



- b. Ensure person performing D-1R is not on watch, maneuvering watch is not set, and decontamination station is not set (as denoted by copious amounts of yellow material).
- c. Verify that Sanitaries are not pressurized as noted by signs hung stating, "WARNING! BLOWING SANITARIES." If pressure exerted on lower abdominal region is too great, consider performing R-5 (Emergency Bowel Movement Using Plastic Bag)

**WARNING:** Entering stall before verifying stall is empty may be hazardous to continuation of life.

## 2. Verify stall empty

- a. Knock three times on stall door and ask potential occupants of their presence.
- b. If stall is occupied, move to next stall and repeat step 2.a.
- c. If all three stalls are occupied, wait until an occupant has removed himself from the stall, and then continue to Step 3. Remove reading material and review while waiting.

**NOTE:** Stall #2 has shown signs of becoming clogged during performance of D-1R. If emergency, perform PM using stall #2. Otherwise, continue to wait until either stall #1 or #3 are clear.

- d. If greater than 5 minutes have passed and all three stalls remain to be occupied, reperform Step 2 in its entirety to verify occupants are awake. Use colorful language such as "Hey. You. Pinch it off. I need to drop a deuce."

## 3. Entering stall

- a. Open door to stall by moving handle either clockwise or counterclockwise from the centerline position.
- b. Inspect stall for presence of toilet paper. If none, do not continue with maintenance action. Inform WCS.

**WARNING:** Do not substitute any other material such as kim-wipes, socks, and magazine pages for toilet paper. Your anus will thank you.

- c. Open door 90 degrees until door rests flush with wall.

**NOTE:** Maintain positive control of head door. Releasing door will potentially cause a "noise transient" denoted by a loud banging noise. If "noise transient" is heard, back out of MR, inform the Chief of the Watch (COW), and proceed to Step 1.

- d. Position yourself between toilet and door.
- e. Move door 90 degrees back to original position and ensure Primary Locking Device (PLD) mates with Frame Locking Mechanism (FLM).
- f. Slide Secondary Locking Device (SLD) until it mates with the FLM. The stall is now secure from unauthorized entry.

**WARNING:** Opening bowl flush valve while sanitaries are pressurized will cause loss of cleanliness, friends, and respect.

- g. Open toilet drain valve. Verify that water exits the bowl with no "burping." If burping exists, or water does not drain at all, inform A-Division LPO and proceed to Step 2.

**WARNING:** Performing bowel movement while having a waterless bowl will lead to "stink-bowling" the occupants of the FCML Head, and will cause your reputation to diminish.

- h. Open toilet fill valve until proper level in the bowl is seen. Experience has shown that 3 - 4 inches above the bowl bottom is required.

## 4. Disrobe

- a. Using Inventory Sheet (Table 2), take inventory of all items in port and starboard, forward and aft pockets (including breast pockets), belt, and all items attached to belt.
- b. While maintaining positive control of belt buckle, unclasp belt buckle. If belt does not maintain its position while unclasp, remove all tools, articles, and TLD from belt, remove belt, replace all items removed back onto belt, clasp belt buckle and hang belt from a convenient location.

**NOTE:** Visually note that TLD is present throughout this step. If TLD is not present, exit stall and inform LELT/Corpsman.

- c. Unbutton top button on coveralls.

d. Pull down on upper zipper until it rests flush with bottom zipper.

**WARNING:** Deck may be contaminated. Verify cleanliness prior to allowing coveralls to touch deck.

- e. Remove right arm, and then left arm from coveralls. Allow coveralls to slide down to ankles.
- f. Check that the toilet seat is in the fully horizontal position. If not, gently place in the fully horizontal position.
- g. Hold undergarments from the waistband and tug them towards the deck allowing them to rest on top of coveralls.
- h. Bending knees in a 90-degree angle, sit down on toilet seat.
- i. Inspect aft end of undergarments for foreign materials, discoloration, and holes. Fill out Table 1 Supplemental Report Form, and forward results to Corpsman.
- j. Inspect crotch area for signs of discoloration and sores. Immediately inform Corpsman of such indications. Do not pick at it.
- k. Inspect crotch area for excessive growth of hair. If it is a greater length than preferred, perform MRC M-1R (Trim The Nether Regions)

JOB CONTROL NUMBER			MIP CODE: 2311		
Hull No.	Work Center	JOB SEQ NO.	FCC/EQUIP. ID CODE	MM/DD/YY	CM
	10S				
SYSCOM NO	RIC/APL/CID	IDENT/UNIT	SHEET 1 OF 1		
54Q81HY		[/////////]			C/C
TPID	UNDERGARMENT INSPECTION				
101	HOLES FOUND IN UNDERGARMENT MANY [Y/N] LARGE [Y/N] SMALL [Y/N] NONE [Y/N] [_] [_] [_] [_]				
102	DISCOLORATION OF UNDERGARMENT NONE [Y/N] BROWN [Y/N] RED [Y/N] OTHER: _____ [_] [_] [_]				
<b>TABLE 1 SUPPLEMENTAL REPORT FORM</b>					

1.	6.	11.
2.	7.	12.
3.	8.	13.
4.	9.	14.
5.	10.	15.
<b>TABLE 2 INVENTORY SHEET</b>		

**5. Perform Bowel Movement**

- a. Relax lower abdominal region.

**NOTE:** Pornography, car, and techie magazines found in the FCML Head are gifts to be shared equally amongst the crew. Do not remove the aforementioned reading materials without first depositing a magazine of your own.

- b. While resting elbows just above the knees, commence reviewing reading material.
- c. If bowl water or fecal matter touches any region of the lower body or exits the bowl basin, open drain valve, and perform "courtesy flush." Shut drain valve and fill water back to nominal level IAW Step 3.g through 3.h.
- d. Take care not to fall asleep while in the current position. Falling asleep will relax the jaw and cause drool to accumulate on undergarments.

**CAUTION:** Depending on the time spent in this position, personnel's legs may become infected with the condition known as Dead Leg. Use caution while operating heavy machinery while affected with Dead Leg.

- e. Take full set of atmospheres with Draeger. Notify OOD and prepare to Emergency Ventilate the forward compartment with the Low Pressure Blower if any atmospheres are found to be unfit of human living.
- f. If unacceptable smell levels emanate from the bowl, take atmosphere samples with the Explosimeter and inform personnel within a 15-foot radius to don EAB's.

**NOTE:** If unacceptable smell levels are isolated to undergarments, your berthing location may have already been shifted to the Torpedo Room without your knowledge.

- g. Bowel movement is complete when an "empty" feeling is felt, or when reading material becomes boring.

#### 6. Wipe

- a. Using flashlight, inspect the bowl region. If any substances other than healthy, solid brown fecal matter are present, don Chemical Protective Gloves and obtain samples in resealable plastic container. Submit to WCS and Corpsman for sample analysis.
- b. Using flashlight and inspection mirror, conduct a full 360-degree inspection of the rectal area, paying particular attention to the sphincter for residual feces remaining.
- c. If applicable, wiggle around while remaining in the sitting position to break free any large hunks of feces that have failed to separate from the anus.
- d. If large hunks still remain, don Chemical Protective Gloves and knock free remaining feces using a wooden stick. Discard wooden stick at Hazmat. Refer to HMUG for proper disposal method.

**WARNING:** Wiping too hard will cause chafing, and may potentially rip toilet paper which will cause wiping hand to become contaminated.

- e. Using toilet paper, wipe rectal area.
- f. Inspect toilet paper for "streaks."
- g. Discard toilet paper into bowl basin.
- h. Inspect hand for the same indications of "streaks." If any are present, don Chemical Protective Gloves to prevent spread of contamination.

**WARNING:** Failure to fully clean the rectal area will cause an itchy, unfresh feeling, which may be confused for various viruses and bacteria.

- i. Perform steps 6.e through 6.h as many times as necessary until indications of "streaks" are no longer present.
- j. If at any time brown cardboard is revealed on toilet paper roll, perform MRC R-4 (Remove Empty Toilet Paper Roll/Prepare New Toilet Paper/Install New Toilet Paper)

#### 7. Stand and Dress

**Warning:** Attempting to stand on a dead leg will cause personnel to collapse. Verify legs are not dead prior to standing.

- a. Stand up in the fully upright position.
- b. Hold undergarments by the waistband and pull upwards until properly resting on the hips.
- c. Inspect coveralls for dampness/wetting. Dry completely before attempting to re-don coveralls.
- d. Fully don coveralls by inserting arms into coverall arm slots. Verify that sleeves are either rolled down, or rolled up to acceptable position. Refer to Navy Uniform Regulations/COB for further guidance

**WARNING:** Verify that all equipment is clear of zipper prior to zipper operation. If any equipment gets stuck into zipper, perform MRC R-1 (Clearing a Clogged Zipper)

- e. While holding upper zipper and bending forward at the hips approximately 15 degrees, pull zipper upwards towards the overhead until motion stops.
- f. Clasp the button immediately above the upper zipper.

**WARNING:** Visually and physically verify that TLD is firmly attached to belt prior to bowl flush operation. If TLD is not present perform MRC R-2 (Loss of TLD) and R-3 (Diving the Poop Tank)

- g. Reclasp belt buckle, or completely re-don belt if removed in Step 4.a.
- h. Inspect collar devices to be in the proper position. Refer to Navy Uniform Regulations/COB for further guidance.

**WARNING:** Do not flush toilet without first verifying that no foreign material is present inside the bowl basin.

- i. Verify all contents of Table 2 are still present and accounted for. Conduct full search of the FCML Head for any items not.

**8. Flushing**

- a. Open the toilet flush valve until water level is approximately 3 - 4 inches from top of bowl.
- b. If using stall #2, cross your fingers.

**NOTE:** Taller personnel may strike their forehead against toilet paper holders if not paying attention. Mentally take note of both cranium, and toilet paper holder locations prior to operating toilet flush valve.

- c. Don set of non-vented goggles
- d. In a rapid motion, open the toilet flush valve. Verify that all material exits the bowl and enters the Plumbing system. If water flushes in a vertical direction, toilet is clogged or Sanitaries are pressurized. Immediately shut the toilet flush valve, and contact Auxiliary Division.
- e. For a fecesless flush, wait 5 seconds. For a small bowel movement, wait 10 seconds. For large bowel movement, wait 15 seconds.
- f. Shut the toilet drain valve. Allow water level to rise in the toilet approximately 3 - 4 inches.
- g. Shut the toilet fill valve.

**9. Exiting**

- a. Unlatch the Secondary Locking Device
- b. Turn doorknob either clockwise or counterclockwise from centerline and open door 90-degrees until door is approximately parallel with stall wall.
- c. For stalls with latching devices, latch door open. For stalls without latching devices, shut the door and ensure that the Primary Locking Device fully mates with the Frame Locking Device.
- d. Light a match
- e. Inform WCS and regain able-bodied status.