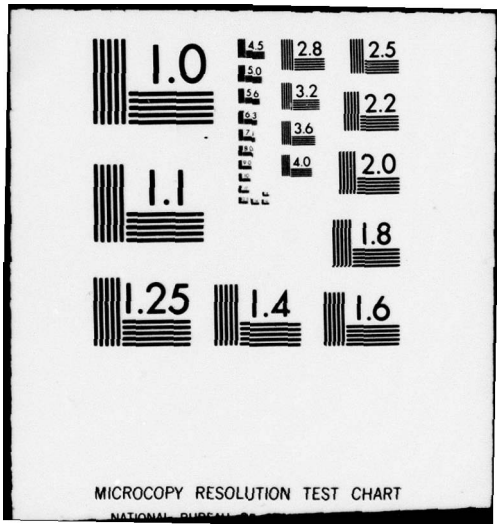
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OCCUPATIONAL SURVEY REPORT

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MEDICAL SERVICE AND ALLERGY/IMMUNOLOGY CAREER LADDERS

AFSCs 90230, 90250, 90270, 90292, 91234, 91274, and 91295

AFPT-90-912-340
MARCH 1979

OCCUPATIONAL SURVEY BRANCH
USAF OCCUPATIONAL MEASUREMENT CENTER
RANDOLPH AFB TEXAS 78148

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PREFACE

This report presents the results of an Air Force Occupational Survey of the Medical Service and Allergy/Immunology career ladders (AFSCs 90230, 90250, 90270, 90292, 91234, 91274, and 91295). The project was undertaken upon request from the Air Force Manpower and Personnel Center (AFMPC) and directed by USAF Program Technical Training, Volume 2, dated October 1977. The project was designed to compare tasks performed by personnel assigned to positions within the Allergy/Immunology career ladder and those assigned to Medical Service positions. Authority for conducting occupational surveys is contained in AFR 35-2. Computer outputs from which this report was produced are available for use by operating and training officials.

The survey instrument was developed by Mr. Robert L. Alton, Inventory Development Specialist. Mr. Guy B. Cole, Occupational Survey Analyst, analyzed the data and wrote the final report. This report has been reviewed and approved by Lieutenant Colonel Jimmy L. Mitchell, Chief, Airman Career Ladders Analysis Section, Occupational Survey Branch, USAF Occupational Measurement Center, Randolph AFB, Texas, 78148.

Computer programs for analyzing the occupational data were designed by Dr. Raymond E. Christal, Occupational and Manpower Research Division, Air Force Human Resources Laboratory (AFHRL), and were written by the Project Analysis and Programming Branch, Computational Sciences Division, AFHRL.

Copies of this report are available to air staff sections, major commands, and other interested training and management personnel upon request to the USAF Occupational Measurement Center, attention of the Chief, Occupational Survey Branch (OMY), Randolph AFB, Texas 78148.

This report has been reviewed and is approved.

BILLY C. McMASTER, Col, USAF
Commander
USAF Occupational Measurement Center

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SUMMARY OF RESULTS

1. Survey Coverage: Inventory booklets were administered to personnel in the Medical Services and Allergy/Immunology specialties (AFS 902X0 and AFS 912X4) during the period August through December 1978. Survey results are based on responses from a selected sample of 11 percent of the AFS 902X0 and 66 percent of the AFS 912X4 personnel assigned.

2. Comparative Job Structure: Three major job clusters, based on similarity of tasks performed, were identified within the sample. One of these was composed of supervisory personnel from both ladders who performed almost no technical tasks. One of the other two groups was composed almost exclusively of Medical Service personnel while the other included only personnel from the Allergy/Immunology ladder. This analysis indicated a distinct difference between the two ladders based on technical tasks performed.

3. DAFSC Differences: Jobs within the Medical Service career ladder were heterogeneous due to the variety of patient care and treatment functions to which personnel were assigned. There was, however, gradual progression from the 3- to 7-skill level, with 3- and 5-skill level personnel performing primarily technical tasks while 7-skill level personnel primarily performed supervisory and management functions. Allergy/Immunology personnel, on the other hand, were quite homogeneous in tasks performed with 3-skill level personnel primarily performing technical tasks while 7-skill level personnel, in addition to performing the same technical tasks, also performed supervision and management functions.

4. AFR 39-1 Evaluation: The current AFR 39-1 specialty descriptions were found to be complete and accurately portray the duties and responsibilities of personnel in each of these career fields.

5. Implications: The distinct differences in the tasks performed by members of these two ladders supports the current classification structure.

OCCUPATIONAL SURVEY REPORT
MEDICAL SERVICE AND ALLERGY/IMMUNOLOGY CAREER LADDERS (AFSCs 90230, 90250, 90270, 90292, 91234, 91274, AND 91295)

INTRODUCTION

This is a report of an occupational survey of personnel in the Medical Service and Allergy/Immunology career ladders completed by the Occupational Survey Branch, USAF Occupational Measurement Center, during February 1979. This report is one of three prepared for the Classification Branch of the Air Force Manpower and Personnel Center (AFMPC/MPCRPQ) in response to their request for occupational data on selected AFSCs within the Medical career field "to determine if the current classification structure is adequate." In this study, the Allergy/Immunology career ladder (AFSC 912X4) was surveyed in conjunction with the Medical Service career ladder (AFSC 902X0). Since personnel entering the Allergy/Immunology career ladder must be qualified Medical Service Specialists, similar skill and knowledge requirements make these specialties logical candidates for possible consolidation.

BACKGROUND

Members of the Medical Service career ladder perform a variety of technical nursing duties involved in the care and treatment of patients. Personnel normally enter this ladder by first attending the J3ABR90230, Medical Service Specialist, course at the School of Health Care Sciences, Sheppard AFB, Texas. These personnel may be either "pipeline" students from basic training or retrainees from other specialties. After completion of this 6-week course, graduates are awarded the 3-skill level and are assigned to medical facilities worldwide for further on-the-job training.

Personnel in the Allergy/Immunology career ladder assist in the care and treatment of allergy patients, administer immunizations, and supervise subprofessional allergy/immunology activities. Since this is a lateral specialty, applicants must be qualified Medical Service Specialists, AFSC 90250, and be eligible to retrain under the provisions of AFR 39-4. Upon assignment to an Allergy/Immunology Clinic, Allergy/Immunology personnel may attend the 5AZY91234, Allergy/Immunology Specialist, course at Wilford Hall USAF Medical Center, Lackland AFB, Texas. As they gain experience in the allergy/immunology specialty, individuals progress from the 3-skill level directly to the 7-skill level.

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This report is intended to examine these medical specialties based on tasks performed by survey respondents. Using these data, Air Force managers can then determine the most efficient way to classify and manage these medical personnel resources. Topics discussed in this report include: (1) development and administration of the survey instrument; (2) the job structure found within each career ladder and its relationship to skill level groupings; (3) comparison of job structures with AFR 39-1 specialty descriptions; and (4) job satisfaction and related data.

INVENTORY DEVELOPMENT

The data collection instrument for this occupational survey was USAF Job Inventory AFPT 90-912-340. A task list for the Allergy/Immunology career ladder was developed by interviewing personnel working in that specialty at Wilford Hall USAF Medical Center, Lackland AFB, Texas. A review of that task list by medical specialists assigned to AFMPC indicated that tasks included were representative of those performed by allergy/immunology personnel worldwide. These tasks were then combined with the task list for the AFS 902X0 job inventory (AFPT 90-902-191) which was administered to the field during the spring of 1975. This resulted in a final task list composed of 573 tasks grouped under 14 duties. Also included was a background section which requested such information as grade, Total Active Federal Military Service (TAFMS), duty title, and job interest.

INVENTORY ADMINISTRATION

During the period August through December 1978, consolidated base personnel offices administered the job inventories to personnel within the two AFSCs. Each individual who completed the inventory first completed the identification and biographical information section (backgound section), and then checked each task performed in their present job.

After checking all tasks performed, each incumbent then rated each of these tasks on a nine-point scale showing relative time spent on the task as compared to all other tasks checked. The ratings ranged from one (very-small-amount time spent) through five (about-average time spent) to nine (very-large-amount time spent). To determine relative time spent for each task checked by a respondent, all of an incumbents ratings are assumed to account for 100 percent of the individuals time spent on the job and are summed. Each task rating is then divided by the total task responses and the quotient multiplied

by 100. This procedure provides a basis for comparing tasks not only in terms of percent members performing but also in terms of the average percent time spent performing any given task.

SURVEY SAMPLE

Personnel are normally selected to participate in an occupational survey so as to insure a balanced representation across all MAJCOM and DAFSC groups. Because of the higher population of Medical Service (902X0) personnel as compared to Allergy/Immunology (912X4) personnel, it was decided that a sample of 902X0 respondents from a few representative medical facilities would provide a sound basis for making comparisons between the two ladders. Consequently, inventories were mailed to representative medical facilities selected by personnel from AFMPC/ SGEA to provide responses from all types of medical facilities employing Medical Service personnel. Survey booklets were also mailed to all CBPOS authorized Allergy/Immunology (AFSC 912X4) personnel with instructions to administer the survey to each individual within that ladder.

TABLE 1

MEDICAL FACILITIES REPRESENTED IN SURVEY SAMPLE
(PERCENT BY AFSC SURVEYED)

MEDICAL FACILITY	902X0	912X4
USAF CLINIC	14	18
USAF HOSPITAL	39	44
USAF REGIONAL HOSPITAL	22	15
USAF MEDICAL CENTER	15	20
OTHER *	7	0
NO RESPONSE	3	3
TOTAL	100	100

* INCLUDES RESEARCH FACILITIES AND SPECIAL MEDICAL ACTIVITIES

TABLE 2

COMMAND REPRESENTATION OF THE SURVEY SAMPLE

	AFS 902X0		AFS 912X4	
COMMAND	PERCENT OF ASSIGNED	PERCENT OF SAMPLE	PERCENT OF ASSIGNED	PERCENT OF SAMPLE
AAC	2	7	1	1
ADC	3	3	2	2
AFLC	5	11	4	5
AFSC	12	10	12	12
ATC	10	16	10	12
MAC	16	15	14	14
PACAF	5	5	6	3
SAC	19	12	20	22
TAC	15	9	20	18
USAFA	1	2	1	2
USAFE	10	9	9	8
OTHER	2	1	0	1
TOTAL	100	100	100	100

	902X0	90292	912X4	91295
TOTAL ASSIGNED	6,918	141	204	12
TOTAL SAMPLED	793	23	135	2
PERCENT SAMPLED	11%	16%	66%	17%

TABLE 3

DAFSC REPRESENTATION OF THE SURVEY SAMPLE

DAFSC	PERCENT OF ASSIGNED	PERCENT OF SAMPLE
90230	10%	3%
90250	73%	71%
90270	17%	26%
91234	65%	56%
91274	35%	44%

CAREER LADDER STRUCTURE

A key aspect of the occupational survey program is to examine the job structure of career ladders on the basis of what people are actually doing in the field, rather than on the basis of how official career ladder documents say the jobs are structured. This analysis of actual job structure is made possible by the use of the Comprehensive Occupational Data Analysis Programs (CODAP). By using CODAP, job functions are identified on the basis of similarity in tasks performed and relative time spent performing these tasks. Using the job structure as a starting point, it is then possible to first describe the career ladder as it presently exists, and then, in turn, evaluate the pertinent career ladder documents, such as AFR 39-1 Specialty Descriptions and the Specialty Training Standard.

The career ladder structure analysis process consists of determining the functional job structure of career ladder personnel in terms of job types, clusters, and independent job types. A job type is a group of individuals who perform many of the same tasks and also spend similar amounts of time performing them. When there is a substantial degree of similarity between different job types, they are grouped together and labeled as clusters. Finally, there are often cases of specialized job types that are too dissimilar to be grouped into any cluster. These fairly unique groups are labeled independent job types.

The job structure for the 902X0 and 912X4 career ladders was determined by performing a job type analysis of the 961 survey respondents. This analysis identified three primary job groups or clusters: Medical Service Personnel; Allergy/Immunology Personnel; and Supervision, Management, and Training Personnel. This grouping suggests that tasks performed by technical personnel in each of these two specialties clearly distinguish each of these ladders and only as individuals advance to positions which involve tasks of a training, supervisory, or managerial nature do the jobs become sufficiently similar for personnel from both ladders to be included in one group.

Based on task similarity and the amount of time spent in performing each task, the jobs performed by respondents in this survey are as listed below and illustrated in Figure 1. GRP numbers are shown with each group as a cross-reference to computer printed summaries used in the analysis of the survey data.

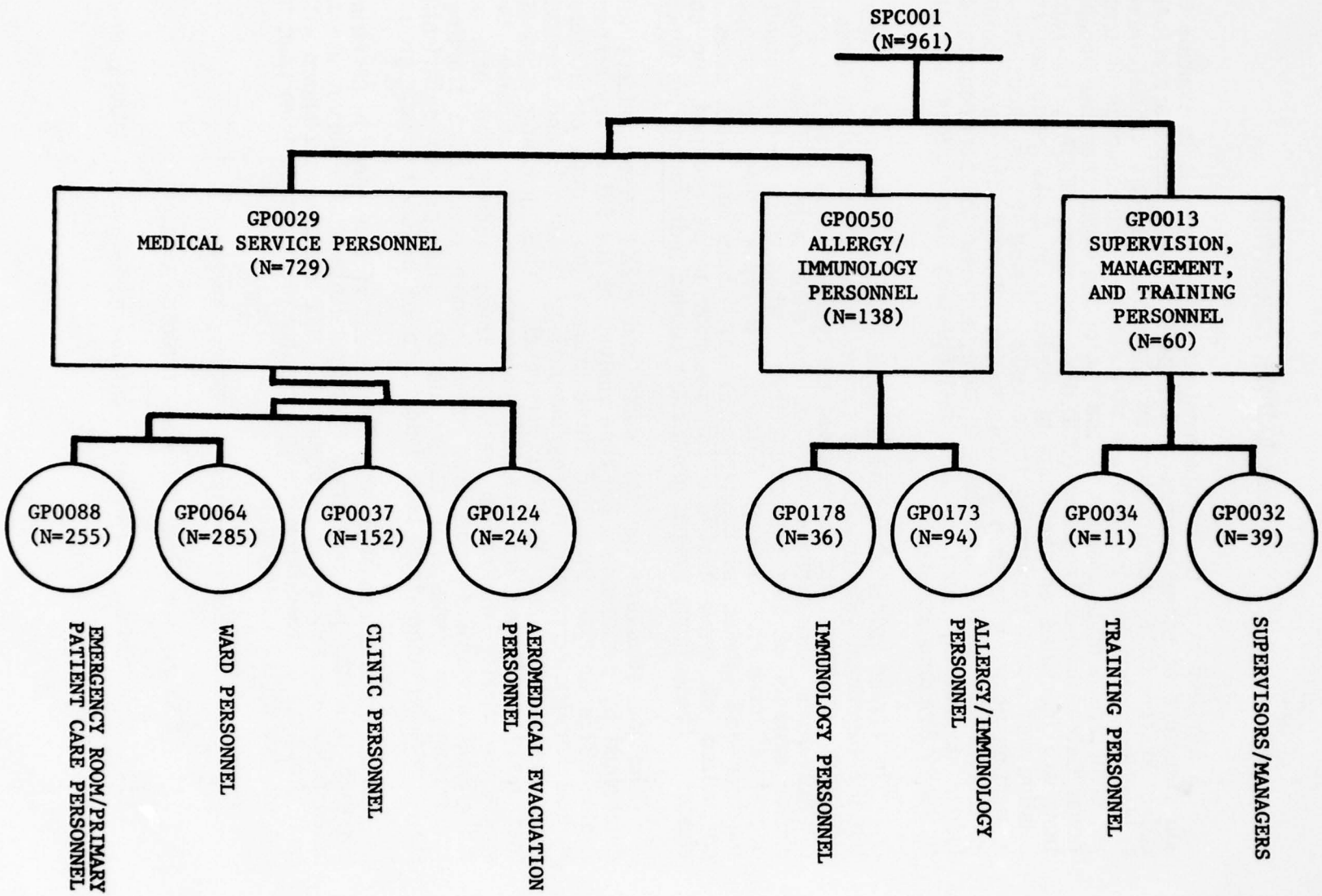
I. Medical Service Personnel (GP0029, N=729)

II. Allergy/Immunology Personnel (GP0050, N=136)

III. Supervision, Management, and Training Personnel (GP0013, N=60)

MEDICAL SERVICE AND ALLERGY/IMMUNOLOGY CAREER LADDER STRUCTURE

FIGURE 1



Ninety-six percent of the respondents to the survey were found to perform jobs roughly equivalent to those described in the three major groupings listed above. The remaining four percent of the sample included members whose tasks were so unique that they were not included in any identifiable job group.

Brief descriptions of each of these primary job clusters will be discussed below, followed by a description of the primary job types which combine to form the cluster.

The relative percent of time spent on each duty by each of the primary clusters is shown in Table 4, followed by background information for each of these groups shown in Table 5. Table 6 shows the perceptions of each of these groups in terms of how interesting they find their job, the degree to which they perceive that their talents and training are being used, and whether or not they intend to reenlist.

Primary Job Cluster Descriptions

I. MEDICAL SERVICE PERSONNEL (GP0029). This group of 729 individuals clustered together on the basis of the similarity of tasks performed in providing technical nursing care and treatment to patients within a variety of inpatient and outpatient medical care facilities. Although these services are provided in a number of different kinds and sizes of facilities as further described below, there are a number of common tasks performed by large percentages of these personnel regardless of their organizational assignment. Typically these tasks include taking and recording blood pressure, temperature, radial pulse, and respiration rate; answering patient inquiries; preparing or annotating various medical forms and records; cleaning patient care areas; changing dressings; and moving or transporting patients. Within this cluster, individuals were further divided into four distinct job types as listed below.

A. Emergency Room/Primary Patient Care Personnel (GP0088 N=255)

B. Ward Personnel (GP0064 N=285)

C. Clinic Personnel (GP0037 N=152)

D. Aeromedical Evacuation Personnel (GP0124 N=24)

The relative percent time spent on duties for each of these groups is presented in Table 7. Background information is shown in Table 8 while responses to job satisfaction and utilization of talents and training are summarized in Table 9.

A. Emergency Room/Primary Patient Care Personnel (GP0088). This group is composed of personnel from the Medical Service career ladder (902X0) who perform a variety of tasks involving emergency or primary care of essentially outpatient personnel. A majority of these personnel work in emergency rooms; however, a few report that they work in primary patient care clinics. Another small group serves as independent duty technicians at radar sites or other isolated locations where the services of a physician are not readily available. In addition to taking and recording vital signs of patients, almost all of these personnel answer patient inquiries on the telephone, annotate patient treatment records, and perform a number of relatively simple medical procedures such as suture lacerations and remove sutures, give local anesthetic, administer intramuscular injections, dispense medications, apply elastic bandages, change dressings etc. In addition, a majority load or unload ambulance patients, move or transport patients, clean patient care areas, and prepare or maintain a variety of standard forms and/or records relative to patient care or treatment.

Personnel in this group perform an average of 164 tasks. Approximately two thirds of this group are assigned to 5-skill level positions while the remainder serve in 7-skill level positions, normally as shift supervisors in emergency rooms or as independent duty technicians. Personnel in this group average over seven years of service; however, 37 percent are in their first enlistment. Generally these personnel rated their job interest and utilization of talents and training higher than personnel in the Ward Personnel (GP0064) and Clinic Personnel (GP0037) groups. Job interest was slightly lower than that of the Aeromedical Evacuation (GP0124) group; however, utilization of talents and training were relatively equal for these two groups.

B. Ward Personnel (GP0064). Personnel within this group work in a variety of jobs; however, all are concerned with the care and treatment of patients who are confined to the hospital. In addition to tasks relating to taking and recording vital signs, personnel in this group typically administer bedpans or urinals, admit or orient patients to wards, clean ward utility areas, serve nourishment to patients, apply heat by K-pads, prepare oxygen equipment, and bathe adults or infants. Approximately one fourth of the personnel in this group, in addition to performing many of the nursing tasks, also perform first level supervisory tasks. These personnel are normally NCOICs of wards or nursing units. Personnel from this group average 58 months service with 63 percent of the group in their first enlistment. Although these personnel have the lowest average time in service of all groups identified in the survey, they perform an average of 180 tasks, somewhat more than any other group identified in the job type analysis.

C. Clinic Personnel (GP0037). Characteristically the members of this group work in physical examination facilities or clinics and provide medical service to outpatients. Personnel in this cluster typically answer patient inquiries on the telephone, schedule appointments, explain medical facilities to patients, and prepare and/or maintain a variety of patient records and miscellaneous forms. In addition

they prepare requests for various laboratory procedures, act as chaperons, and assist physicians in various examinations or procedures.

The primary differences between tasks performed by members of this group and the Emergency Room/Primary Patient Care group is that Clinic personnel perform few emergency treatment tasks such as suture lacerations or remove sutures, give local anesthesia, load or unload ambulance patients, and/or administer primary care at the scene of accidents. The Clinic jobs differ from Ward personnel in that Clinic personnel perform few tasks relative to caring for patients confined to hospitals.

On the average, personnel assigned to clinic positions perform only 76 tasks, less than half the average number of tasks performed by either the Emergency Room/Primary Patient Care or Ward personnel. Clinic personnel, however, average 12 months more time in service than Ward personnel but 18 months less than the Emergency Room/Primary Care job group.

D. Aeromedical Evacuation Personnel (GP0124). The fourth job group within this cluster included airmen who were assigned to aeromedical evacuation teams in MAC. Typically these personnel were in their second or third enlistment and had an average of over 70 months experience in their DAFSC, considerably more than any other group in this cluster. All of these personnel performed such tasks as enplane or deplane patients and baggage, obtain medical supplies or equipment for air evacuation, secure or tie down medical equipment on aircraft, and perform patient in-flight care. One-third of this group, in addition to performing the above tasks, also instruct in aeromedical procedures and practices.

II. ALLERGY/IMMUNOLOGY PERSONNEL (GP0050). This cluster includes 95 percent of the Allergy/Immunology (912X4) personnel who responded to the survey. Typically personnel in this cluster perform an average of 128 tasks and spend an average of 47 percent of their work time on tasks within the duties of preparing for and administering injections, preparing allergy extracts or kits, and performing allergy tests and procedures. Most of the remaining work time is devoted to tasks from the duties of performing administrative or material procedures, performing nursing procedures, or assisting physicians in diagnosis or treatment, and supervisory duties including organizing and planning, directing and implementing, inspecting and evaluating, and training.

Ninety percent or more of these personnel administer subcutaneous, intramuscular, and intradermal injections; administer smallpox vaccinations using scratch techniques; counsel patients on routine immunization procedures or effects; pull or annotate immunization cards; administer, interpret, and record results of protein purified derivative (PPD) and monovac tests; maintain patient allergy record files, and prepare medications for injection.

Since the Allergy/Immunology career ladder is a lateral ladder requiring qualification as a Medical Service specialist for entrance, personnel in this group have a much higher average time in service than those in the Medical Service cluster. This accounts for the fact that this group averages over 10 years active military service.

Within this cluster, personnel were further divided into two job groups.

A. Immunology Personnel (GP0178 N=36)

B. Allergy/Immunology Personnel (GP0173, N=94)

The relative time spent on duties for each of these groups are presented in Table 10. Background information is shown in Table 11 while responses to job satisfaction, utilization of talents and training, and reenlistment intention questions are shown in Table 12.

A. Immunology Personnel (GP0178). This group of Allergy/Immunology personnel are primarily engaged in administering immunizations. Although most of these individuals perform a few tasks in support of allergy diagnosis and treatment, this function is only a minor part of the overall job of this group. Typically these personnel initiate, annotate, or process immunization records; administer oral vaccines and intramuscular, subcutaneous, and intradermal injections; administer smallpox vaccinations using scratch techniques; administer protein purified derivative (PPD) and monovac tests and record results; prepare medications for injection; answer patient questions; and counsel on routine immunization procedures or effects. Three-fourths or more of this group also prepare and maintain patient allergy records and determine specific dosage for allergy patients. However, as a group, these personnel spend a majority of their time performing tasks relative to the immunology program.

B. Allergy/Immunology Personnel (GP0173). This group performs the same immunology tasks as personnel in IIA above. In addition, almost all of these personnel also perform a number of tasks in support of the allergy program. For example, over 70 percent of the members of this group perform such tasks as prepare syringe tray for intradermal tests; assemble allergy extract kits; administer, interpret, and record results of scratch tests; issue allergy extract kits; assign number and log allergy extract prescriptions; and maintain outpatient appointment book. These tasks are performed by 25 percent or less of the members of the immunology group. Additionally, approximately half of this group serve as NCOICs of allergy/immunology functions and are performing a number of supervisory tasks not common to the immunology group.

III. SUPERVISION, MANAGEMENT, AND TRAINING PERSONNEL (GP0013). This cluster includes personnel who serve either as supervisors of Medical Service or Allergy/Immunology functions or as instructors or instructor supervisors in Medical Service or Allergy/Immunology

training programs. As shown in Table 4, almost all of the work time of this cluster is devoted to performance of tasks relative to supervision, management, training, and administration, with less than 10 percent of their time devoted to performance of technical functions. Personnel in this cluster were divided into two essentially different kinds of jobs.

A. Training Personnel (GP0034 N=11)

B. Supervisors/Managers (GP0032 N=39)

The relative time spent on duties for each of these groups are presented in Table 13. Background information is shown in Table 14 while responses to job satisfaction, utilization of talents and training, and reenlistment intention questions are shown in Table 15.

A. Training Personnel (GP0034). As shown in Table 13, 65 percent of the relative percent time spent by this group was devoted to tasks within the training duty. The majority of these personnel were 7-skill level Medical Service personnel. Only one of the 11 members of this group was from the Allergy/Immunology (912X4) career ladder. Typically these personnel performed an average of only 28 tasks. Job interest and perceived utilization of talents and training were very high; however, approximately one-third indicated that they probably would not reenlist.

Although members of this group were engaged in some type of formal training, the individual jobs varied considerably. Individuals reported various assignments such as instructor, Medical Service Specialist course; NCOIC, Hospital Education Service; medical trainer; and superintendent of inservice training. In view of the varying assignments, tasks performed were also varied with only eight tasks performed by 80 percent or more of the respondents. These tasks included preparing or revising lesson plans; conducting formal classroom training; preparing test items; administering and scoring tests; performing emergency medical training, such as first aid and cardiopulmonary resuscitation; constructing or developing training materials; and obtaining training aids, space, or equipment.

B. Supervisors/Managers (GP0034). This group included both the 91295 superintendents and 70 percent of the 90292 superintendents who responded to the inventory. Most of the remaining members of this group were 7-skill level personnel from the Medical Service ladder (902X0). As shown in Table 13, approximately 95 percent of the relative time of this group is spent on tasks from the supervision and administration duties. Although tasks performed varied somewhat due to the variety of supervisory and managerial positions held by these personnel, there were 13 tasks which were common to 80 percent or more of this group. Examples of these tasks included developing or improving work methods or procedures, counseling subordinates on military or personal problems, coordinating work activities with other sections, establishing work priorities, advising subordinates on resolution of technical problems, and determining personnel requirements.

Summary

Based on the technical tasks performed by each of the specialties, distinct differences were found between the 902X0 and 912X4 career ladders. Personnel responding to the survey grouped by AFSC, with one group being composed exclusively of Medical Service personnel (AFSC 902X0) while a second group included only members of the Allergy/Immunology ladder. Only one group of supervisory, management, or training personnel contains members from both career ladders. Thus, the survey data supports keeping the two career ladders separate and distinct.

Since the ladders were distinct, a review of the tasks performed by members of each specialty by skill level was appropriate. This comparison of skill level groups for each ladder permits a comprehensive review of career ladder documents such as the AFR 39-1 specialty descriptions and the Specialty Training Standard.

TABLE 4

RELATIVE PERCENT TIME SPENT ON DUTIES BY PRIMARY JOB CLUSTERS

DUTIES	MEDICAL SERVICE PERSONNEL (N=729)	ALLERGY/ IMMUNOLOGY PERSONNEL (N=136)	SUPERVISION, MANAGEMENT, AND TRAINING PERSONNEL (N=60)
SUPERVISORY AND MANAGEMENT FUNCTIONS			
A. ORGANIZING AND PLANNING	4	6	24
B. DIRECTING AND IMPLEMENTING	3	4	18
C. INSPECTING AND EVALUATING	3	3	17
D. TRAINING	3	3	19
ADMINISTRATIVE FUNCTIONS			
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	21	19	15
TECHNICAL FUNCTIONS			
F. PREPARING FOR NURSING PROCEDURES	10	1	1
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIAN IN DIAGNOSIS OR TREATMENTS	36	15	2
H. PREPARING FOR AND ADMINISTERING INJECTIONS	4	32	1
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	7	1	1
J. PERFORMING WARD SERVICES	4	*	*
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	2	*	*
L. PERFORMING ALLERGY TESTS AND PROCEDURES	1	7	*
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	2	1	1
N. PREPARING ALLERGY EXTRACTS OR KITS	*	8	*

* LESS THAN 1%

TABLE 5

BACKGROUND INFORMATION BY PRIMARY JOB CLUSTERS

	MEDICAL SERVICE PERSONNEL	ALLERGY/ IMMUNOLOGY PERSONNEL	SUPERVISION, MANAGEMENT, AND TRAINING PERSONNEL
AVERAGE NUMBER OF TASKS PERFORMED	129	128	60
AVERAGE PAY GRADE	4	5	7
PERCENT MEMBERS WHO SUPERVISE	30%	33%	55%
PERCENT ASSIGNED OVERSEAS	24%	14%	28%
DAFSC			
90230	3%	0	0
90250	72%	3%	15%
90270	24%	2%	44%
90292	1%	0	30%
91234	*	55%	0
91274	*	40%	3%
91295	0	0	3%
DAFSC NOT SPECIFIED	0	0	5%
AVERAGE MONTHS IN CAREER LADDER	62	64	178
AVERAGE MONTHS TAFMS	73	123	210
PERCENT IN FIRST ENLISTMENT	55%	42%	18%

* LESS THAN 1%

TABLE 6

JOB INTEREST AND RELATED DATA BY PRIMARY JOB CLUSTERS
(PERCENT RESPONDING)

	MEDICAL SERVICE PERSONNEL	ALLERGY/ IMMUNOLOGY PERSONNEL	SUPERVISION, MANAGEMENT, AND TRAINING PERSONNEL
I FIND MY JOB:			
NO RESPONSE	1	1	1
DULL	10	13	5
SO-SO	15	13	2
INTERESTING	74	73	92
MY JOB UTILIZES MY TALENTS:			
NO RESPONSE	1	0	7
NOT AT ALL TO VERY LITTLE	24	28	10
FAIRLY WELL TO VERY WELL	65	62	45
EXCELLENTLY TO PERFECTLY	10	10	38
MY JOB UTILIZES MY TRAINING:			
NO RESPONSE	1	0	2
NOT AT ALL TO VERY LITTLE	24	26	13
FAIRLY WELL TO VERY WELL	63	61	43
EXCELLENTLY TO PERFECTLY	12	13	42
I PLAN TO REENLIST:			
NO RESPONSE	1	1	2
NO	27	15	30
PROBABLY NO	18	10	13
PROBABLY YES	22	26	18
YES	32	48	37

TABLE 7

RELATIVE PERCENT TIME SPENT ON DUTIES BY JOB TYPE GROUPS
WITHIN THE MEDICAL SERVICE PERSONNEL CLUSTER

DUTIES	EMERGENCY ROOM/PRIMARY PATIENT CARE PERSONNEL (N=255)	WARD PERSONNEL (N=285)	CLINIC PERSONNEL (N=152)	AEROMEDICAL EVACUATION PERSONNEL (N=24)
SUPERVISORY AND MANAGEMENT FUNCTIONS				
A. ORGANIZING AND PLANNING	3	3	5	4
B. DIRECTING AND IMPLEMENTING	3	3	4	3
C. INSPECTING AND EVALUATING	3	3	3	5
D. TRAINING	3	3	2	7
ADMINISTRATIVE FUNCTIONS				
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	20	13	44	3
TECHNICAL FUNCTIONS				
F. PREPARING FOR NURSING PROCEDURES	9	13	7	7
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	33	45	24	31
H. PREPARING FOR AND ADMINISTERING INJECTIONS	6	3	4	2
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	14	2	5	3
J. PERFORMING WARD SERVICES	1	9	*	2
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	1	1	*	33
L. PREFORMING ALLERGY TESTS AND PROCEDURES	*	1	1	*
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	4	1	1	*
N. PREPARING ALLERGY EXTRACTS OR KITS	*	*	0	0

* LESS THAN 1%

TABLE 8

BACKGROUND INFORMATION BY JOB TYPE GROUPS WITHIN THE MEDICAL SERVICE PERSONNEL CLUSTER

	EMERGENCY ROOM/PRIMARY PATIENT CARE PERSONNEL (N=255)	WARD PERSONNEL (N=285)	CLINIC PERSONNEL (N=152)	AEROMEDICAL EVACUATION PERSONNEL N=24)
AVERAGE NUMBER OF TASKS PERFORMED	164	180	76	102
AVERAGE PAY GRADE	5	4	4	5
PERCENT MEMBERS WHO SUPERVISE	37%	26%	24%	50%
PERCENT ASSIGNED OVERSEAS	24%	21%	20%	67%
DAFSC				
90230	1%	5%	3%	0%
90250	64%	77%	80%	58%
90270	33%	18%	17%	42%
90292	1%	*	0	0
91234	0	*	0	0
91274	*	0	0	0
91295	0	0	0	0
OTHER	0	0	0	0
AVERAGE MONTHS IN CAREER LADDER	76	49	55	102
AVERAGE MONTHS TAFMS	88	58	70	102
PERCENT IN FIRST ENLISTMENT	37%	63%	47%	8%

* LESS THAN 1%

TABLE 9

JOB INTEREST AND RELATED DATA BY JOB TYPE GROUPS WITHIN THE MEDICAL SERVICE PERSONNEL CLUSTER
(PERCENT RESPONDING)

	EMERGENCY ROOM/PRIMARY PATIENT CARE PERSONNEL	WARD PERSONNEL	CLINIC PERSONNEL	AEROMEDICAL EVACUATION PERSONNEL
I FIND MY JOB:				
NO RESPONSE	1	1	0	0
DULL	7	13	12	4
SO-SO	13	17	19	4
INTERESTING	79	69	69	92
MY JOB UTILIZES MY TALENTS:				
NO RESPONSE	1	1	1	0
NOT AT ALL TO VERY LITTLE	17	26	31	21
FAIRLY WELL TO VERY WELL	68	65	59	62
EXCELLENTLY TO PERFECTLY	14	8	9	17
MY JOB UTILIZES MY TRAINING:				
NO RESPONSE	*	1	2	0
NOT AT ALL TO VERY LITTLE	20	22	33	17
FAIRLY WELL TO VERY WELL	65	65	58	62
EXCELLENTLY TO PERFECTLY	15	12	7	21
I PLAN TO REENLIST:				
NO RESPONSE	1	2	2	4
NO	24	30	30	4
PROBABLY NO	17	19	16	8
PROBABLY YES	24	23	17	17
YES	34	26	35	67

TABLE 10

RELATIVE PERCENT TIME SPENT ON DUTIES BY JOB TYPE GROUPS WITHIN THE ALLERGY/IMMUNOLOGY CLUSTER

DUTIES	IMMUNOLOGY PERSONNEL (N=36)	ALLERGY/IMMUNOLOGY PERSONNEL (N=94)
SUPERVISORY AND MANAGEMENT FUNCTIONS		
A. ORGANIZING AND PLANNING	5	6
B. DIRECTING AND IMPLEMENTING	4	4
C. INSPECTING AND EVALUATING	2	4
D. TRAINING	1	3
ADMINISTRATIVE FUNCTIONS		
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	19	19
TECHNICAL FUNCTIONS		
F. PREPARING FOR NURSING PROCEDURES	1	1
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	13	16
H. PREPARING FOR AND ADMINISTERING INJECTIONS	46	27
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	1	1
J. PERFORMING WARD SERVICES	0	*
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	*	*
L. PERFORMING ALLERGY TESTS AND PROCEDURES	3	9
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	1	1
N. PREPARING ALLERGY EXTRACTS OR KITS	4	9

* LESS THAN 1%

TABLE 11

BACKGROUND INFORMATION BY JOB TYPE GROUPS WITHIN THE ALLERGY/IMMUNOLOGY CLUSTER

	IMMUNOLOGY PERSONNEL (N=36)	ALLERGY/IMMUNOLOGY PERSONNEL (N=94)
AVERAGE NUMBER OF TASKS PERFORMED	73	154
AVERAGE PAY GRADE	5	5
PERCENT MEMBERS WHO SUPERVISE	21%	43%
PERCENT ASSIGNED OVERSEAS	22%	11%
DAFSC		
90230	0	0
90250	3%	2%
90270	3%	0
90292	0	0
91234	55%	55%
91274	39%	42%
91295	0	0
OTHER	0	1%
AVERAGE MONTHS IN CAREER LADDER	59	65
AVERAGE MONTHS TAFMS	120	125
PERCENT IN FIRST ENLISTMENT	8%	3%

TABLE 12

JOB INTEREST AND RELATED DATA BY JOB TYPE GROUPS WITHIN THE ALLERGY/IMMUNOLOGY CLUSTER
(PERCENT RESPONDING)

	IMMUNOLOGY PERSONNEL	ALLERGY/IMMUNOLOGY PERSONNEL
I FIND MY JOB:		
NO RESPONSE	3	0
DULL	22	10
SO-SO	22	8
INTERESTING	53	82
MY JOB UTILIZES MY TALENTS:		
NO RESPONSE	0	0
NOT AT ALL TO VERY LITTLE	53	18
FAIRLY WELL TO VERY WELL	41	69
EXCELLENTLY TO PERFECTLY	6	13
MY JOB UTILIZES MY TRAINING:		
NO RESPONSE	0	0
NOT AT ALL TO VERY LITTLE	56	15
FAIRLY WELL TO VERY WELL	39	69
EXCELLENTLY TO PERFECTLY	5	16
I PLAN TO REENLIST:		
NO RESPONSE	3	0
NO	14	15
PROBABLY NO	14	9
PROBABLY YES	28	25
YES	41	51

TABLE 13

RELATIVE PERCENT TIME SPENT ON DUTIES BY JOB GROUPS WITHIN THE SUPERVISION, MANAGEMENT, AND TRAINING CLUSTER

DUTIES	TRAINING PERSONNEL (N=11)	SUPERVISORS/ MANAGERS (N=39)
SUPERVISORY AND MANAGEMENT FUNCTIONS		
A. ORGANIZING AND PLANNING	15	25
B. DIRECTING AND IMPLEMENTING	9	21
C. INSPECTING AND EVALUATING	3	22
D. TRAINING	65	11
ADMINISTRATIVE FUNCTIONS		
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	8	16
TECHNICAL FUNCTIONS		
F. PREPARING FOR NURSING PROCEDURES	0	*
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	0	2
H. PREPARING FOR AND ADMINISTERING INJECTIONS	*	2
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	*	1
J. PERFORMING WARD SERVICES	0	*
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	*	*
L. PERFORMING ALLERGY TESTS AND PROCEDURES	0	*
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	0	*
N. PREPARING ALLERGY EXTRACTS OR KITS	0	0

* LESS THAN 1%

TABLE 14

BACKGROUND INFORMATION BY JOB GROUPS WITHIN THE SUPERVISION, MANAGEMENT, AND TRAINING CLUSTER

	TRAINING PERSONNEL	SUPERVISORS/ MANAGERS
AVERAGE NUMBER OF TASKS PERFORMED	28	76
AVERAGE PAY GRADE	6	7
PERCENT MEMBERS WHO SUPERVISE	9%	69%
PERCENT ASSIGNED OVERSEAS	36%	31%
DAFSC		
90230	0	0
90250	27%	5%
90270	55%	44%
90292	9%	41%
91234	0	0
91274	9%	3%
91295	0	5%
OTHER	0	2%
AVERAGE MONTHS IN CAREER LADDER	126	210
AVERAGE MONTHS TAFMS	161	241
PERCENT IN FIRST ENLISTMENT	27%	8%

TABLE 15

JOB INTEREST AND RELATED DATA BY JOB GROUPS WITHIN THE SUPERVISION, MANAGEMENT, AND TRAINING CLUSTER
(PERCENT RESPONDING)

	TRAINING PERSONNEL	SUPERVISORS/ MANAGERS
I FIND MY JOB:		
NO RESPONSE	0	3
DULL	9	0
SO-SO	9	0
INTERESTING	82	97
MY JOB UTILIZES MY TALENTS:		
NO RESPONSE	9	5
NOT AT ALL TO VERY LITTLE	9	5
FAIRLY WELL TO VERY WELL	36	44
EXCELLENTLY TO PERFECTLY	46	46
MY JOB UTILIZES MY TRAINING:		
NO RESPONSE	0	3
NOT AT ALL TO VERY LITTLE	9	8
FAIRLY WELL TO VERY WELL	45	31
EXCELLENTLY TO PERFECTLY	46	48
I PLAN TO REENLIST:		
NO RESPONSE	0	0
NO	27	31
PROBABLY NO	9	13
PROBABLY YES	18	15
YES	46	41

ANALYSIS OF CAREER LADDER AND DAFSC GROUPS

In addition to examining the job structure of the Medical Service and Allergy/Immunology career ladders, tasks performed were also examined based upon the career ladder and skill level assignments of survey respondents. This provided an additional comparison of similarities or differences between tasks performed by personnel in each ladder as well as differences between tasks performed by personnel at the different skill levels within each ladder.

Career Ladder Comparisons

Comparisons of time spent on duties by members of each of these two career ladders are shown on Table 16. Personnel from both ladders spend 36 percent of their time on tasks relating to supervision, management, and administrative/materiel functions (Duties A through E).

The most time consuming tasks performed by Medical Service specialists (AFS 902X0) were related to performing nursing procedures or assisting physicians in diagnosis or treatments (Duty G). Tasks within this duty occupied 35 percent of the 902X0 incumbent's time, compared to only 15 percent for Allergy/Immunology personnel. The most time consuming tasks for Allergy/ Immunology personnel (AFS 912X4) were related to preparing for and administering injections (Duty H). Tasks within this duty consumed 31 percent of the 912X4's time but only four percent of the 902X0's time. Other differences in time spent were in performing allergy tests and procedures (Duty L) and preparing allergy extracts or kits (Duty N), with both duties occupying 14 percent of the Allergy/Immunology personnel's time but less than one percent of the time of Medical Service specialists. In addition, 902X0 personnel spent 10 percent of their time on tasks in duty F, preparing for nursing procedures, while 912X4 airmen spent only one percent of their time on these functions.

Additional emphasis on differences between jobs characteristic of each of these two career ladders may be better illustrated by Table 17 which shows a number of representative tasks which best differentiate between the kinds of jobs performed by 902X0 and 912X4 personnel. There were only 28 tasks within the technical duties F through N that were performed by 30 percent or more of each career ladder group. These were all of a general nature or related to emergency care or treatment of patients such as prepare oxygen equipment; take or record blood pressure, radial pulse, respiration rate, and temperature; administer interdermal, intramuscular, or subcutaneous injections; administer oral medications; or set up intravenous equipment. Job interest and perceived utilization of talents and training and reenlistment intentions of these two groups are shown in Table 18.

Comparison of duties and tasks performed by members of the Medical Service career ladder and the Allergy/Immunology ladder show distinct differences in the kinds of jobs performed within each ladder. Medical Service personnel perform a number of tasks pertaining to patient care and treatment in a variety of medical care and treatment facilities. Allergy/Immunology personnel, on the other hand, perform tasks directly associated with Allergy/Immunology programs. Only a small number of general medical care tasks were common to both groups.

This difference between jobs performed by members of these two ladders was further illustrated by the distinct separation of Allergy/ Immunology personnel from Medical Service personnel as discussed in the CAREER LADDER STRUCTURE section of this report.

TABLE 16

COMPARISON OF PERCENT TIME SPENT ON DUTIES BY
MEDICAL SERVICE PERSONNEL (902X0) AND ALLERGY/IMMUNOLOGY PERSONNEL (912X4)

DUTIES	AFSC 912X0 (N=793)	AFSC 912X4 (N=137)
SUPERVISORY AND MANAGEMENT FUNCTIONS		
A. ORGANIZING AND PLANNING	5	6
B. DIRECTING AND IMPLEMENTING	3	4
C. INSPECTING AND EVALUATING	4	4
D. TRAINING	3	3
ADMINISTRATIVE AND MANAGEMENT FUNCTIONS		
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	21	19
TECHNICAL FUNCTIONS		
F. PREPARING FOR NURSING PROCEDURES	10	1
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	35	15
H. PREPARING FOR AND ADMINISTERING INJECTIONS	4	31
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	7	1
J. PERFORMING WARD SERVICES	4	*
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	2	*
L. PERFORMING ALLERGY TESTS AND PROCEDURES	*	7
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	2	1
N. PREPARING ALLERGY EXTRACTS OR KITS	*	7

* LESS THAN 1%

TABLE 17

REPRESENTATIVE TASKS WHICH BEST DIFFERENTIATE BETWEEN
DAFSC 902X0 AND DAFSC 912X4 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS		DAFSC 902X0	DAFSC 912X4	DIFFERENCE
G 277	CHANGE DRESSINGS	67	8	+59
G 323	OBTAIN URINE OR FECES SPECIMENS	64	5	+59
G 346	RUN ELECTROCARDIOGRAPH (EKG) TRACINGS	66	11	+55
G 336	PERFORM URINE TEST FOR SUGAR AND ACETONE	57	4	+53
G 252	APPLY ELASTIC BANDAGES	58	7	+51
F 216	SET UP OR PREPARE EQUIPMENT FOR CATHETERIZATION	58	7	+51
G 221	ADMINISTER BED PANS OR URINALS	54	4	+50
F 173	PREPARE COLD COMPRESSES	61	12	+49
G 242	APPLY ARM SLING BANDAGES	55	7	+48
F 199	PREPARE WOUND IRRIGATIONS	54	7	+47
H 385	PULL OR ANNOTATE IMMUNIZATION CARDS FROM CARD DECKS	9	94	-85
H 370	COMPARE INDIVIDUAL INTERNATIONAL CERTIFICATES OF VACCINATIONS FORMS WITH IMMUNIZATION CARD DECKS OR PRINTOUTS	8	93	-85
H 380	INTERPRET RESULTS OF PPD TESTS	12	96	-84
H 379	INTERPRET RESULTS OF MONOVAC TESTS	9	91	-82
H 388	RECORD RESULTS OF MONOVAC TESTS	9	91	-82
H 371	COORDINATE WITH CBPO ON PROBLEMS REGARDING IMMUNIZATION CARD DECKS OR MACHINE PRINTOUTS	7	88	-82
N 562	INSTRUCT PATIENTS ON PROPER CARE OF ALLERGY EXTRACTS	0	79	-79
G 282	COUNSEL PATIENTS ON ALLERGY INJECTION PROGRAMS	6	85	-79
H 368	ANNOTATE OR UPDATE IMMUNIZATION ROSTER MACHINE PRINTOUTS	7	84	-77
G 283	DETERMINE SPECIFIC DOSAGE FOR ALLERGY PATIENTS	5	80	-75

TABLE 18

JOB INTEREST AND RELATED DATA BY CAREER LADDER GROUPS
(PERCENT RESPONDING)

	902X0	912X4
I FIND MY JOB:		
NO RESPONSE	1	1
DULL	11	12
SO-SO	15	12
INTERESTING	73	75
MY JOB UTILIZES MY TALENTS:		
NO RESPONSE	1	0
NOT AT ALL TO VERY LITTLE	24	26
FAIRLY WELL TO VERY WELL	64	62
EXCELLENTLY TO PERFECTLY	11	12
MY JOB UTILIZES MY TRAINING:		
NO RESPONSE	1	0
NOT AT ALL TO VERY LITTLE	24	25
FAIRLY WELL TO VERY WELL	63	62
EXCELLENTLY TO PERFECTLY	12	13
I PLAN TO REENLIST:		
NO RESPONSE	2	2
NO	27	15
PROBABLY NO	18	11
PROBABLY YES	21	25
YES	32	47

AFS 902X0/90292 Skill Level Groups

Only 23 survey respondents were assigned to 3-skill level duty positions in the 902X0 career ladder. These individuals performed an average of 92 of the 573 tasks in the inventory. Table 19 shows that 97 percent of the relative time spent by members of this group was devoted to performance of technical or administrative functions. A majority of these individuals (approximately 65 percent) worked in ward type assignments (see CAREER LADDER STRUCTURE section of this report); however, only 21 tasks were performed by 60 percent or more of these personnel indicating somewhat heterogeneous work assignments.

The most commonly performed tasks include taking and recording blood pressure, temperatures, body weight, radial pulse, and respiration rates; cleaning patient care areas; identifying problems or needs of patients; administering bed pans or urinals; preparing and administering enemas; and performing other routine patient assistance or patient care tasks as shown on Table 20.

Airmen at the 5-skill level perform an average of 137 tasks, with only 33 of these tasks performed by 60 percent or more of the group. These personnel work in all of the job types shown in the CAREER LADDER STRUCTURE section. Much of the time of the members of this skill level is devoted to such functions as preparing for and performing nursing procedures, assisting physicians in diagnosis or treatment, and performing administrative or materiel functions (see Table 19). Many of the tasks performed by 5-skill level personnel (see Table 21) are the same as those performed by 3-skill level apprentices. Higher percentages of the 5-skill level airmen, however, perform emergency treatment of patients and work in special treatment areas requiring specialized skills such as removing sutures, applying arm sling bandages, fabricating casts, preparing medications for injections, and applying plaster splints (see Table 22).

At the 7-skill level, supervisory and management tasks become an important part of the job, occupying approximately 30 percent of the total work time. Seventy-four percent indicate that they supervise one or more employees. Even so, these personnel also continue to perform essentially the same technical tasks as those characteristic of the 3- and 5-skill level personnel that they supervise. Table 23 shows some of the tasks which are most representative of those performed by 7-skill level technicians while Table 24 shows those tasks which best represent the differences between the 5- and 7-skill level groups.

DAFSC 90292 Superintendents include personnel from either the Medical Service ladder (902X0) or the Operating Room career ladder (902X2). Instructions within the inventory limited responses from superintendents to those who supervise medical service personnel (902X0). In general, superintendents within this ladder are primarily managers. Although a few technical task are performed by some of these personnel, none were performed by as many as 30 percent of the

total group. Representative supervisory and managerial tasks performed by these superintendents are shown on Table 25. Differences in tasks performed between Medical Service Technicians (90270) and Medical Service Superintendents (90292) are reflected in Table 26. To emphasize the differences between these two groups, technical tasks are included in the first half of the table followed by supervisory and managerial tasks.

Summary

Medical service personnel are heterogeneous in terms of tasks performed due to the variety of patient care and treatment facilities in which they work. Common to all groups, however, is the basic knowledges and skills associated with the care and treatment of medical patients. Skill level differentiation follows the normal pattern of progression found in most career ladders, with 3-skill level personnel performing a limited number of the most routine and less difficult tasks while 5-skill level personnel perform these same tasks and also the more complex tasks of the ladder. Personnel at the 7-skill level in this ladder characteristically perform a number of supervisory tasks and in addition perform many of the more complex patient care and treatment tasks.

As shown in Table 27, high percentages of each skill level in this career ladder find their job interesting and feel that their talents and training are used fairly well or better. Only 35 percent of 3-skill level personnel indicated that they would or probably would reenlist. This increased to 48 percent for the 5-skill level and 71 percent for the 7-skill level.

TABLE 19

PERCENT TIME SPENT ON DUTIES BY SKILL-LEVEL GROUPS WITHIN THE MEDICAL SERVICE CAREER LADDER (902X0)

DUTIES	90230 (N=23)	90250 (N=565)	90270 (N=205)
SUPERVISORY AND MANAGEMENT FUNCTIONS			
A. ORGANIZING AND PLANNING	2	3	9
B. DIRECTING AND IMPLEMENTING	1	2	6
C. INSPECTING AND EVALUATING	*	2	7
D. TRAINING	*	2	7
ADMINISTRATIVE FUNCTIONS			
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	19	21	27
TECHNICAL FUNCTIONS			
F. PREPARING FOR NURSING PROCEDURES	13	11	6
G. PREFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	48	38	24
H. PREPARING FOR AND ADMINISTERING INJECTIONS	4	4	4
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	3	7	7
J. PERFORMING WARD SERVICES	1	4	2
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	2	2	2
L. PEFORMING ALLERGY TESTS AND PROCEDURES	*	*	*
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	1	1	3
N. PREPARING ALLERGY EXTRACTS OR KITS	0	*	*

* LESS THAN 1%

TABLE 20

REPRESENTATIVE TASKS PERFORMED BY DAFSC 90230 PERSONNEL

TASKS		PERCENT MEMBERS PERFORMING
G 349	TAKE OR RECORD BLOOD PRESSURES	83
G 353	TAKE OR RECORD TEMPERATURES	83
G 350	TAKE OR RECORD BODY WEIGHT	83
G 351	TAKE OR RECORD RADIAL PULSE	78
G 297	IDENTIFY PROBLEMS OR NEEDS OR PATIENTS	78
G 352	TAKE OR RECORD RESPIRATIONS RATE	74
G 278	CLEAN PATIENT CARE AREAS	74
G 287	EXPLAIN TREATMENT OR SELF-CARE TO PATIENTS	74
F 177	PREPARE ENEMAS	70
G 225	ADMINISTER ENEMAS	70
G 221	ADMINISTER BED PANS OR URINALS	65
G 336	PERFORM URINE TEST FOR SUGAR AND ACETONE	61
G 323	OBTAIN URINE OR FECES SPECIMENS	61
E 110	EXPLAIN MEDICAL FACILITY POLICIES TO PATIENTS	61
G 277	CHANGE DRESSINGS	61

TABLE 21

REPRESENTATIVE TASKS PERFORMED BY DAFSC 90250 PERSONNEL

TASKS		PERCENT MEMBERS PERFORMING
G 349	TAKE OR RECORD BLOOD PRESSURES	91
G 353	TAKE OR RECORD TEMPERATURES	88
G 351	TAKE OR RECORD RADIAL PULSE	85
G 352	TAKE OR RECORD RESPIRATIONS RATE	84
G 350	TAKE OR RECORD BODY WEIGHT	76
E 104	ANSWER PATIENT INQUIRIES ON THE TELEPHONE	75
E 157	PREPARE URINALYSIS FORMS (SF 550)	76
E 110	EXPLAIN MEDICAL FACILITY POLICIES TO PATIENTS	73
G 278	CLEAN PATIENT CARE AREAS	72
E 144	PREPARE MICROBIOLOGY I FORMS (SF 553)	72
E 128	PREPARE CHEMISTRY I FORMS (SF 546)	71
G 287	EXPLAIN TREATMENT OR SELF-CARE TO PATIENTS	70
H 359	ADMINISTER INTRAMUSCULAR INJECTIONS	69
G 297	IDENTIFY PROBLEMS OR NEEDS OF PATIENTS	68
F 173	PREPARE COLD COMPRESSES	64
F 167	ATTACH CARDIAC MONITORING LEADS TO PATIENTS	61
G 336	PERFORM URINE TEST FOR SUGAR AND ACETONE	60

TABLE 22

TASKS WHICH BEST DIFFERENTIATE BETWEEN DAFSC 90230 AND DAFSC 90250 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASK		DAFSC 90230	DAFSC 90250	DIFFERENCE
I 415	REMOVE SUTURES	13	48	-35
C 70	INVENTORY EQUIPMENT OR SUPPLIES	13	47	-34
G 242	APPLY ARM SLING BANDAGES	22	56	-34
D 80	CONDUCT ON-THE-JOB TRAINING (OJT)	9	42	-33
F 194	PREPARE PLASTER OF PARIS, COTTON, OR OTHER MATERIALS FOR FABRICATION OF CASTS	4	36	-32
I 405	DRIVE AMBULANCES	4	35	-31
I 392	ADMINISTER PRIMARY CARE AT SCENE OF ACCIDENTS	9	39	-30
I 406	GIVE LOCAL ANESTHESIA	9	38	-29
G 325	PERFORM CARDIOPULMONARY RESUSCITATION (CPR)	26	55	-29
H 384	PREPARE MEDICATIONS FOR INJECTIONS	13	42	-29
I 396	APPLY PLASTER SPLINTS	0	29	-29
I 410	PREPARE REPORTS OF TREATMENT	9	37	-28
G 335	PERFORM TRIAGE IN HOSPITAL OR CLINIC	0	28	-28
I 395	APPLY MAKE-SHIFT SPLINTS	0	28	-28
F 180	PREPARE EYE IRRIGATIONS	22	49	-27

TABLE 23

REPRESENTATIVE TASKS PERFORMED BY DAFSC 90270 PERSONNEL

TASKS		PERCENT MEMBERS PERFORMING
G 349	TAKE OR RECORD BLOOD PRESSURES	83
G 351	TAKE OR RECORD RADIAL PULSE	80
A 006	DEVELOP OR IMPROVE WORK METHODS OR PROCEDURES	77
C 073	PREPARE AIRMAN PERFORMANCE REPORTS (APRS)	77
E 110	EXPLAIN MEDICAL FACILITY POLICIES TO PATIENTS	74
E 104	ANSWER PATIENT INQUIRIES ON THE TELEPHONE	72
A 026	PREPARE REQUISITION FOR SUPPLIES OR EQUIPMENT	71
B 052	SUPERVISE MEDICAL SERVICES SPECIALIST (AFSC 90250)	70
C 057	COUNSEL SUBORDINATES ON MILITARY OR PERSONAL PROBLEMS	69
E 103	ANNOTATE TREATMENTS TO PATIENT TREATMENT RECORDS	69
C 70	INVENTORY EQUIPMENT OR SUPPLIES	68
E 157	PREPARE RADIOGRAPHIC REPORT FORMS (SF 519A)	67
G 277	CHANGE DRESSINGS	67
A 14	ESTABLISH WORK PRIORITIES	67
G 350	TAKE OR RECORD BODY WEIGHT	64
H 359	ADMINISTER INTRAMUSCULAR INJECTIONS	62
E 116	MAINTAIN BULLETINS, MANUALS, OR PUBLICATIONS	60

TABLE 24

TASKS WHICH BEST DIFFERENTIATE BETWEEN DAFSC 90250 AND DAFSC 90270 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS		DAFSC 90250	DAFSC 90270	DIFFERENCE
C 57	COUNSEL SUBORDINATES ON MILITARY OR PERSONAL PROBLEMS	24	69	-45
A 27	SCHEDULE LEAVES OR PASSES	13	57	-44
B 52	SUPERVISE MEDICAL SERVICE SPECIALISTS (AFSC 90250)	27	70	-43
A 4	COORDINATE WORK ACTIVITIES WITH OTHER SECTIONS	26	66	-40
C 60	EVALUATE INDIVIDUALS FOR PROMOTION, DEMOTION, OR RECLASSIFICATION	10	48	-38
B 43	PREPARE CORRESPONDENCE	17	54	-37
E 136	PREPARE CUSTODIAN REQUEST/RECEIPT FORMS (AF FORM 6018)	19	55	-36
D 85	EVALUATE TRAINING	15	50	-35
A 9	DEVELOP OR WRITE LOCAL MEDICAL FACILITY OPERATING INSTRUCTIONS OR STANDARD OPERATING PROCEDURES	15	46	-31
D 86	INTERPRET POLICIES OR DIRECTIVES FOR SUBORDINATES	21	51	-30
C 68	INSPECT OR EVALUATE ADHERENCE TO ESTABLISHED STANDARDS OF SANITATION, CLEANLINESS, OR NEATNESS	23	53	-30
C 61	EVALUATE OR ESTABLISH PROCEDURES FOR STORAGE, INVENTORY, OR INSPECTION OF PROPERTY ITEMS	20	48	-28
B 36	IMPLEMENT SAFETY PRACTICES	21	48	-27
C 64	EVALUATE ROUTINE REPORTS	13	39	-26
A 7	DEVELOP OR REVISE ORGANIZATION OF SECTION	20	45	-25

TABLE 25

REPRESENTATIVE TASKS PERFORMED BY DAFSC 90292 PERSONNEL

TASKS		PERCENT MEMBERS PERFORMING
B 43	PREPARE CORRESPONDENCE	96
C 59	EVALUATE COMPLIANCE WITH WORK STANDARDS	91
A 6	DEVELOP OR IMPROVE WORK METHODS OR PROCEDURES	91
C 57	COUNSEL SUBORDINATES ON MILITARY OR PERSONAL PROBLEMS	87
A 4	COORDINATE WORK ACTIVITIES WITH OTHER SECTIONS	83
A 14	ESTABLISH WORK PRIORITIES	83
E 116	MAINTAIN BULLETINS, MANUALS, OR PUBLICATIONS	83
C 58	EVALUATE ADHERENCE TO WORK SCHEDULES	78
C 60	EVALUATE INDIVIDUALS FOR PROMOTION, DEMOTION, OR RECLASSIFICATION	78
B 54	SUPERVISE MEDICAL SERVICE TECHNICIANS (AFSC 90270)	78
A 5	DETERMINE PERSONNEL REQUIREMENTS	78
C 56	ADVISE SUBORDINATES ON RESOLUTION OF TECHNICAL PROBLEMS	78
A 1	ASSIGN PERSONNEL TO DUTY POSITIONS	78
A 3	CONDUCT OR ATTEND WARD MASTER OR NCOIC MEETINGS	78
C 65	EVALUATE SUGGESTIONS	78

TABLE 26

TASKS WHICH BEST DIFFERENTIATE BETWEEN DAFSC 90270 AND 90292 PERSONNEL (PERCENT MEMBERS PERFORMING)

TASKS		DAFSC 90270	DAFSC 90292	DIFFERENCE
G 349	TAKE OR RECORD BLOOD PRESSURES	83	17	-66
G 353	TAKE OR RECORD TEMPERATURES	77	13	-64
G 351	TAKE OR RECORD RADIAL PULSE	80	17	-63
G 277	CHANGE DRESSINGS	67	13	-54
G 278	CLEAN PATIENT CARE AREAS	58	4	-54
G 284	DISPENSE MEDICATIONS	59	9	-50
E 129	PREPARE CHEMISTRY II FORMS (SF 547)	59	9	-50
G 346	RUN ELECTROCARDIOGRAPH (EKG) TRACINGS	57	9	-48
A 17	PLAN OR COORDINATE HOSPITAL TOURS	17	61	+44
D 100	SELECT INDIVIDUALS FOR SPECIALIZED TRAINING	23	65	+42
C 69	INSPECT PHYSICAL LAYOUT OF MEDICAL SERVICE FACILITIES	24	65	+41
A 5	DETERMINE PERSONNEL REQUIREMENTS	39	78	+39
B 51	SUPERVISE MEDICAL PERSONNEL WITH AFSCS OTHER THAN 902X0, 90292, 912X4, OR 91295	14	52	+38
B 29	DIRECT DISASTER CONTROL PROGRAMS FOR THE SECTION OR FACILITY	27	65	+38
A 8	DEVELOP OR UPDATE ORGANIZATIONAL CHARTS	23	61	+38
B 37	INITIATE REQUESTS FOR PERSONNEL REPLACEMENTS	24	61	+37

TABLE 27

JOB INTEREST AND RELATED DATA FOR DAFSC 902X0
(PERCENT RESPONDING)

	90230 (N=23)	90250 (N=565)	90270 (N=205)	90292 (N=23)
I FIND MY JOB:				
NO RESPONSE	0	1	1	4
DULL	4	12	7	0
SO-SO	13	17	11	4
INTERESTING	83	70	81	92
MY JOB UTILIZES MY TALENTS:				
NO RESPONSE	4	0	3	4
NOT AT ALL TO VERY LITTLE	9	26	19	9
FAIRLY WELL TO VERY WELL	83	65	58	43
EXCELLENTLY TO PERFECTLY	4	9	20	43
MY JOB UTILIZES MY TRAINING:				
NO REPONSE	0	1	1	0
NOT AT ALL TO VERY LITTLE	9	26	21	22
FAIRLY WELL TO VERY WELL	78	63	58	26
EXCELLENTLY TO PERFECTLY	13	10	20	52
I PLAN TO REENLIST:				
NO RESPONSE	0	2	2	0
NO	30	31	15	48
PROBABLY NO	35	19	12	4
PROBABLY YES	26	23	18	13
YES	9	25	53	35

AFS 912X4 Skill Level Groups

Personnel within the Allergy/Immunology career ladder are very homogeneous in terms of tasks performed. As shown in Table 28, the relative percent time spent on duties vary only slightly between the 3- and 7-skill level groups. These slight differences are primarily the result of the additional supervisory and management functions assigned to 7-skill level technicians who supervise subordinate Allergy/Immunology personnel.

In comparing technical tasks performed by 3- and 7-skill level personnel, the differences between the two groups were so small as to be almost indistinguishable. To illustrate the homogeneity between these two groups, representative tasks from each primary technical duty in which Allergy/Immunology personnel work, with percent members of the 3- and 7-skill level performing each task, are shown in Table 29. As previously stated, the higher percentage of 7-skill level personnel performing supervisory and management functions was the primary distinguishing factor between the two skill levels within the ladder. This difference is illustrated by Table 30 which shows representative tasks with the greatest difference in percent members performing between members of the 3- and 7-skill level groups. Note that almost all of these tasks are from the supervisory or management duties. Of additional interest was the fact that none of the technical tasks were performed exclusively by 3-skill level personnel, further emphasizing the technical involvement of 7-skill level personnel in the Allergy/Immunology program.

Only two clinic superintendents (AFS 91295) responded to the survey. Although this small number of respondents is not sufficient to provide a reliable representation of this skill level, the percent time spent on duties has been included in Table 28.

Job interest and related background data including perceived utilization of talents and training and reenlistment intentions are illustrated in Table 31.

Summary

Members of the Allergy/Immunology ladder were very homogeneous in terms of tasks performed. These personnel work almost exclusively in Allergy/Immunology functions and perform essentially the same technical tasks regardless of skill level. Only the performance of supervisory functions differentiates the 7-skill level technician from the 3-skill level specialist in this ladder. Only two 9-skill level (91295) airmen responded to the survey, making objective judgments difficult with such a small data base. Although these positions were included in data shown in Tables 28 and 31, no evaluation of this skill level was attempted.

TABLE 28

RELATIVE PERCENT TIME SPENT ON DUTIES BY SKILL LEVEL GROUPS WITHIN THE ALLERGY/IMMUNOLOGY CAREER LADDER (912X4)

DUTIES	91234 (N=137)	91274 (N=59)	91295 (N=2)
SUPERVISORY AND MANAGEMENT FUNCTIONS			
A. ORGANIZING AND PLANNING	5	8	22
B. DIRECTING AND IMPLEMENTING	3	5	26
C. INSPECTING AND EVALUATING	3	5	24
D. TRAINING	2	5	14
ADMINISTRATIVE AND MATERIEL FUNCTIONS			
E. PERFORMING ADMINISTRATIVE OR MATERIEL PROCEDURES	19	18	13
TECHNICAL FUNCTIONS			
F. PREPARING FOR NURSING PROCEDURES	1	2	0
G. PERFORMING NURSING PROCEDURES OR ASSISTING PHYSICIANS IN DIAGNOSIS OR TREATMENTS	16	14	1
H. PREPARING FOR AND ADMINISTERING INJECTIONS	34	28	0
I. PERFORMING CLINICAL OR EMERGENCY ROOM PROCEDURES	1	1	0
J. PERFORMING WARD SERVICES	*	*	0
K. PERFORMING AEROMEDICAL EVACUATION FUNCTIONS	*	*	0
L. PERFORMING ALLERGY TESTS AND PROCEDURES	7	7	0
M. PERFORMING INDEPENDENT DUTY AND TRANSPORTABLE CLINIC FUNCTIONS	1	1	0
N. PREPARING ALLERGY EXTRACTS OR KITS	8	7	0

* LESS THAN 1%

TABLE 29

REPRESENTATIVE TECHNICAL TASKS PERFORMED BY SKILL LEVEL GROUPS WITHIN THE DAFSC 912X4 CAREER LADDER
(PERCENT MEMBERS PERFORMING)

TASKS		3-SKILL LEVEL	7-SKILL LEVEL
G 282	COUNSEL PATIENTS ON ALLERGY INJECTION PROGRAMS	91	81
G 283	DETERMINE SPECIFIC DOSAGE FOR ALLERGY PATIENTS	86	76
G 305	INSTRUCT INSECT SENSITIVE PATIENTS ON USE OF EMERGENCY TREATMENT KITS	79	78
G 307	INSTRUCT PATIENTS ON APPLYING ENVIRONMENTAL METHODS OF ALLERGY CONTROLS	79	71
G 296	IDENTIFY OR INITIATE EMERGENCY TREATMENT FOR LOCAL REACTIONS	78	71
H 365	ADMINISTER SMALLPOX VACCINATIONS USING SCRATCH TECHNIQUES	99	93
H 370	COMPARE INDIVIDUAL INTERNATIONAL CERTIFICATES OF VACCINATIONS FORMS WITH IMMUNIZATION CARD DECKS OR PRINTOUTS	96	93
H 373	COUNSEL PATIENTS ON ROUTINE IMMUNIZATION PROCEDURES OR EFFECTS	97	90
H 358	ADMINISTER INTRADERMAL INJECTIONS	96	90
H 380	INTERPRET RESULTS OF PPD TESTS	99	95
L 466	ADMINISTER INTRADERMAL TESTS	76	80
L 476	INTERPRET RESULTS OF INTRADERMAL TESTS	75	75
L 497	RECORD RESULTS OF INTRADERMAL TESTS	75	73
L 472	ADMINISTER SCRATCH TESTS	66	68
L 483	INTERPRET RESULTS OF SCRATCH TESTS	66	71
N 562	INSTRUCT PATIENTS ON PROPER CARE OF ALLERGY EXTRACTS	79	81
N 564	LABEL ALLERGY EXTRACT VIALS	75	73
N 572	PREPARE ALLERGY EXTRACT DOSAGE SCHEDULES	68	71
N 571	PACKAGE ALLERGY EXTRACT FOR SHIPMENT BETWEEN MEDICAL FACILITIES	68	68
N 563	ISSUE ALLERGY EXTRACT KITS	62	69

TABLE 30

TASKS WHICH BEST DIFFERENTIATE BETWEEN DAFSC 91234 AND DAFSC 91274 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS		DAFSC 91234	DAFSC 91274	DIFFERENCE
C 73	PREPARE AIRMAN PERFORMANCE REPORTS (APRS)	17	64	-47
A 27	SCHEDULE LEAVES OR PASSES	18	64	-46
D 87	MAINTAIN TRAINING RECORDS	22	58	-36
E 107	COORDINATE BUYS OF SPECIAL EQUIPMENT OR MEDICAL SUPPLIES OTHER THAN ALLERGY EXTRACT WITH MED MATERIEL AND VENDORS	20	53	-33
D 86	INTERPRET POLICIES OR DIRECTIVES FOR SUBORDINATES	22	54	-32
C 57	COUNSEL SUBORDINATES ON MILITARY OR PERSONAL PROBLEMS	30	59	-29
A 9	DEVELOP OR WRITE LOCAL MEDICAL FACILITY OPERATING INSTRUCTIONS OR STANDARD OPERATING PROCEDURES	26	54	-28
C 65	EVALUATE SUGGESTIONS	20	47	-27
B 43	PREPARE CORRESPONDENCE	37	64	-27
C 60	EVALUATE INDIVIDUALS FOR PROMOTION, DEMOTION, OR RECLASSIFICATION	8	34	-26
C 75	PREPARE RECOMMENDATIONS FOR SPECIAL CORRECTIVE ACTION IN CASES OR RECURRING PROBLEMS	8	34	-26
A 4	COORDINATE WORK ACTIVITIES WITH OTHER SECTIONS	49	75	-26
E 148	PREPARE OR DISTRIBUTE RECURRING REPORTS	12	37	-25
B 30	DIRECT MASS IMMUNIZATION PROGRAMS	63	88	-25
C 64	EVALUATE ROUTINE REPORTS	13	37	-24

TABLE 31

JOB INTEREST AND RELATED DATA FOR DAFSC 912X4
(PERCENT RESPONDING)

	91234 (N=137)	91274 (N=59)	91295 (N=2)
I FIND MY JOB:			
NO RESPONSE	0	2	0
DULL	13	12	0
SO-SO	12	14	0
INTERESTING	75	72	100
MY JOB UTILIZES MY TALENTS:			
NO RESPONSE	0	0	0
NOT AT ALL TO VERY LITTLE	30	22	0
FAIRLY WELL TO VERY WELL	62	64	0
EXCEPTIONALLY TO PERFECTLY	8	14	100
MY JOB UTILIZES MY TRAINING:			
NO RESPONSE	0	0	0
NOT AT ALL TO VERY LITTLE	24	27	0
FAIRLY WELL TO VERY WELL	63	63	0
EXCEPTIONALLY TO PERFECTLY	13	10	100
I PLAN TO REENLIST:			
NO RESPONSE	0	3	0
NO	13	17	50
PROBABLY NO	12	10	0
PROBABLY YES	36	14	0
YES	39	56	50

COMPARISON OF AFR 39-1 SPECIALTY DESCRIPTIONS TO SURVEY DATA

The AFR 39-1 specialty descriptions for each of the career ladders in this study were compared to survey data. These job descriptions are intended to give a broad overview of the major duties and responsibilities of a career specialty at the various skill levels, and not to provide detailed descriptions of specific jobs within the career ladder.

The specialty descriptions for AFS 90230/50 and AFS 90270 appear to be complete and accurately portray the duties and responsibilities of personnel in the Medical Service career ladder. All duties and responsibilities described in the specialty descriptions could be matched to tasks performed by survey respondents. In addition, specialized kinds of jobs identified in the grouping analysis (e.g. independent duty specialists, clinic personnel, and aeromedical evacuation specialists) were also briefly described.

The specialty description for the AFSC 91214/34/74 was also found to be complete and accurate descriptions of duties and responsibilities of Allergy/Immunology technicians. No major duties or responsibilities had been omitted nor were there any specialized jobs noted in the career ladder structure analysis that would warrant any changes to the specialty description.

No meaningful evaluation of the AFSC 90292 and AFSC 91295 specialty descriptions could be made since each of these superintendent specialties include superintendents over a number of other specialties not covered by this survey. In addition, responses from only two 912X5 personnel did not provide a sufficent data base to evaluate tasks performed of this group.

IMPLICATIONS

In the analysis of the survey data, it was found that personnel assigned to the 902X0 career ladder were performing jobs that were quite different to those performed by personnel in the 912X4 ladder. Although there was considerable overlap in supervisory tasks performed by 7-skill level personnel in both ladders, these personnel are essentially technicians, performing quite different technical tasks. On the other hand, personnel assigned to 9-skill level positions (90292 and 912X5) performed only tasks typical of supervisors or managers. In view of the distinct differences in tasks performed, it does not appear feasible to consolidate the 902X0 and 912X4 ladders.