

Case Number : 202302081040

U.S. Army Mishap Report Case Print

Case Number 202302081040	Category Ground - Weapons/Explosives	Classification Class C	Duty Status On Duty	Source Mishap Report	Total Cost \$9,400				
Date of Mishap 2023/02/08	Time 1305	Period of Day Day	Mission Type Routine	Primary Cause Factor (b) (5)	Report Status Final				
Mishap Location 705 Washington Blvd, Fort Eustis, Virginia, 23604		Country United States		Lat / Long North 37.9.41 / West 76.34.30					
Location Type Office Building									
Provide a specific description of where the mishap took place Fort Eustis Provost Marshall's Office, Room 115									
Unit: 221ST MILITARY POLICE DETACHMENT (WDBJAA) , Fort Eustis, Virginia, 23604		Unit Branch: Military Police							
UIC Responsible : WDBJAA									
UIC9	UIC8	UIC7	UIC6	UIC5	UIC4	UIC3	UIC2	UIC1	Station
						WDBJAA	W6TPAA		51281
						221 MP DET MP LAW ENF ORCEM	W6TP CENTER FOR IMT		Ft Eustis, VA (51281)
Provide a brief detailed description of the mishap including equipment involved and the extent of injuries and/or damage. (Note: Do not include personally identifiable information such as names or SSNs.) : Soldier assigned to 221st MP suffered injury to foot when his MHS-17 Handgun inadvertently discharged after it made contact with another Officer's firearm holster.									
Mishap Summary : On Feb. 8, 2023, at approximately 13:05 hrs. Service Member 1 (SM-1, Army Soldier, injured police officer) was in the Supervisor's office conducting administrative duties at the Fort Eustis Provost Marshall's office in the 2nd Cubicle. His arms were leaning over the top of the cubicle while engaging in conversation with his co-workers. Witness 1 (W-1, Police Officer Airforce Civilian) was immediately sitting next to SM-1 completing a police report in the computer. The first cubicle was occupied by Witness 2 (W-2, Police Officer Airforce Civilian) and, OFC-1 (OFC-1, Airforce civilian police officer, involved). Both officers were conducting administrative work and preparing to eat lunch. The third cubicle was unoccupied. OFC-1, stood up to grab his food out of the office refrigerator, which is at the far end of the room. As OFC-1 walked through a narrow space and attempted to pass SM-1, OFC-1's holster made contact with SM-1's holster, causing a round to inadvertently discharge from SM-1's firearm and striking him in on the top of his right foot, where it meets his ankle. OFC-1 recognized a round was discharged and immediately proceeded to evaluate SM-1 and provided initial medical care until Fort Eustis Fire/EMS arrived at the scene. OFC-1 removed SM-1's holster and placed it on the ground and away. The Fort Eustis EMS transported SM-1 to emergency room, while OFC-1 and SM-2 (Army Master Sergeant) took the weapon to the clearing barrel to ensure the weapon was properly cleared. As they cleared the weapon, they discovered the expended shell casing had not exited the slide and/or ejection port. SM-2 and OFC-1 proceeded to document and process the weapon as evidence. (b)(5) (b)(5)									

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(b)(5)

Mishap Location

Did the mishap occur on post? Yes

Is this an Army Recordable Mishap
IAW 385-10?

Yes

Installation/Nearest Installation: Ft Eustis, VA (51281)

Conflict

Did this mishap occur during a conflict or operational contingency?

No

Events

Event #1

Primary Event

Unintentional Discharge - An event, in which there is no intent to fire, discharge, detonate or release the weapon or explosive. It includes the intentional "trigger pull" with an unexpected discharge (e.g. believes the weapon or explosive is not "loaded") and the unintentional "trigger pull."

Event #2

Additional Event

-

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Materiel Listing

Did ammunition or explosive materiel play a causal or contributing role or obtain damage as a result of the mishap? (b) (5)

Materiel #1**Materiel Information**

Type of Materiel/ Equipment:	Other Pistol/Revolver	Model of the Materiel/Equipment:	SIG Sauer M17	Serial Number:	TF064093
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Materiel / Equipment Ownership:	U.S. Government	Government Agency:	Army	Army Component:	Regular Army
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Describe Type: SIG Sauer M17

Owning UIC: WDBJAA Was the owning unit also most responsible for the mishap? Yes

Was this Materiel/Equipment associated with an injury? Yes

Damage

Extent of Materiel/Equipment Damage: No Damage

Component/Part Failure

Did a Component/Part Failure for this Materiel/Equipment item cause or contribute to the mishap? (b)(5)

(b)(5)

Materiel #2**Materiel Information**

Type of Materiel/ Equipment:	Other Military equipment	Model of the Materiel/Equipment:	Holster Blackhawk 21 00898REV.A	Serial Number:	Holster Blackhawk 2100898REV.A
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Materiel / Equipment Ownership:	U.S. Government	Government Agency:	Army	Army Component:	Regular Army
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Describe Type: Weapon / Holster Blackhawk

Owning UIC: WDBJAA Was the owning unit also most responsible for the mishap? Yes

Was this Materiel/Equipment associated with an injury? No

Damage

Extent of Materiel/Equipment Damage: No Damage

Component/Part Failure

Did a Component/Part Failure for this Materiel/Equipment item cause or contribute to the mishap? (b) (5)

Other Damage Listing

Was there other damage associated with this mishap? No

Fire

Was there a fire associated with this mishap? No

Hazardous Material

Was there Hazardous Material (HAZMAT) present at mishap? No

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Personnel Listing			
Personnel #1			
Personnel Information			
DoD CAC ID#:	(b) (6)	Name:	(b) (6)
DOB:	(b) (6)	Age:	(b) (6)
Gender:	(b) (6)		
Role:	Directly/Physically Involved	Did this person suffer an injury or occupational illness?	Yes
Employment Information			
Employment Status/ Personnel Classification:	Army - Active		
Duty Status:	On Duty Non-TDY	Flight Status:	Not Applicable/Unknown
Pay Grade:	(b) (6)	Date Hired/Initial Enlisted Date:	(b) (6)
MOS/Civilian Job Series:	31B - Military Police		
Personnel Assigned UIC:	WDBJAA	Duty/Deployed UIC:	WDBJAA
Unit/Personnel Address:	(b) (6), Fort Eustis, Virginia, 23604	Country:	United States
Phone Number:	(b) (6)		
Duty Location (includes deployed location):	Fort Eustis, Virginia, 23604	Country:	United States
Injury/Occupational Illness			
Injury/Occupational Illness Severity:	Lost Workday Case - Days Away From Work		
Injury/Occupational Illness Cause:	Gunshot		
Injury #1			
Injury/Illness Type:	Wounds (Laceration/Cut/Puncture)	Body Part:	Foot
Treatment			
Was personnel treated in Emergency Room?	Yes	Days Hospitalized:	1
Days In Quarters/Convalescence Leave:	TBD	Days Restricted Duty:	TBD
Work Days Lost:	1	Injury Cost:	9400
Treatment Facility			
Medical Treatment Facility Type:	Civilian		
Facility Name:	Riverside Regional Medical Center		
Facility Address:	500 J Clyde Morris Blvd, Newport News, Virginia, 23601	Country:	United States
Drugs			
Did drug use by this individual cause or contribute to the mishap?	(b) (5)		
Alcohol			
Did Alcohol use by this individual cause or contribute to the mishap?	(b) (5)		
Night Vision Device			
Was a Night Vision Device (NVD) in use?	No		

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Activity/Fatigue Factors			
Activity			
What was the activity the person was participating in at the time of the mishap?		Law Enforcement Patrol	
Provide a description of the activity/task this individual was doing at the time of the mishap:			
SM was conducting administrative / clerical work. SM went to his supervisor's office to ask questions. While standing and leaning over a cubicle a second police officer walked by and made unintentional holster-to-holster contact causing an inadvertent discharge of a round. The result was a Soldier shot through his ankle.			
Fatigue Factors			
Hours Slept in Last 24 Hours:	8	Hours Awake Prior to Mishap:	9
		Time Work Began (24hr):	0500
Number of continuous hours this individual was on duty before the mishap:		8	
Mistake/Task Errors			
Did the individual make a mistake/task error?		(b)(5)	
Mistake/Task Error #1			
Mistake/task error this individual made:		(b) (5)	
Describe how the task/activity was performed incorrectly:			
(b) (5)			
Did this mistake/task error cause or contribute to the mishap or to the mishap's severity of injury or damage?		(b) (5)	
Mistake/Task Error #2			
Mistake/task error this individual made:		(b) (5)	
Describe how the task/activity was performed incorrectly:			
(b) (5)			
Did this mistake/task error cause or contribute to the mishap or to the mishap's severity of injury or damage?		(b) (5)	
Personal Protective Equipment			
Were there any Personal Protective Equipment (PPE) issues associated with this individual worthy of inclusion in this mishap report?		No	
Training			
Was this individual trained on the specific equipment and mission?		Yes	
Training #1			
How was the individual trained?		Formal/Classroom Training	
Training #2			
How was the individual trained?	Other Training	Description:	Law Enforcement Pistol Qualification
License/Certification/Qualification			
Was the individual licensed/certified/qualified on the equipment /weapons?	Yes	Date licensed/certified/qualified on the equipment /weapons:	(b) (6)

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Was the individual licensed/certified/qualified on the activity?	Yes	Date licensed/certified/qualified on the activity:	(b) (6)
Were there any additional state or federal licenses required for this activity?	No		
Was the individual part of a qualified crew on the weapons?	Unknown		
Personnel #2			
Personnel Information			
DoD CAC ID#:	(b) (6)	Name:	(b) (6)
DOB:	(b) (6)	Age:	(b) (6)
Gender:	(b) (6)		
Role:	Directly/Physically Involved	Did this person suffer an injury or occupational illness?	No
Employment Information			
Employment Status/ Personnel Classification:	U.S. Air Force Civilian		
Duty Status:	On Duty Non-TDY	Flight Status:	Not Applicable/Unknown
Pay Grade:	(b) (6)	Date Hired/Initial Enlisted Date:	(b) (6)
MOS/Civilian Job Series:	1801 - General Inspection, Investigation, Enforcement, and Compliance Series		
Unit/Pers onnel Address:	(b) (6), Fort Eustis, Virginia, 23604	Country:	United States
Phone Number:	(b) (6)		
Duty Location (includes deployed location):	Fort Eustis, Virginia, 23604	Country:	United States
Drugs			
Did drug use by this individual cause or contribute to the mishap?	(b) (5)		
Alcohol			
Did Alcohol use by this individual cause or contribute to the mishap?	(b) (5)		
Night Vision Device			
Was a Night Vision Device (NVD) in use?	No		
Activity/Fatigue Factors			
Activity			
What was the activity the person was participating in at the time of the mishap?	Clerical/Office Work		
Provide a description of the activity/task this individual was doing at the time of the mishap:			
On Feb. 8, 2023 at approximately 1300hrs. SM was in the shift Supervisors office (room 115) conducting administrative work. SM started walking to the refrigerator to grab his food and as he walked by mishap Soldier, their weapons / holsters made contact (b)(5)			
. Multiple eye-witnesses corroborated this statement.			
Fatigue Factors			
Hours Slept in Last 24 Hours:	8	Hours Awake Prior to Mishap:	8
Time Work Began (24hr):	0630		
Number of continuous hours this individual was on duty before the mishap:	7		
Mistake/Task Errors			

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Did the individual make a mistake/task error? (b)(5)						
Mistake/Task Error #1						
Mistake/task error this individual made: (b) (5)						
Describe how the task/activity was performed incorrectly:						
(b) (5)						
Did this mistake/task error cause or contribute to the mishap or to the mishap's severity of injury or damage? (b) (5)						
Personal Protective Equipment						
Were there any Personal Protective Equipment (PPE) issues associated with this individual worthy of inclusion in this mishap report? No						
Training						
Was this individual trained on the specific equipment and mission? Not Applicable						
License/Certification/Qualification						
Was the individual licensed/certified/qualified on the equipment /weapons? Not Applicable						
Was the individual licensed/certified/qualified on the activity? Not Applicable						
Were there any additional state or federal licenses required for this activity? No						
Was the individual part of a qualified crew on the weapons? Unknown						
Point of Contact (POC) / Responsible Safety Officer (RSO)						
SNo	Name	Pay Grade / Rank	Position / Title	Role	DSN Phone Number	Commercial Phone Number
1				(b) (6)		
2		(b) (6)				
Personnel and Materiel Association						
Personnel and Materiel Association #1						
Name: (b) (6)		Role:		Directly/Physically Involved		
Activity/Duty Position:		Law Enforcement Patrol	Materiel:		Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093 Other Military equipment,Weapon / Holster Blackhawk,Holster Blackhawk 2100898REV.A,Holster Blackhawk 2100898REV.A	
Personnel and Materiel Association #2						
Name: (b) (6)		Role:		Directly/Physically Involved		
Activity/Duty Position:		Clerical/Office Work	Materiel:		Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093	
Environmental Conditions						
Environment						
Were there any environmental conditions that had an impact on this mishap? (b)(5)						
Findings & Recommendations						

Primary Cause Factor: (b) (5)	
Do you want to enter Findings and Recommendations or Factor(s) only? Factor(s) Only	
Factor 1 - Role (b) (5)	
Factor Role: (b) (5)	Factor: (b) (5)
Would you like to enter HFACS, Unsafe Acts and System Inadequacies? No	
Factor 2 - Role (b) (5)	
Factor Role: (b) (5)	Factor: (b) (5)
Would you like to enter HFACS, Unsafe Acts and System Inadequacies? No	
Factor 3 - Role (b) (5)	
Factor Role: (b) (5)	
Synopsis of Finding:	(b) (5)
Factor 4 - Role (b) (5)	
Factor Role: (b) (5)	
HFACS: I have already determined the System Inadequacy nano codes for this mishap and am ready to enter now	
Synopsis of Finding:	(b) (5)

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Supporting Documentation			
Documentation #1			
File Description:	202302081040 - Witness Summary - Mishap - (b)(5)		
Information Type:	Witness Summary	Association:	Mishap
Documentation #2			
File Description:	202302081040 - Witness Summary - Mishap - Witness Statement (b) (6)		
Information Type:	Witness Summary	Association:	Mishap
Documentation #3			
File Description:	202302081040 - Witness Summary - Mishap - Witness statement (b) (6)		
Information Type:	Witness Summary	Association:	Mishap
Documentation #4			
File Description:	202302081040 - Diagrams and Photographs - Mishap - Picture of round cartridge case		
Information Type:	Diagrams and Photographs	Association:	Mishap
Documentation #5			
File Description:	202302081040 - Diagrams and Photographs - Mishap - Blackhawk Holster, Leg		
Information Type:	Diagrams and Photographs	Association:	Mishap
Documentation #6			
File Description:	202302081040 - Diagrams and Photographs - Mishap - Weapon in holster		
Information Type:	Diagrams and Photographs	Association:	Mishap
Documentation #7			
File Description:	202302081040 - Map of Accident Site - Mishap - MISHAP Walkway Clearance		
Information Type:	Map of Accident Site	Association:	Mishap
Documentation #8			
File Description:	202302081040 - Map of Accident Site - Mishap - Location of MISHAP		
Information Type:	Map of Accident Site	Association:	Mishap
Documentation #9			
File Description:	202302081040 - Diagrams and Photographs - Other - Holster and state of weapon at time of mishap		
Information Type:	Diagrams and Photographs	Association:	Materiel
Materiel Name:	Other Military equipment,Weapon / Holster Blackhawk,Holster Blackhawk 2100898REV.A,Holster Blackhawk 2100898REV.A		
Documentation #10			
File Description:	202302081040 - Diagrams and Photographs - M9 Series,TF064093 - Weapon at time of TACOM initial inspection		
Information Type:	Diagrams and Photographs	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #11			

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File Description:	202302081040 - Special Technical and Laboratory Analysis Reports - Other Pistol/Revolver,TF064093 - SIG SAUER Report: (b)(5)		
Information Type:	Special Technical and Laboratory Analysis Reports	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #12			
File Description:	202302081040 - Special Technical and Laboratory Analysis Reports - Mishap -(b)(5)		
Information Type:	Special Technical and Laboratory Analysis Reports	Association:	Mishap
Documentation #13			
File Description:	202302081040 - Special Technical and Laboratory Analysis Reports - Other Pistol/Revolver,TF064093 - Initial MAIR report from TACOM.		
Information Type:	Special Technical and Laboratory Analysis Reports	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #14			
File Description:	202302081040 - Other - Other Pistol/Revolver,TF064093 - The P320 Safety Design Explanation. (b)(5)		
Information Type:	Other	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #15			
File Description:	202302081040 - Inspection and Maintenance Records - Other Pistol/Revolver,TF064093 - Mx overdue 139 Days.		
Information Type:	Inspection and Maintenance Records	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #16			
File Description:	202302081040 - Directives, Regulations, Etc. - Other Pistol/Revolver,TF064093 - Authorized Holster for MHS, PDF Pg 97. NSN:1095-01-676-6761		
Information Type:	Directives, Regulations, Etc.	Association:	Materiel
Materiel Name:	Other Pistol/Revolver,SIG Sauer M17,SIG Sauer M17,TF064093		
Documentation #17			
File Description:	202302081040 - Other - (b) (6) - Personnel - Weapons Qual		
Information Type:	Other	Association:	Personnel
Personnel Name:	(b) (6)		
Documentation #18			
File Description:	202302081040 - Medical Data (Other) - (b) (6) - Personnel - (b) (6) Statement of Medical Examination and Duty Status-1		
Information Type:	Medical Data (Other)	Association:	Personnel
Personnel Name:	(b) (6)		

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Reviewers				
Last Name, First Name:	(b) (6)	Role:	Mishap Reviewer	Concur
Rank/Grade:	(b) (6)	Position/Title (For example, Sr. Maint. Tech):	(b) (6)	
Unit/Organization:	JBLE Safety			(b) (6)
Email address:	(b) (6)	Phone Number:	(b) (6)	
		DSN:		
		COM:		
Reviewer Comments				
Comments provided for this Mishap will be listed below				
Section	Sub Section	Reviewed By	Role	Date
Reviewer Summary		(b) (6)	Mishap Reviewer	03/21/2023
Data Missing				

(b) (6)



(b) (6)



STATEMENT OF MEDICAL EXAMINATION AND DUTY STATUS
(Required for Line of Duty Investigation)

For use of this form, see AR 600-8-4, the proponent agency is DCS, G-1.

PRIVACY ACT STATEMENT

AUTHORITY: Title 10 U.S. Code 1201, Retirement, Chapter 61, Retirement or Separation for Physical Disability; and Title 10 U.S. Code 1203, Separation for Physical; AR 600-8-4, Line of Duty, Policy, Procedures, and Investigations and EO 9397 (as amended).

PRINCIPAL PURPOSE: To provide information regarding a Soldier's status when injury, illness, disease or death occurs. It tracks and ensure Soldiers are receiving proper benefits and proper institutions/agencies are notified regarding payment and benefits. For additional information see the System of Records Notice A0608-8-1b AHRC, Line of Duty Investigations.
<https://dpold.defense.gov/Privacy/SORNS/index/DOD-wide-SORN-Article-View/Article/570057/a06008-1b-ahrc.aspx/>

ROUTINE USES: There are no specific routine uses anticipated for this form; however it may be subject to a number of proper and necessary routine uses identified in the system of records notice(s) specified in the purpose Statement above.

DISCLOSURE: Voluntary, however, failure to provide the information will interfere with the proper adjudication of the Soldier's case in the best interest of the Soldier and the United States Army.

1. THRU:

2. TO:

Orders Issuance Authority

3. FROM:

Commander
221st Military Police Detachment
ATTN: ATSP-BDS-MPD
Joint Base Langley-Eustis, VA 23604

(b) (6)

(b) (6)



From: (b) (6)
To: (b) (6)
Subject: New MAIR Submitted (b) (6), Weapon System: Pistol, caliber 9MM-
Date: Tuesday, February 14, 2023 10:53:21 AM

Your new MAIR has been submitted to TULSA.

The MAIR ID assigned to the report is: (b) (6)

(b) (6)

MAIR Information:

Submitter's Information:

(b) (5), (b) (6)

(b)(5)



(b)(5)



TECHNICAL REPORT OF U.S. ARMY GROUND ACCIDENT SUMMARY OF WITNESS INTERVIEW <small>For use of this form, see DA Pamphlet 385-40; the proponent agency is OCSA.</small>		REQUIREMENTS CONTROL SYMBOL CSOCS-308	
1. NAME OF WITNESS (LAST, FIRST, MI) (b) (6)	2. OCCUPATION/TITLE (b) (6)	3. GRADE (b) (6)	4. DATE OF BIRTH (b) (6)
5. ADDRESS (Include ZIP Code) (If military, include organization) 221st Military Police Detachment 860 Monroe Ave. Joint Base Langley-Eustis, VA 23604		6. TELEPHONE NUMBER (Duty/Work) (b) (6)	
		7. DATE OF INTERVIEW (YYYYMMDD) 20230214	
8. EXPERIENCE AND BACKGROUND (b) (6)	9. LOCATION AT TIME OF ACCIDENT JBLE MP Station (PMO)	10. INTERVIEWER (Name and Grade) (b) (6)	
11. Promise of confidentiality. A promise of confidentiality can only be offered in Limited Use Investigations, which normally are not ground accidents. For exception, see AR 385-10, paragraph 3-10.			
a. Was a promise of confidentiality offered to the witness? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>blk 15. If no, read blk 14b to the witness.)</small>			
b. Confidentiality was requested by the witness. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>(If Yes, interviewer sign and date statement below.)</small>			
THE WITNESS MADE THIS STATEMENT UNDER A PROMISE OF CONFIDENTIALITY.			
_____ SIGNATURE OF INTERVIEWER		20230214 DATE (YYYYMMDD)	
12. SUMMARY OF INTERVIEW Notes taken from phone interview, not avail for in-person interview: "So, I was working dispatch and I needed to ask a question to the supervisor and went to his office; and was talking and had my hands leaning on the cubicle wall and one of my supervisors, (b) (6) walked passed me and I don't know how or what happened but his holster hit my holster and then somehow my gun went off. Deep breath, that's all I can remember". Additional questions:			
1. Do you remember anything else? Who were you talking to? I think it was (b) (6)			
2. Describe what state was your weapon: We were told to carry a round in the chamber and weapon on fire.			
3. What type weapon/holster: I had a Blackhawk holster strapped to my right leg.			
4. Anything malfunction with the holster? Fairly new, about a month or so old			
5. How do you wear you holster? Not too loose not too tight			
6. Do you noticed anything unusual with your weapon or holster that day? Nothing felt different, normal			
7. Do you remember the impact before it went off? All I remember was the clanking of the two holster and gun shot.			
8. What happened when the weapon went off? I screamed profanities and (b) (6) started checking my leg and my foot. Then EMS came.			
9. What's the disposition? I'm having surgery on Wednesday, and recovery is about 6 month.			
10. I do have a concerned, and would like to bring this up: "For the police department our cadam guys left and I've being told that our pistols were on the red and technically were'nt supposed to be issued these weapons. The pistols were not serviced for a while. I don't know for sure, but that was I was hearing around.			
11. What you mean by red status? That the weapon had not being serviced for a while.			
12. What shift your work? This happened towards the middle of my shift. I show up 4:20-4:30 in the morning. Get all stuff ready, get my weapon and load up my rounds. And go about my day.			
13. Can you talk and expand on SOP and Training? We follow the air force operating instruction which is the equivalent of an Army SOP. And we follow JBLE. I personally don't agree with some stuff, they tend to make changes and the words doesn't flow very smooth. I think we are operating under the last Provost Marshall guidelines because I think the new Provost Marshall has not signed the new one yet. I don't know very much, I'm just an E5.			
14. To your knowledge, how are you directed to carry your firearm? We carry one round on the chamber and weapon on fire. This is what I've been told, but I have not read any regulations or anything like that written.			
15. Can you expand on training? We do ranges pretty often, at least every three months. I believe I went sometime last month			
16. How would you describe your current mental/spiritual state? I'm under a lot of pain on my foot, having bad dreams, don't feel safe around those weapons anymore.			
17. Are you getting the support you need? How is the command support? I feel this command is pretty good and support compared to the last command team.			
18. I can just imagine how you are feeling about this accident, if you could go back in time what would you do differently to prevent this from occurring, or any safety recommendations? I would definitely will not be carrying with one round in the chamber. And definitely not on fire.			
Can you recall how you had you weapon holster? I believe I have the hood of the holster down on safe.			
13. DATE OF ACCIDENT (YYYYMMDD) <div style="text-align: center;">20230208</div>			

14. GENERAL WITNESS INFORMATION BRIEFING *(Interviewer must read appropriate instructions to the witness)*

a. Promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of Army Regulation 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
- (3) This safety investigation is being conducted for accident prevention purposes only. Within the military, pursuant to AR 385-10, it cannot be used for any other purpose, to include any future disciplinary actions against any individuals. Therefore, the interview you are being asked to provide will be used by the Army in the interest of safety and accident prevention only.
- (4) Nonconfidential witness interviews may be released to the public pursuant to a Freedom of Information Act request. If you wish to protect your interview from public release outside the military, then your interview must be pursuant to a promise of confidentiality. Confidentiality means that your interview will not be released to the public or outside DoD safety channels.
- (5) Whether your interview is confidential or not, the chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes.
- (6) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.
- (7) The promise of confidentiality is available to you if you desire it. Do you desire it?

b. No promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of AR 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
- (3) This safety investigation is being conducted for accident prevention purposes only. Within the military, pursuant to AR 385-10, it cannot be used for any other purpose, to include any future disciplinary actions against any individuals. Therefore, the interview you are being asked to provide will be used by the Army in the interest of safety and accident prevention only.
- (4) The chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes. The interview summary may be released to the public pursuant to a Freedom of Information Act request.
- (5) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.

15. AVAILABILITY OF PROMISE OF CONFIDENTIALITY FOR "LIMITED USE" REPORT OF INVESTIGATION

a. Pursuant to AR 385-10, witness interviews may only be used within the military for purposes of accident prevention, and may not be used as evidence in connection with any administrative or disciplinary proceeding. This protection alone does not prevent release of the interview outside of the military *(to the public, newspapers, attorneys, etc.)* under the Freedom of Information Act. If you wish to protect your interview from release outside of the military, then your interview must be pursuant to a promise of confidentiality.

b. If you do not wish a promise of confidentiality, you may decline such below. In that case, your interview will still be used in the military only for purposes of accident prevention, but it may be released outside of the military in response to a Freedom of Information Act request. Please indicate which option you desire by initialing one of the choices below:

_____ I request a promise of confidentiality. I understand that the results of my interview will be used within the military only for the purposes of accident prevention, and will also be protected from public release outside of the military under the Freedom of Information Act.

_____ I decline a promise of confidentiality. I understand that the results of my interview will be used within the military only for purposes of accident prevention. I also understand that the results may be publicly released outside of the military under the Freedom of Information Act.

(b) (6)

Name of witness *(Print Name - do not sign)*

TECHNICAL REPORT OF U.S. ARMY GROUND ACCIDENT SUMMARY OF WITNESS INTERVIEW <small>For use of this form, see DA Pamphlet 385-40, the proponent agency is OCSA</small>		REQUIREMENTS CONTROL SYMBOL CSOCS-308
(b) (6)	2. OCCUPATION/TITLE (b) (6)	3. GRADE (b) (6)
5. ADDRESS (Include ZIP Code) (If Military, include organization) (b) (6)		6. TELEPHONE NUMBER (Duty/Work) (b) (6)
		7. DATE OF INTERVIEW (YYYYMMDD) 20230217
8. EXPERIENCE AND BACKGROUND 20 years	9. LOCATION AT TIME OF ACCIDENT PMO Supervisor's Office	10. INTERVIEWER (Name and Grade) (b) (6)
11. Promise of confidentiality. A promise of confidentiality can only be offered in Limited Use investigations, which normally are not ground accidents. For exception, see AR 385-10, paragraph 3-10.		
a. Was a promise of confidentiality offered to the witness? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <small>blk 15. If no, read blk 14b to the witness.)</small>		
b. Confidentiality was requested by the witness. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, interviewer sign and date statement below.)		
THE WITNESS MADE THIS STATEMENT UNDER A PROMISE OF CONFIDENTIALITY.		
(b) (6)		20230217 DATE (YYYYMMDD)
12. SUMMARY OF INTERVIEW		
(b) (6) saw hood down (hood) or safe state of hood. - removed (b) (6) holster, removed the magazine when he noticed the weapon was pointing at him during evaluating (b) (6) leg. (First Aid). (b) (6) was present during clearing of weapon. Round casing was inside the gun, not in holster. hood was popped open when clearing. (b) (6) is under the impression that is possible to shoot M-17 while holding upper slider. (have not done it). - he uses a safari holsters - CATM is responsible for upns Mx on AF owned weapons (unsure Army's weapon)		
13. DATE OF ACCIDENT (YYYYMMDD) 20230204		

14. GENERAL WITNESS INFORMATION BRIEFING (Interviewer must read appropriate instructions to the witness)

a. Promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of Army Regulation 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
- (3) This safety investigation is being conducted for accident prevention purposes only. Within the military, pursuant to AR 385-10, it cannot be used for any other purpose, to include any future disciplinary actions against any individuals. Therefore, the interview you are being asked to provide will be used by the Army in the interest of safety and accident prevention only.
- (4) Nonconfidential witness interviews may be released to the public pursuant to a Freedom of Information Act request. If you wish to protect your interview from public release outside the military, then your interview must be pursuant to a promise of confidentiality. Confidentiality means that your interview will not be released to the public or outside DoD safety channels.
- (5) Whether your interview is confidential or not, the chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes.
- (6) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.
- (7) The promise of confidentiality is available to you if you desire it. Do you desire it?

b. No promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of AR 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
- (3) This safety investigation is being conducted for accident prevention purposes only. Within the military, pursuant to AR 385-10, it cannot be used for any other purpose, to include any future disciplinary actions against any individuals. Therefore, the interview you are being asked to provide will be used by the Army in the interest of safety and accident prevention only.
- (4) The chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes. The interview summary may be released to the public pursuant to a Freedom of Information Act request.
- (5) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.

15. AVAILABILITY OF PROMISE OF CONFIDENTIALITY FOR "LIMITED USE" REPORT OF INVESTIGATION

a. Pursuant to AR 385-10, witness interviews may only be used within the military for purposes of accident prevention, and may not be used as evidence in connection with any administrative or disciplinary proceeding. This protection alone does not prevent release of the interview outside of the military (to the public, newspapers, attorneys, etc.) under the Freedom of Information Act. If you wish to protect your interview from release outside of the military, then your interview must be pursuant to a promise of confidentiality.

b. If you do not wish a promise of confidentiality, you may decline such below. In that case, your interview will still be used in the military only for purposes of accident prevention, but it may be released outside of the military in response to a Freedom of Information Act request. Please indicate which option you desire by initialing one of the choices below:

☐ I request a promise of confidentiality. I understand that the results of my interview will be used within the military only for the purposes of accident prevention, and will also be protected from public release outside of the military under the Freedom of Information Act.

☒ I decline a promise of confidentiality. I understand that the results of my interview will be used within the military only for purposes of accident prevention. I also understand that the results may be publicly released outside of the military under the Freedom of Information Act.

(b) (6)

TECHNICAL REPORT OF U.S. ARMY GROUND ACCIDENT SUMMARY OF WITNESS INTERVIEW For use of this form, see DA Pamphlet 385-40; the proponent agency is OCSA		REQUIREMENTS CONTROL SYMBOL CSOCS-308	
1. NAME OF WITNESS (LAST, FIRST, MI) (b) (6)	2. OCCUPATION/TITLE (b) (6)	3. GRADE (b) (6)	4. DATE OF BIRTH (b) (6)
5. ADDRESS (Include ZIP Code) (If military, include organization) (b) (6)		6. TELEPHONE NUMBER (Duty/Work) (b) (6)	
		7. DATE OF INTERVIEW (YYYYMMDD)	
8. EXPERIENCE AND BACKGROUND (b) (6)	9. LOCATION AT TIME OF ACCIDENT Approx 1300 /	10. INTERVIEWER (Name and Grade)	
<p>11. Promise of confidentiality. A promise of confidentiality can only be offered in Limited Use Investigations, which normally are not ground accidents. For exception, see AR 385-10, paragraph 3-10.</p> <p>a. Was a promise of confidentiality offered to the witness? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No blk 15. If no, read blk 14b to the witness.)</p> <p>b. Confidentiality was requested by the witness. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, interviewer sign and date statement below.)</p> <p>THE WITNESS MADE THIS STATEMENT UNDER A PROMISE OF CONFIDENTIALITY.</p>			
		DATE (YYYYMMDD)	
12. SUMMARY OF INTERVIEW		SIGNATURE OF INTERVIEWER	
<p>On 8 Feb 23 AT Approx 1256 I was sitting in my cubicle preparing to eat my lunch. AT This time I was speaking to (b) (6) who was standing next to my cubicle, and (b) (6) who was leaning over my cubicle with his hands hanging over facing me. Approx 1300 (b) (6) stated he was going to grab his OATS on the other side of the office. As he started walking down the walk way, I was still talking to (b) (6) And he was still hanging over my cubicle. A (b) (6) walked past (b) (6) I heard a loud bang, and didn't know what it was until (b) (6) stated my foot hurt. I approached the area from my cubicle and noticed (b) (6) inspecting (b) (6) leg then we saw blood coming from the top of his foot. (b) (6) Applied pressure and I got medical. I did not have (b) (6) weapon with still hospitalized, ears arrived and transported to River side.</p>			
13. DATE OF ACCIDENT (YYYYMMDD)			

14. GENERAL WITNESS INFORMATION BRIEFING (Interviewer must read appropriate instructions to the witness)

a. Promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of Army Regulation 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
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- (4) Nonconfidential witness interviews may be released to the public pursuant to a Freedom of Information Act request. If you wish to protect your interview from public release outside the military, then your interview must be pursuant to a promise of confidentiality. Confidentiality means that your interview will not be released to the public or outside DoD safety channels.
- (5) Whether your interview is confidential or not, the chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes.
- (6) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.
- (7) The promise of confidentiality is available to you if you desire it. Do you desire it?

b. No promise of confidentiality offered.

- (1) This accident investigation board has been convened under the provisions of AR 385-10 for the purpose of conducting a safety investigation.
- (2) This may be just one of a number of investigations being conducted regarding this accident; collateral or legal investigations may be ongoing as well. Those investigations are entirely separate from a safety investigation and are also required to inform you of their purpose and of your legal rights.
- (3) This safety investigation is being conducted for accident prevention purposes only. Within the military, pursuant to AR 385-10, it cannot be used for any other purpose, to include any future disciplinary actions against any individuals. Therefore, the interview you are being asked to provide will be used by the Army in the interest of safety and accident prevention only.
- (4) The chain of command will review the final accident report, which may include a summary of your interview, but the chain of command may only use the investigation report and the interviews for safety and accident prevention purposes. The interview summary may be released to the public pursuant to a Freedom of Information Act request.
- (5) If you ever have knowledge that your witness interview was used by the Army for anything other than accident prevention purposes (for example, disciplinary action against an individual), you should consult with your local Judge Advocate Defense Counsel Office and request that the Command Judge Advocate, U.S. Army Combat Readiness Center, be notified at DSN 558-2924 or commercial (334) 255-2924.

15. AVAILABILITY OF PROMISE OF CONFIDENTIALITY FOR "LIMITED USE" REPORT OF INVESTIGATION

a. Pursuant to AR 385-10, witness interviews may only be used within the military for purposes of accident prevention, and may not be used as evidence in connection with any administrative or disciplinary proceeding. This protection alone does not prevent release of the interview outside of the military (to the public, newspapers, attorneys, etc.) under the Freedom of Information Act. If you wish to protect your interview from release outside of the military, then your interview must be pursuant to a promise of confidentiality.

b. If you do not wish a promise of confidentiality, you may decline such below. In that case, your interview will still be used in the military only for purposes of accident prevention, but it may be released outside of the military in response to a Freedom of Information Act request. Please indicate which option you desire by initialing one of the choices below:

(b) (6) I request a promise of confidentiality. I understand that the results of my interview will be used within the military only for the purposes of accident prevention, and will also be protected from public release outside of the military under the Freedom of Information Act.

I decline a promise of confidentiality. I understand that the results of my interview will be used within the military only for purposes of accident prevention. I also understand that the results may be publicly released outside of the military under the Freedom of Information Act.

(b) (6)

not sign)













