor arthropod/rodent populations?*
 - (b) *Is the AO at high altitude?*
 - (c) *Is water available?*
 - (d) *How will the terrain affect pest management operations?*
 - (2) *Climate and weather. Discuss the following:*
 - (a) *Will the season affect disease transmission ?*
 - (b) *Will the season affect heat/cold injury?*
 - (c) *Will the season affect disease vectors?*
 - (d) *Will the season affect water supply?*
 - (e) *Will the season affect pest management operations?*

 (Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE (Continued)

(Classification)

- (3) Civilian population. *Discuss the following:*
 - (a) *Endemic disease.*
 - (b) *Epidemic disease.*
 - (c) *Sources of disease on MSR.*
 - (d) *Disease immunization status.*
 - (e) *Water treatment standards.*
 - (f) *Waste disposal practices.*
 - (g) *Nutritional standards.*
 - (h) *Civilian medical support/public health system.*
- (4) Flora and fauna. *Discuss the following:*
 - (a) *Arthropod vectors in AO.*
 - (b) *Arthropod vectors resistant to pesticides.*
 - (c) *Venomous animals and arthropods.*
 - (d) *Poisonous plants.*
 - (e)
- (5) Enemy prisoners of war. *Discuss the following:*
 - (a) *Presence of disease.*
 - (b) *Number EPW public health officers.*
 - (c) *Disease immunization status.*

(Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE (Continued)

(Classification)

(d) Nutritional *standards*.

(6) Other.

d. Strengths to be supported.

(1) United States uniformed services.

(a) Army.

(b) Navy.

(c) Air Force.

(d) Marines.

(e) Coast Guard

(2) Department of Defense Civilians.

(3) Allied forces.

(4) Coalition forces.

(5) Enemy prisoners of war.

(6) United States national contract personnel.

(7) Indigenous and third country civilians.

(8) Detainees.

(9) Internees.

(10) Others.

e. Health status of the command.

(Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE (Continued)

(Classification)

(2) Tasks involving environmental health.

(a) *Heat.*

(b) *Cold.*

(c) *Water.*

(d) *Sanitation.*

(3) Tasks involving disease.

(a) *Epidemiology.*

(b) *Immunizations.*

(c) *Prophylaxis.*

b. Requirements.

(1) Supplies.

(2) Equipment.

(3) Civil/military support.

c. Resources available.

(1) Organic PVNTMED personnel.

(2) Attached PVNTMED personnel.

(3) Supporting PVNTMED personnel.

(4) Status of unit field sanitation teams.

(5) Civilian public health personnel.

(Classification)

Example B-4. FORMAT FOR THE PREVENTIVE MEDICINE ESTIMATE (Continued)

(Classification)

- (6) Captured enemy public health personnel.
- (7) Preventive medicine troop ceiling.
- (8) Preventive medicine supply status.

d. Preventive medicine courses of action. *Determine, as a result of the above analysis, all logical COA which will support the commander's OPLAN and accomplish the HSS mission. Expressed in terms of what, when, where, how, and why.*

4. EVALUATION AND COMPARISON OF PREVENTIVE MEDICINE COURSES OF ACTION
(Compare each COA against the obstacles that will be encountered and against the casualties which could result from inaction.)

5. CONCLUSION *(Decide which COA will best fulfill the mission. List the major advantages and disadvantages of the selected COA.)*

/s/ _____
Preventive Medicine
Staff Officer

Annexes *(as required)*

Distribution:

(Classification)

Example B-5. FORMAT FOR COMBAT STRESS CONTROL ESTIMATE

(Classification)

Headquarters
Place
Date, time, and zone

COMBAT STRESS CONTROL ESTIMATE OF THE SITUATION

References: *Maps, overlays, charts, and other documents required to understand the plan. Reference to a map will include the map series number and country or geographic area, if required; sheet number and name, if required; and scale.*

1. MISSION *(Statement of the specific CSC mission in conformity with the operations in which the supported troops are engaged.)*

2. SITUATION AND CONSIDERATIONS

a. Enemy situation.

(1) Strength and disposition.

(2) Combat efficiency *(how skilled and stubborn).*

(3) Capabilities *(note especially the artillery and air threat, armor and mobility, continuous operations, NBC and DE, rear battle threat, electronic warfare and disinformation capability, and target detection capability).*

(4) Logistics situation.

(5) State of health.

(6) Weapons *(note especially any recently introduced "surprise" or "terror" weapons, or weapons which our troops judge especially dangerous and superior to ours).*

b. Friendly situation.

(1) Strength and disposition.

(Classification)

Example B-5. FORMAT FOR COMBAT STRESS CONTROL ESTIMATE (Continued)

 (Classification)

- (4) Marines (*supported by Navy medicine? attached to Army?*).
- (5) Allied Forces.
- (6) Coalition forces.
- (7) Enemy prisoners of war.
- (8) Indigenous civilians.
- (9) Detainees (*US military personnel confined in military police facilities*).
- (10) Internees.
- (11) Others (*such as US military families not evacuated before hostilities*).

e. Health of the command.

- (1) Acclimation of troops to weather, strangeness, culture.
- (2) Presence of disease (*especially preventable "diseases of loneliness or negligence," such as sexually transmitted disease, cold injury diarrhea infections related to poor hygiene or failure to protect*).
- (3) Status of immunizations.
- (4) Status of nutrition.
- (5) Clothing and equipment (*adequate for climate?*).
- (6) Fatigue (*sleep loss, physical overwork, jet lag*).
- (7) Morale (*sense of purpose, support by country? rest and recuperation chances?*).
- (8) Status of training (*especially tough, realistic*).

 (Classification)

Example B-5. FORMAT FOR COMBAT STRESS CONTROL ESTIMATE (Continued)

(Classification)

(9) Other *(such as concerns about families in the theater or left abruptly in rapid deployment; lack of support for the war on the home front).*

f. Assumptions. *(Assumptions maybe required as a basis for initiating or preparing the estimate. Assumptions are modified as factual data becomes available.)*

g. Special factors. *(Emphasize items of special importance in the particular operation to be supported, such as the unique conditions to be encountered in the event of NBC warfare.)*

3. COMBAT STRESS CONTROL ANALYSIS

a. Patients' estimates. *(Indicate rates and numbers by type of unit/division.)*

(1) Number of patients anticipated *(such as BFCs, misconduct stress behaviors, holding and hospital patients, as well as consultation work load and cases who can be treated and released to duty).*

(2) Distribution within the AO (space).

(3) Distribution in time during the operation.

(4) Areas of patient density.

(5) Possible mass casualties.

(6) Lines of patient drift and evacuation.

b. Support requirements. *(Consider separately the estimated support requirements for:)*

(1) Patient evacuation and medical regulation *(using nonmedical transport before ground ambulance or before air ambulance).*

(2) Hospitalization *(where to send the few who need it?).*

(3) Health service logistics, to include blood management.

(4) Medical laboratory services *(drug screening capability? NP diagnostics?).*

(Classification)

Example B-5. FORMAT FOR COMBAT STRESS CONTROL ESTIMATE (Continued)

 (Classification)

- (5) Dental services *(for BFCs and staff)*.
- (6) Veterinary services *(local food inspection? care for unit mascots?)*.
- (7) Preventive medicine services.
- (8) Area medical support.
- (9) Command, control, and communications *(critical to dispersed CSC)*.
- (10) Others such as field feeding.

c. Resources available. *(Consider Air Force/Naval support in addition to:)*

- (1) Mental health personnel organic to US Army CSC/MH sections and medical units.
- (2) Attached CSC/MH medical units and personnel.
- (3) Supporting CSC units and medical units.
- (4) Air Force *(air transportable hospitals with "combat stress units")*.
- (5) Navy *(supporting Marines? fleet hospitals ashore? shipboard?)*.
- (6) Allied CSC-equivalent units or elements.
- (7) Civil public health capabilities and resources. *(Civil affairs personnel are responsible for obtaining host-nation support.)*
- (8) Retained medical/MH health personnel.
- (9) Medical supplies and equipment.
- (10) Medical (CSC/MH) troop ceiling.

 (Classification)

Example B-5. FORMAT FOR COMBAT STRESS CONTROL ESTIMATE (Continued)

(Classification)

d. Course of action. *(As a result of the above considerations and analysis, determine and list all logical COA which will support the commander's OPLAN and accomplish the HSS/CSC mission. Consider all SOPS, policies, and procedures in effect. Courses of action are expressed in terms of what, when, where, how, and why.)*

4. EVALUATION AND COMPARISON OF COURSES OF ACTION

a. *Compare the probable outcome of each COA to determine which one offers the best chance of success. This may be done in two steps:*

(1) *Determine and state those anticipated difficulties or difficulty patterns which will have a different effect on the COA listed.*

(2) *Evaluate each COA against each significant difficulty or difficulty pattern to determine strengths and weaknesses inherent in each.*

b. *Compare all COA listed in terms of significant advantages and disadvantages, or in terms of the major considerations that emerged during the above evaluation.*

5. CONCLUSIONS

a. *Indicate whether the mission set forth in paragraph 1 can (cannot) be supported.*

b. *Indicate which COA can best be supported from the CSC standpoint.*

c. *List the limitations and deficiencies in the preferred COA that must be brought to the commander's attention.*

d. *List factors adversely affecting the CSC health of the command.*

/s/ _____
(as appropriate)

Annexes *(as required)*

Distribution:

(Classification)