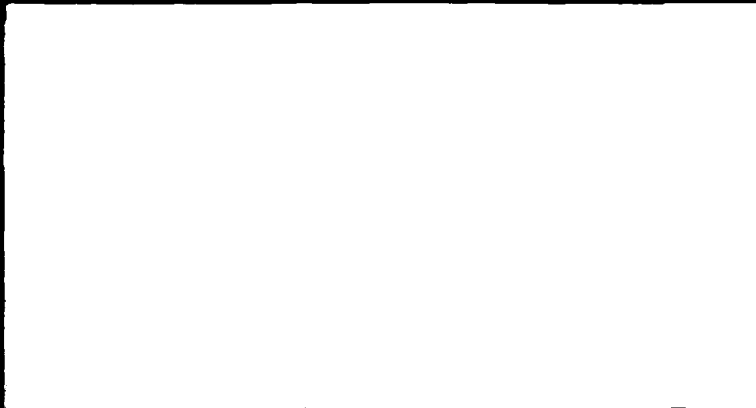




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APPENDIX 21.

ORTHOPEDIC TECHNICIAN

APPLICATION OF A SYSTEM APPROACH  
U.S. NAVY MEDICAL DEPARTMENT  
EDUCATION AND TRAINING PROGRAMS  
FINAL REPORT

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JUN 19 1980  
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Prepared under Contract to  
OFFICE OF NAVAL RESEARCH  
U.S. DEPARTMENT OF THE NAVY

Quida C. Upchurch, Capt., NC, USN  
Program Manager  
Education and Training R&D  
Bureau of Medicine and Surgery (Code 71G)

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REPORT DOCUMENTATION PAGE		READ INSTRUCTIONS BEFORE COMPLETING FORM
1. REPORT NUMBER Final Report (Vols. I & II) Appendix: <del>245</del> 21	2. GOVT ACCESSION NO.	3. RECIPIENT'S CATALOG NUMBER
4. TITLE (and Subtitle) A System Approach to Navy Medical Education and Training.	5. TYPE OF REPORT & PERIOD COVERED FINAL REPORT	6. PERFORMING ORG. REPORT NUMBER
6. AUTHOR(s) Technician	7. CONTRACT OR GRANT NUMBER(s) N00014-69-C-0246	
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19. KEY WORDS (Continue on reverse side if necessary and identify by block number) Education and Training      Medical Technician Medical Training              Job Analysis Nurse Training                Task Analysis Dentist Training               Curriculum Development		
20. ABSTRACT (Continue on reverse side if necessary and identify by block number) The study objective consisted of a determination of what the health care personnel in the Navy's Medical Department, Bureau of Medicine and Surgery actually do in their occupations; improving the personnel process (education and training); and building a viable career pathway for all health care personnel. Clearly the first task was to develop a system of job analyses applicable to all system wide health care manpower tasks. A means of postulating simplified occupational clusters covering some 50		

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currently designated Navy enlisted occupations, 20 Naval Enlisted Classification Codes (NEC's) were computerized. A set of 16 groupings that cover all designated occupations was developed so as to enhance the effectiveness of professionals and sub-professionals alike.

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## FOREWORD

The project, "Application of a System Approach to the Navy Medical Department Education and Training Programs," was initiated in May of 1969 as a realistic, comprehensive response to certain objectives set forth in ADO 43-03X, and to memoranda from both the Secretary of Defense and the Assistant Secretary of Defense, Manpower and Reserve Affairs. The Secretary's concern was stated in his memorandum of 29 June 1965, "Innovation in Defense Training and Education." More specific concerns were stated in the Assistant Secretary's memorandum of 14 June 1968, "Application of a System Approach in the Development and Management of Training Courses." In this he called for "vigorous and imaginative effort," and an approach "characterized by an organized training program with precise goals and defined operational interrelation among instructional system components." He also noted, "Job analyses with task descriptions expressed in behavioristic terms are basic and essential to the development of precise training goals and learning objectives."

### The Project

System survey and analysis was conducted relative to all factors affecting education and training programs. Subsequently, a job-analysis sub-system was defined and developed incorporating a series of task inventories ". . . expressed in behavioristic terms . . ." These inventories enabled the gathering of job activity data from enlisted job incumbents, and data relating to task sharing and delegation from officers of the Medical, Nurse and Dental Corps. A data management sub-system was devised to process incumbent data, then carry out needed analyses. The development of initial competency curricula based upon job analysis was implemented to a level of methodology determination. These methods and curriculum materials constituted a third (instructional) sub-system.

Thus, as originally proposed, a system capability has been developed in fulfillment of expressed needs. The system, however, remains untested and unevaluated. ADO 43-03X called for feasibility test and cost-effectiveness determination. The project was designed to so comply. Test and evaluation through the process of implementation has not proved feasible in the Navy Medical Department within the duration of the project. As designed and developed the system does have ". . . precise goals and defined operational interrelation among instructional system components." The latter has been achieved in terms of a recommended career structure affording productive, rewarding manpower utilization which bridges manpower training and health care delivery functions.

### Data Management Sub-System

Job analysis, involving the application of comprehensive task inventories to thousands of job incumbents, generates many millions of discrete bits of response data. They can be processed and manipulated only by high speed computer capability using rigorously designed specialty programs. In addition to numerical data base handling, there is the problem of rapidly and accurately manipulating a task statement data base exceeding ten thousand carefully phrased behavioral statements. Through the use of special programs, task inventories are prepared, printouts for special purposes are created following a job analysis application, access and retrieval of both data and tasks are efficiently and accurately carried out, and special data analyses conducted. The collective programs, techniques and procedures comprising this sub-system are referred to as the Navy Occupational Data Analysis Language (NODAL).

### Job Analysis Sub-System

Some twenty task inventory booklets (and associated) response booklets) were the instruments used to obtain job incumbent response data for more than fifty occupations. An inventory booklet contains instructions, formatted questions concerning respondent information ("bio-data"), response dimension definitions, and a list of tasks which may vary in number from a few hundred to more than a thousand per occupational field.

By applying NODAL and its associated indexing techniques, it is possible to assemble modified or completely different inventories than those used in this research. Present inventories were applied about three years ago. While they have been rendered in operational format, they should not be reapplied until their task content is updated.

Response booklets were designed in OPSCAN mode for ease of recording and processing responses.

Overall job analysis objectives and a plan of administration were established prior to inventory preparation, including the setting of provisional sample target sizes. Since overall data attrition was forecast to approximate twenty percent, final sample and sub-sample sizes were adjusted accordingly. Stratified random sampling techniques were used. Variables selected (such as rating, NEC, environment) determined stratifications, together with sub-population sizes. About fifteen percent of large sub-populations were sought while a majority of all members of small sub-populations were sought.

Administration procedures were established with great care for every step of the data collecting process, and were coordinated with sampling and data analysis plans. Once set, the procedures were formalized as a protocol and followed rigorously.

## Instructional Sub-System

Partial "competency curricula" have been composed as an integral sub-system bridging what is required as performance on the job with what is, accordingly, necessary instruction in the training process. Further, curriculum materials were developed to meet essential requirements for implementing the system so that the system could be tested and evaluated for cost effectiveness. However, due to the fact that test and evaluation was not feasible in the Navy Medical Department within the duration of the project, it was not possible to complete the development of the system through the test and evaluation phase. The inability to complete this phase also interrupted the planned process for fully developing the curricula; therefore, instead of completed curricula ready for use in the system, the curricula were partially developed to establish the necessary sub-system methodology. The competency curricula are based on tasks currently performed by job incumbents in 1971. (The currency of a given curriculum depends upon periodic analysis of incumbents' jobs, and its quality control resides in the evaluation of the performance competency of the program's graduates.)

A competency curriculum provides a planned course of instruction or training program made up of sequenced competency units which are, in turn, comprised of sequenced modules. These modules, emphasizing performance objectives, are the foundation of the curriculum.

A complete module would be comprised of seven parts: a cluster of related tasks; a performance objective; a list of knowledges and skills implied by the objective; a list of instructional strategies for presenting the knowledges and skills to the learner; an inventory of training aids for supporting the instructional strategies; a list of examination modes; and a statement of the required training time. In this project, curriculum materials have been developed to various levels of adequacy, and usually comprise only the first three parts; the latter four need to be prepared by the user.

The performance objective, which is the most crucial part of the module, is the basis for determining curriculum content. It is composed of five essential elements: the stimulus which initiates the behavior; the behavior; the conditions under which the behavior takes place; the criteria for evaluating the behavior; and the consequence or results of the behavior. A sixth element, namely next action, is not essential; however, it is intended to provide linkage for the next behavior.

Knowledges and skills listed in the module are those needed by the learner for meeting the requirements of the performance objective.

Instructional strategies, training aids, examination modes and training time have been specified only for the Basic Hospital Corps Curriculum. The strategies, aids and modes were selected on the basis of those considered to be most supportive in presenting the knowledges and skills so as to provide optimum learning effectiveness and training efficiency. The strategies extend from the classroom lecture as traditionally presented by a teacher to the more sophisticated mediated program for self-instruction. The training aids, like strategies, extend from the traditional references and handout material in the form of a student syllabus to mediated programs for self-instruction supported by anatomical models. Examination modes extend from the traditional paper and pencil tests to proficiency evaluation of program graduates on the job, commonly known as feedback. Feedback is essential for determining learning effectiveness and for quality control of a training program. The kind of instructional strategies, training aids and examination modes utilized for training are limited only by such factors as staff capability and training budget.

The training time specified in the Basic Hospital Corps Curriculum is estimated, based upon essential knowledge and skills and program sequence.

The competency curriculum module, when complete, provides all of the requirements for training a learner to perform the tasks set forth in the module. A module may be used independently or related modules may be re-sequenced into modified competency units to provide training for a specific job segment.

Since the curricula are based upon tasks performed by job incumbents in 1971, current analysis of jobs needs to be accomplished using task inventories that have been updated to reflect changes in performed tasks. Subsequent to job analysis, a revision of the curricula should be accomplished to reflect task changes. When the foregoing are accomplished, then faculty and other staff members may be indoctrinated to the competency curricula and to their relationship to the education and training system.

In addition to the primary use for the systematic training of job incumbents, these curricula may be used to plan for new training programs, develop new curricula, and revise existing curricula; develop or modify performance standards; develop or modify proficiency examinations; define billets; credentialize training programs; counsel on careers; select students; and identify and select faculty.

## The System

Three sub-systems, as described, comprise the proposed system for Education and Training Programs in the Navy Medical Department. This exploratory and advanced developmental research has established an overall methodology for improved education and training incorporating every possible means of providing bases for demonstrating feasibility and cost effectiveness. There remains only job analysis sub-system up-dating, instructional sub-system completion, and full system test and evaluation.

## Acknowledgements

The authors wish to acknowledge the invaluable participation of the several thousands of Naval personnel who served as respondents in inventory application. The many military and civilian personnel who contributed to developmental efforts are cited by name in the Final Report.

The authors also wish to acknowledge former colleagues for singularly important contributions, namely, Elias H. Porter, Ph.D., Carole K. Kauffman, R.N., M.P.H., Mary Kay Munday, B.S.N., R.N., Gail Zarren, M.S.W., and Renee Schick, B.A.

Identity and acknowledgement of the project Advisory Group during the project's final year is recorded in the Final Report.

Lastly, the project could not have been commenced nor carried out without the vision, guidance and outstanding direction of Ouida C. Upchurch, Capt., NC, USN, Project Manager.

NAVY MEDICAL DEPARTMENT

TASK INVENTORY BOOKLET

ORTHOPEDICS

(HOSPITAL CORPS)

## CONSTRAINTS AND ETHICAL USE

This task inventory was developed three years ago in a first-version key punch format for education and training research purposes.

The present "operational" format, using a mark-sense response booklet (Opscan), is recommended for future applications. The task and equipment statements comprising the bulk of the inventory are precisely the same (less duplicate entries) as in the original research tools but rearranged for Opscan mode. Biographical data questions have also been reformatted for Opscan (NEC codes should be updated).

The processing, administering and formatting of this inventory have thus been readied for operational application.

It is strongly recommended that this inventory be updated in its task and equipment statement sections before actual operational use. These reasons pertain:

- Changes in medical or related procedures or techniques
- Some tasks may violate current policy or be obsolete
- Equipment changes may have occurred
- The objective of task comprehensiveness may change
- Objectives may shift to embrace manpower utilization as well as education and training

In the latter regard, the present operational format includes a "time to perform" dimension (as well as frequency of performance and two additional optional blank response dimension fields). As a response dimension, "time to perform" has been validated within the context of inventories for professional personnel where the objectives embraced utilization (i.e., time associated with shared and delegable tasks). The original Enlisted inventory content was directed to education and training factors only. If "time to perform" is to be used operationally, each task and equipment statement should be examined by expert job incumbents to remove possible overlaps which could confound "time to perform" data. This review process would also serve other purposes cited above.

A general precaution is in order.

When task analysis inventories are poorly prepared, loosely administered, administered according to less than rigorous sampling, or are handled casually in processing or interpretation, they will inevitably produce poor or questionable data, at best. At worst, such practices will result in loss of money and time, and produce dangerous data. Inventories should be prepared, applied, processed and interpreted only by knowledgeable professional and technical personnel. As in the cases of ethically controlled behavior tests, inventories should not be casually copied or distributed, and should remain under the control of authorized, trained personnel. Factors effecting reliability and validity should be fully appreciated.

## GENERAL INSTRUCTIONS

There are two parts to be completed for this survey:

- Part I            Career Background Information  
                  (answers to be recorded in this  
                  TASK BOOKLET)
  
- Part II A        List of Tasks (answers to be  
                  recorded on the accompanying  
                  RESPONSE BOOKLET)
  
- B     List of Instruments and  
                          Equipment (answers to be  
                          recorded on the accompanying  
                          RESPONSE BOOKLET)

Each part is preceded by a set of instructions. Be sure to read them carefully before you start answering each part. All instructions are found on the tinted pages.

PLEASE USE ONLY NUMBER 2 LEAD PENCILS. ERASE ALL CHANGES CAREFULLY AND COMPLETELY. DO NOT PUT ANY MARKS OTHER THAN YOUR ANSWERS ON EACH RESPONSE PAGE.

DO NOT FOLD, WRINKLE, CREASE OR DETACH PAGES FROM EITHER TASK BOOKLET OR RESPONSE BOOKLET.

WHEN RECORDING YOUR ANSWERS YOU MAY WANT TO USE A RULER TO READ ACROSS ANSWER AND QUESTION COLUMNS.

WHEN YOU HAVE COMPLETED YOUR RESPONSES, PUT THE TASK INVENTORY BOOKLET AND THE RESPONSE BOOKLET IN THE ENCLOSED SELF-ADDRESSED ENVELOPE. SEAL AND RETURN TO THE OFFICER WHO GAVE YOU THIS PACKAGE. COMPLETED BOOKLETS SHOULD BE RETURNED WITHIN ONE WEEK OF RECEIPT.

Part I

CAREER BACKGROUND INFORMATION

Check that the Form and Serial Number in this box match those on the cover of this Booklet

Please fill out completely

Name of your Duty Station \_\_\_\_\_

City & State (if applicable) \_\_\_\_\_

Your Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

DO NOT FILL IN

N \_\_\_\_\_  
Form Serial No.

(1)

(7)

(14)

PLEASE ANSWER QUESTIONS BELOW BY ENTERING THE PROPER NUMBER IN THE BLANKS PROVIDED. TWO BLANKS REQUIRE A TWO-DIGIT ANSWER. DISREGARD NUMBERS IN PARENTHESIS.

ENTER ANSWERS HERE

Q1. Select the number to indicate the Corps to which you belong:

Q1. \_\_\_ (23)

- 1. Dental Technician
- 2. Hospital Corps

Q2. Indicate your military status:

Q2. \_\_\_ (24)

- 1. USN
- 2. USNR

Q3. Indicate your pay grade:

Q3. \_\_\_ (25)

- 1. E1                      6. E6
- 2. E2                      7. E7
- 3. E3                      8. E8
- 4. E4                      9. E9
- 5. E5

Q4. Indicate your total years of active duty in the Navy to date: (estimate to the nearest year)

Q4. \_\_\_ (26)

- 1. Less than 2 years
- 2. 2 to 4 years
- 3. 5 to 8 years
- 4. More than 8 years

ENTER  
ANSWERS  
HERE

- Q5. Select the number to indicate your present immediate supervisor: Q5. \_\_\_ (27)
1. Physician
  2. Dentist
  3. Nurse
  4. MSC Officer
  5. HM or DT
  6. Other (Specify) \_\_\_\_\_
- Q6. Select the number to indicate the average number of hours you work per week: (estimate to the nearest hour) Q6. \_\_\_ (28)
1. 35 to 40 hours
  2. 41 to 50 hours
  3. More than 50 hours
- Q7. Please give an estimate of the percent of time you spend on the following (write five percent as 05): Q7.
1. \_\_\_ % (29)
  2. \_\_\_ % (31)
  3. \_\_\_ % (33)
  4. \_\_\_ % (35)
  5. \_\_\_ % (37)
- Q8. Assuming that most or all of the following factors are of importance to you, select the three which, if improved, would contribute most to your job satisfaction: Q8. \_\_\_ (39)
- \_\_\_ (41)
- \_\_\_ (43)
- 01 Salary and/or promotion opportunities
  - 02 Retirement benefits
  - 03 Housing
  - 04 Educational advancement opportunities
  - 05 Stability of tour of duty
  - 06 Physical facilities and equipment
  - 07 Administrative and clerical support
  - 08 Work load
  - 09 Personal career planning
  - 10 Opportunity to attend professional meetings

ENTER  
ANSWERS  
HERE

- Q9. Using the list on page vii specify your current NEC by writing the last two digits of the CODE. Q9. \_\_\_ (45)
- Q10. Select the number to indicate your years of experience corresponding to the NEC stated in Q9: (estimate to the nearest year) Q10. \_\_\_ (47)
1. Less than 1 year      4. 6 to 10 years  
2. 1 to 2 years          5. 11 to 15 years  
3. 3 to 5 years          6. More than 15 years
- Q11. If you have other NEC(s) in addition to the one specified in Q9, check page vii and indicate the last two digits of the CODE(s). If you have none, enter "99" in answer space for Q11 and Q12. Q11a. \_\_\_ (48)  
b. \_\_\_ (50)
- Q12. Select the number to indicate the years of experience you had in the NEC(s) stated in Q11 (estimate to the nearest year). Q12a. \_\_\_ (52)  
b. \_\_\_ (53)
1. Less than 1 year      4. 6 to 10 years  
2. 1 to 2 years          5. 11 to 15 years  
3. 3 to 5 years          6. More than 15 years
- Q13. From the list below, write the two-digit CODE to indicate the specialty of the department in which you are currently functioning. Q13. \_\_\_ (54)

CODE

- |                          |                    |
|--------------------------|--------------------|
| 01 Administration        | 18 Urology         |
| 02 Education             | 19 Intensive Care  |
| 03 Anesthesiology        | 20 Operating Room  |
| 04 Coronary Care         | 21 Emergency Room  |
| 05 Dermatology           | 00 Other (specify) |
| 06 Medicine - OPD        |                    |
| 07 Medicine - Wards      |                    |
| 08 Obstetrics/Gynecology |                    |
| 09 Ophthalmology         |                    |
| 10 Orthopedics           |                    |
| 11 Otolaryngology        |                    |
| 12 Medical Laboratory    |                    |
| 13 Pediatrics            |                    |
| 14 Psychiatry            |                    |
| 15 Public Health         |                    |
| 16 Radiology             |                    |
| 17 General Surgery-Wards |                    |

ENTER  
ANSWER  
HERE

Q14. Select the number to indicate the type of duty station at which you currently work, and have been working for at least 30 days:

Q14.\_\_\_\_ (56)

1. Hospital
2. Dispensary
3. Aboard ship/sub, no M.O. (or D.O.) aboard
4. Aboard ship/sub, M.O. (or D.O.) aboard
5. Aviation squadron/wing, Navy or Marine
6. Marine ground forces
7. Administrative Commands
8. Research Commands or PMUs
9. Dental Clinic
0. Other \_\_\_\_\_

Q15. Indicate the number of people you normally supervise:

Q15.\_\_\_\_ (57)

- |         |            |
|---------|------------|
| 0. None | 3. 6-10    |
| 1. 1-2  | 4. 11-20   |
| 2. 3-5  | 5. over 20 |

MEDICAL/DENTAL NEC (NAVAL ENLISTED CODE) AND TITLE

0000 General Service, Hospital or Dental Corpsman  
3371 Health Physics & Process Control Technician  
3391 Nuclear Power Plant Operator  
8402 Nuclear Submarine Medicine Technician  
8403 Submarine Medicine Technician  
8404 Medical Field Service Technician  
8405 Advanced Hospital Corps Technician (Class B)  
8406 Aviation Medicine Technician  
8407 Nuclear Medicine Technician  
8408 Cardiopulmonary Technician  
8409 Aviation Physiology Technician  
8412 Clinical Laboratory Assistant Technician  
8413 Tissue Culture Technician  
8414 Clinical Chemistry Technician  
8415 Medical Technology Technician  
8416 Radioactive Isotope Technician  
8417 Clinical Laboratory Technician  
8432 Preventive Medicine Technician  
8433 Tissue Culture and Tissue Bank Technician  
8442 Medical Administrative Technician  
8452 X-ray Technician  
8453 Electrocardiograph/Basal Metabolism Technician  
8454 Electroencephalograph Technician  
8462 Optician (General) Technician  
8463 Optician Technician  
8466 Physical and Occupational Technician  
8472 Medical Photography Technician  
8482 Pharmacy Technician  
8483 Operating Room Technician  
8484 Eye, Ear, Nose, & Throat Technician  
8485 Neuropsychiatry Technician  
8486 Urological Technician  
8487 Occupational Therapy Technician  
8488 Orthopedic Appliance Mechanic  
8489 Orthopedic Cast Room Technician  
8492 Special Operations Technician  
8493 Medical Deep Sea Diving Technician  
8494 Physical Therapy Technician  
8495 Dermatology Technician  
8496 Embalming Technician  
8497 Medical Illustration Technician  
8498 Medical Equipment Repair Technician  
8703 DT General, Advanced  
8707 DT Field Service  
8713 DT Clinical Laboratory  
8714 DT Research Assistant  
8722 DT Administrative  
8732 DT Repair  
8752 DT Prosthetic, Basic  
8753 DT Prosthetic, Advanced  
8765 DT Maxillofacial Prosthetic

## RESPONSE BOOKLET INSTRUCTIONS

- To complete Part II, you need this TASK BOOKLET and the accompanying RESPONSE BOOKLET. Record all your answers to Part II in the RESPONSE BOOKLET.
- All pages of the RESPONSE BOOKLET are machine readable. In order for responses to be properly read, please be sure to:
  1. Use a No. 2 pencil only
  2. Carefully and completely shade the number corresponding to your answer under each column.
- Complete Page 00 of the RESPONSE BOOKLET first. Follow instructions given on the page. Fill in Line 1, and Boxes 2, 3, 4, and 5. Ignore all other boxes. BE SURE TO ENTER YOUR SOCIAL SECURITY NUMBER (WRITE DOWNWARD) IN THE BLANK SPACES IN BOX 3: then darkly shade the corresponding number on each line. An example of a completed Page 00 is shown on the next page (the hand-written notes in this example are for clarification only. Please do not make similar notes on your RESPONSE BOOKLET.)
- After completing Page 00, carefully read and follow instructions given on pages x through xiv.
- PLEASE HANDLE YOUR RESPONSE BOOKLET CAREFULLY. KEEP IT CLEAN AND AWAY FROM CHEMICALS. DO NOT DETACH, FOLD, WRINKLE OR CROSS OUT ANY PAGE.

DO NOT MARK IN THESE BOXES	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9
	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9	0 1 2 3 4 5 6 7 8 9
	<b>RESPONSE BOOKLET</b>			
	Serial No. <b>0233</b>			

*Ignore these boxes*

*My name is*

1 NAME Mary Smith

**TASK ABILITY BACKGROUND TEST BOOKLET**

INSTRUCTIONS	
1.	Use No. 2 pencil <u>ONLY</u> .
2.	Indicate responses with solid black mark in space provided.
3.	Erase <u>COMPLETELY</u> all changes.
4.	Do not detach forms from packet.
5.	Answer questions 2 through 5 below.
6.	See Task Statement Booklet for further instructions for completing boxes to the right.

*Today is June 4, 1972  
June = 06  
11 = 04  
1972 = 72*

2	TODAY'S DATE	MONTH	0 1 2 3 4 5 6 7 8 9
		DAY	0 1 2 3 4 5 6 7 8 9
		YEAR	0 1 2 3 4 5 6 7 8 9
		YEAR	0 1 2 3 4 5 6 7 8 9

SOCIAL SECURITY NUMBER	3	0 1 2 3 4 5 6 7 8 9
	0	0 1 2 3 4 5 6 7 8 9
	4	0 1 2 3 4 5 6 7 8 9
	2	0 1 2 3 4 5 6 7 8 9
	6	0 1 2 3 4 5 6 7 8 9
	9	0 1 2 3 4 5 6 7 8 9
	7	0 1 2 3 4 5 6 7 8 9
	5	0 1 2 3 4 5 6 7 8 9
	1	0 1 2 3 4 5 6 7 8 9

TASK ABILITY BACKGROUND TEST BOOKLET	6	0 1 2 3 4 5 6 7 8 9	13 0 1
		0 1 2 3 4 5 6 7 8 9	14 0 1
		0 1 2 3 4 5 6 7 8 9	15 0 1
		0 1 2 3 4 5 6 7 8 9	16 0 1
	7	0 1 2 3 4 5 6 7 8 9	17 0 1
		0 1 2 3 4 5 6 7 8 9	18 0 1
		0 1 2 3 4 5 6 7 8 9	19 0 1
		0 1 2 3 4 5 6 7 8 9	20 0 1
	8	0 1 2 3 4 5 6 7 8 9	21 0 1
		0 1 2 3 4 5 6 7 8 9	22 0 1
		0 1 2 3 4 5 6 7 8 9	23 0 1
		0 1 2 3 4 5 6 7 8 9	24 0 1
9	0 1 2 3 4 5 6 7 8 9	25 0 1	
	0 1 2 3 4 5 6 7 8 9	26 0 1	
	0 1 2 3 4 5 6 7 8 9	27 0 1	
	0 1 2 3 4 5 6 7 8 9	28 0 1	
10	0 1 2 3 4 5 6 7 8 9	29 0 1	
	0 1 2 3 4 5 6 7 8 9	30 0 1	
11	0 1 2 3 4 5 6 7 8 9	31 0 1	
	0 1 2 3 4 5 6 7 8 9	32 0 1	
12	0 1 2 3 4 5 6 7 8 9	33 0 1	
	0 1 2 3 4 5 6 7 8 9	34 0 1	

SEE COVER OF YOUR TASK BOOKLET **Form N20, Ser. No. 0233**

4	TASK BOOKLET	FORM	A B C D E F G H I J K L M N O P Q R S T U V W X Y Z
			0 1 2 3 4 5 6 7 8 9
			0 1 2 3 4 5 6 7 8 9
		SERIAL NO.	0 1 2 3 4 5 6 7 8 9
			0 1 2 3 4 5 6 7 8 9

*My birthday is 7/21/10, 1940  
MAY = 05  
1940 = 40*

6	DATE BIRTH	MONTH	0 1 2 3 4 5 6 7 8 9
		DAY	0 1 2 3 4 5 6 7 8 9
		YEAR	0 1 2 3 4 5 6 7 8 9
		YEAR	0 1 2 3 4 5 6 7 8 9

*Ignore these boxes*

PART II

PART II A LIST OF TASKS

PART II B LIST OF INSTRUMENTS AND EQUIPMENT

HOW TO RESPOND TO TASK STATEMENTS AND INSTRUMENTS

Your responses to each statement should be marked on the corresponding page, column and item number in your RESPONSE BOOKLET.

Note that each page in your RESPONSE BOOKLET has two response blocks. The left-hand block (items 1-25) is for entering responses to statements printed on LEFT pages of this TASK BOOKLET; the right-hand block (items 26-50) is for the responses to statements printed on RIGHT pages. Make sure that your answers are recorded in the appropriate block on every page. DO NOT MAKE ANY MARKS OTHER THAN YOUR ANSWERS!

Each time you start a new page in your RESPONSE BOOKLET, check the page on your TASK BOOKLET. See that the numbers match; then mark the page number in "Box X" in the response page (see instructions at the top of response page.) This is necessary for computer processing.

Tear the Response Guide (p. xiii) at the perforation, and use the correct side to respond to each task or instrument found on the following white pages. Note the following detailed explanation of responses.

Column A - (the responses to Column A differ for Part II A and Part II B, be sure to use the appropriate set of responses.)

Part II A

How often did you do this task within the last month?  
(If you were on leave, consider your immediate past working month.)

- 0 = Did not do
- 1 = Did less than 5 times
- 2 = Did 5 to 20 times
- 3 = Did 21 to 50 times
- 4 = Did 51 to 100 times
- 5 = Did more than 100 times

Part II B

How often did you use this instrument or piece of equipment within the last month? (If you were on leave, consider your immediate past working month.)

- 0 = Did not use
- 1 = Used less than 5 times
- 2 = Used 5-20 times
- 3 = Used 21-50 times
- 4 = Used 51-100 times
- 5 = Used more than 100 times

If answer in Column A is 0, go to the next statement. If answer is 1, 2, 3, 4 or 5, answer also Columns B, C & D.

Column B

Indicate the approximate time you spent on a single performance the last time you performed this task.

0 = less than one minute

1 = 1 to 4 minutes

2 = 5 to 10 minutes

3 = 11 to 20 minutes

4 = 21 to 30 minutes

5 = 31 to 60 minutes

6 = 1 to 2 hours

7 = more than 2 hours

Column C

Do you feel you need additional training to perform this task?

0 = No

1 = Yes

RESPONSE GUIDE

(DO NOT LOSE THIS TAB)

HOW TO RESPOND TO PART IIA - LIST OF TASKS

X ANSWER COL. A FIRST. IF A = 0, GO TO NEXT STATEMENT: IF A = 1-5, ANSWER COLUMNS B, C & D ALSO.  
1  
1

A	B	C	D
FREQUENCY	TIME CONSUMED (single performance the last time performed)	DO YOU FEEL YOU NEED ADDITIONAL TRAINING TO PER- FORM THIS TASK?	OPTION (Additional instructions will be given if this column is used)
0=DID NOT DO LAST MONTH	0=LESS THAN 1 MINUTE	0=NO	
1=DID LESS THAN 5 TIMES	1=1 TO 4 MINUTES	1=YES	
2=DID 5 TO 20 TIMES	2=5 TO 10 MINUTES		
3=DID 21 TO 50 TIMES	3=11 TO 20 MINUTES		
4=DID 51 TO 100 TIMES	4=21 TO 30 MINUTES		
5=DID <u>MORE THAN 100 TIMES</u>	5=31 TO 60 MINUTES		
	6=1 TO 2 HOURS		
	7= <u>MORE THAN 2 HOURS</u>		

RESPONSE GUIDE

(DO NOT LOSE THIS TAB)

HOW TO RESPOND TO PART IIB - LIST OF INSTRUMENTS AND EQUIPMENT

ANSWER COL. A FIRST. IF A = 0, GO TO NEXT STATEMENT: IF A = 1-5, ANSWER COLUMNS B, C & D ALSO.

A	B	C	D
FREQUENCY	TIME CONSUMED (last time used)	DO YOU FEEL YOU NEED ADDITIONAL TRAINING TO PER- FORM THIS TASK?	OPTION (Additional instructions will be given if this column is used)
0=DID NOT USE LAST MONTH 1=USED LESS THAN 5 TIMES 2=USED 5 TO 20 TIMES 3=USED 21 TO 50 TIMES 4=USED 51 TO 100 TIMES 5=USED MORE THAN 100 TIMES	0=LESS THAN 1 MINUTE 1=1 TO 4 MINUTES 2=5 TO 10 MINUTES 3=11 TO 20 MINUTES 4=21 TO 30 MINUTES 5=31 TO 60 MINUTES 6=1 TO 2 HOURS 7=MORE THAN 2 HOURS	0=NO 1=YES	

Part II A

LIST OF TASKS

LEFT PAGE 01 ORTHO (HOSP CORPS) TASK BOOKLET

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 01 OF RESPONSE BOOKLET
1	RECEIVE PATIENTS ON ARRIVAL, I.E. INTRODUCE SELF, OBTAIN PATIENT'S NAME
2	INSTRUCT OR HELP PATIENT/FAMILY FILL OUT FORMS
3	VERIFY IDENTIFICATION OF PATIENT, E.G. FOR TREATMENT, MEDICATIONS, EXAMINATION
4	TRANSPORT NON AMBULATORY PATIENT TO OTHER DEPARTMENTS/CLINICS
5	LOAD/UNLOAD PATIENTS FROM STRETCHERS (GURNEY)
6	ASSIST PATIENTS IN/OUT OF BED, EXAM OR O.R. TABLES
7	ASSIST PATIENT TO STAND/WALK/DANGLE
8	MOVE/POSITION PATIENT WITH SUSPECTED FRACTURES OF EXTREMITIES
9	MOVE/POSITION PATIENT WITH SUSPECTED SPINAL FRACTURES OR CORD INJURIES
10	MOVE/POSITION COMATOSE/ANESTHETIZED PATIENT
11	TURN PATIENT ON STRYKER FRAME
12	TURN PATIENT ON CIRCOELECTRIC BED
13	POSITION PATIENT IN BODY ALIGNMENT
14	CLEAN AND CLOTHE PATIENTS AFTER SURGERY/TREATMENT/EXAMINATION
15	EXPLAIN TO PATIENT/FAMILY POST-OP PROCEDURES/CARE FOR RADICAL SURGERY
16	INFORM PATIENT OF PROCEDURES REQUIRED PRIOR TO/DURING EXAMINATION/TEST/TREATMENT
17	EXPLAIN/ANSWER PATIENT'S QUESTIONS REGARDING EXAMINATION/TEST/TREATMENT PROCEDURES
18	ASCERTAIN IF PATIENT HAS BEEN PREPPED FOR TEST/TREATMENT PROCEDURE
19	ASK PATIENT/CHECK CHART FOR CONTRAINDICATION FOR TREATMENT, PROCEDURE, TEST
20	REASSURE/CALM APPREHENSIVE (ANXIOUS) PATIENT
21	EXPLAIN PHYSIOLOGICAL BASIS FOR THERAPY/TREATMENT TO PATIENT/FAMILY
22	EXPLAIN LUMBAR PUNCTURE PROCEDURES TO PATIENT
23	EXPLAIN MAJOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
24	EXPLAIN MINOR SURGICAL PROCEDURE/OPERATION TO PATIENT/FAMILY
25	GIVE PHISOHX/BETADINE SCRUB TO PATIENTS

GO TO RIGHT HAND PAGE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 01 OF RESPONSE BOOKLET
26	SHAVE AND SCRUB PATIENT FOR SURGERY OR DELIVERY OR TREATMENT OR EXAMINATION
27	PREPARE SKIN SITE WITH ANTISEPTIC SOLUTION PRIOR TO INCISION/SUTURING/TREATMENT OR EXAMINATION
28	DRAPE/GOWN PATIENT FOR EXAMINATION/TREATMENT
29	DRAPE/UNDRAPE PATIENT FOR SURGERY
30	GROUND PATIENT, E.G. FOR ELECTRICAL CAUTERIZATION, DEFIBRILLATION, EKG
31	OBTAIN PRELIMINARY MEDICAL HISTORY, I.E. PAST/PRESENT COMPLAINTS, ALLERGIES, MEDICATIONS
32	OBSERVE/REPORT SYMPTOMS OF SIDE EFFECTS TO TREATMENT/MEDICATION
33	TAKE BLOOD PRESSURE
34	CHECK RADIAL (WRIST) PULSE
35	PALPATE NECK FOR MASSES/NODES
36	PALPATE CHEST FOR MASSES/NODES
37	ASSESS PATIENT'S TOLERANCE OF EXERCISE OR ACTIVITY
38	EVALUATE PATIENT'S COMPLAINTS OR SYMPTOMS OF PAIN
39	OBSERVE/RECORD OR DESCRIBE CHARACTERISTICS OF DRAINAGE FROM INCISIONS/WOUNDS
40	MAKE PATIENT ROUNDS OF WARDS/SECTION/UNIT/HOSPITAL
41	REVIEW DOCTOR'S ORDERS AND INSTRUCTIONS WITH DOCTOR
42	MAKE SUGGESTION REGARDING PATIENT CARE, E.G. NEED OF MEDICATION, TREATMENT
43	CONFER WITH CORPSMAN TO DISCUSS PATIENT TREATMENT/PROGRESS/PROBLEM
44	NOTIFY MEDICAL PERSONNEL OF TREATMENT NEEDS FOR PATIENT
45	WRITE NURSING NOTES
46	WRITE ORDERS IN PATIENT'S CHART FOR DOCTOR'S COUNTERSIGNATURE
47	RECOMMEND PATIENT'S TRANSFER ACCORDING TO NEED/READINESS, E.G. FROM R.R., TO DELIVERY ROOM
48	VERIFY COMPLETENESS OF DOCTOR'S ORDERS, E.G. FOR ALL ROUTINE ADMISSION OR PRE-OP ORDERS
49	DETERMINE NEED TO NOTIFY DOCTOR/NURSE OF PATIENT'S CONDITION
50	CONSULT DOCTOR OR NURSE TO OBTAIN INFORMATION/ADVICE ON PATIENT CARE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 02 OF RESPONSE BOOKLET
1	INFORM DOCTOR/NURSE OF PATIENT'S CONDITION, E.G. DESCRIPTION OF INJURY, SYMPTOMS, RESPONSE
2	MODIFY PATIENT CARE ACCORDING TO PATIENT'S RESPONSE/NEED, E.G. PHYSICAL ACTIVITY
3	PLAN/MODIFY DIAGNOSTIC PROCEDURES ACCORDING TO PATIENT'S RESPONSE/NEED
4	SCREEN PATIENT VIA TELEPHONE TO DETERMINE NEED FOR MEDICAL ATTENTION
5	SCREEN PATIENT ON ARRIVAL TO DETERMINE WHICH STAFF MEMBER PATIENT SHOULD SEE
6	REFER PATIENT TO DOCTOR FOR TREATMENT
7	INITIATE AND ORDER DIAGNOSTIC TEST
8	INITIATE TREATMENT PROCEDURES IN THE ABSENCE OF A DOCTOR
9	INITIATE TREATMENT PROCEDURES IN THE ABSENCE OF A DOCTOR
10	DETERMINE METHOD OF MOVING/TRANSPORTING PATIENT
11	GIVE EMERGENCY TREATMENT/FIRST AID FOR SHOCK
12	GIVE EMERGENCY TREATMENT/FIRST AID FOR EXTERNAL HEMORRAGE
13	CALCULATE DOSAGE OF DIAGNOSTIC PHARMACEUTICAL, E.G. BSP DYE
14	CHECK/CORRECT CALCULATIONS PERFORMED BY OTHER TECHNICIANS
15	POUR/DRAW UP MEDICATIONS OTHER THAN NARCOTICS AND CONTROLLED DRUGS
16	POUR/DRAW UP NARCOTICS AND CONTROLLED DRUGS
17	PREPARE LOCAL ANESTHETIC SOLUTIONS FOR USE
18	ASSESS PATIENT'S RESPONSE TO MEDICATION THERAPY
19	WRITE PRESCRIPTION RENEWALS FOR DOCTOR'S SIGNATURE
20	CONFER WITH PRESCRIBING DOCTOR ON QUESTIONS CONCERNING PRESCRIPTIONS
21	ANSWER INQUIRIES REGARDING DRUG REACTION
22	ADMINISTER MEDICATION BY INTRAMUSCULAR INJECTION
23	ADMINISTER MEDICATION BY SUBCUTANEOUS INJECTION
24	EXPLAIN/ANSWER PATIENT/FAMILY QUESTIONS ABOUT MEDICATIONS, E.G. PURPOSE, DOSE, SCHEDULE
25	ADMINISTER I.V. MEDICATION DIRECTLY INTO VEIN

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 02  
| OF RESPONSE BOOKLET

- 26 | ADMINISTER MEDICATION BY INJECTION INTO IV TUBING
- 27 | ADMINISTER I.V. MEDICATION VIA SOLUSET, PIGGY BACK, OR I.V. BOTTLE
- 28 | START I.V. THERAPY VIA NEEDLE/SCALP VEIN/BUTTERFLY
- 29 | START I.V. THERAPY VIA MEDICUT (ANGIOCATH, JELCO)
- 30 | PERFORM INTRAVENOUS CUTDOWN
- 31 | START/HANG BLOOD TRANSFUSION
- 32 | ADMINISTER BLOOD EXPANDER OTHER THAN BLOOD, E.G. PLASMA, ALBUMIN
- 33 | CHECK SKIN FOR AIR IN TISSUE (CREPITUS)
- 34 | GIVE HEAT TREATMENT, E.G. HYDROCOLLATOR/K PACK, HEAT LAMP
- 35 | GIVE MASSAGE TO REDUCE EDEMA
- 36 | GIVE MASSAGE TO REDUCE MUSCLE SPASM
- 37 | TEACH PATIENT TO TOUGHEN AND MATURE STUMP, E.G. TAPOTEMENT
- 38 | TEACH STUMP HYGIENE
- 39 | CHECK DRESSINGS, E.G. FOR CLEANLINESS
- 40 | CLEAN WOUND, CUT, ABRASION
- 41 | APPLY/CHANGE STERILE DRESSINGS
- 42 | APPLY/CHANGE PEDICLE SKIN GRAFT DRESSINGS
- 43 | REMOVE SUTURES
- 44 | REMOVE/SHORTEN DRAIN
- 45 | CHECK/EXAMINE INCISIONS/WOUNDS FOR PROGRESS OF HEALING
- 46 | CONTROL BLEEDING BY PRESSURE DRESSING
- 47 | EXAMINE AND DESCRIBE BURNS, I. E. SOURCE, AREA, DEGREE
- 48 | EXAMINE FOR ENTRY AND EXIT AREA OF SHRAPNEL OR BULLETS
- 49 | EXAMINE FOR SYMPTOMS OF EXTERNAL FUNGAL INFECTIONS, E.G. RINGWORM
- 50 | EXAMINE FOR SYMPTOMS OF SEBORRHEIC DERMATITIS AND PSORIASIS

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 03 OF RESPONSE BOOKLET
1	EXAMINE FOR VIRAL INFECTIONS OF THE SKIN, E.G. WARTS
2	ADMINISTER TISSUE INFILTRATION/LOCAL ANESTHESIA
3	ADMINISTER DIGITAL BLOCK ANESTHESIA
4	SUTURE SKIN
5	SUTURE SUBCUTANEOUS TISSUE
6	DRIVE IN SURGICAL PIN/ROD/FASTENER
7	PREPARE AND POSITION PROSTHESIS/GRAFT TISSUE DURING SURGICAL PROCEDURE
8	SUTURE MUCOSAL TISSUE
9	SUTURE FASCIA
10	GOWN AND GLOVE PERSONNEL FOR STERILE PROCEDURE
11	CLEAN AND REPOSITION INSTRUMENTS DURING SURGICAL PROCEDURE
12	SUTURE MUSCLE
13	SUTURE FACIAL LACERATIONS
14	ADJUST SURGICAL INSTRUMENTS/EQUIPMENT DURING SURGICAL PROCEDURE
15	PASS CONTAMINATED MATERIAL TO CIRCULATOR
16	INSERT DRAIN/WOUND CATHETER, E. G. PENROSE, RUBBER BAND
17	DEBRIDE WOUND/BURN
18	PASS SPECIMEN TO CIRCULATOR
19	COUNT SPONGES DURING/AFTER SURGICAL PROCEDURE
20	PERFORM SECONDARY CLOSURE OF WOUND, E.G. DEBRIDE, INSERT DRAIN, SUTURE
21	EXCISE SEBACEOUS CYST/LIPOMA
22	REMOVE CONTAMINATED GLOVES FROM SURGICAL TEAM
23	REPORT BREAK IN STERILE TECHNIQUE TO PERSONNEL
24	INCISE AND DRAIN SUPERFICIAL ABSCESS
25	SUPPLY PHYSICAL COMFORT TO SURGICAL TEAM, E.G. WIPE BROW, RUB BACK

GO TO RIGHT HAND PAGE

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| TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 03  
OF RESPONSE BOOKLET

26	OBTAIN PROSTHESIS FOR SURGICAL PROCEDURE, E.G. AORTIC GRAPH, PIN, PLATE, IMPLANT	
27	MAINTAIN DRY STERILE FIELD DURING SURGERY	
28	INCISION AND DRAINAGE	SCRUB
29	ARTHROTOMY	SCRUB
30	OSTEOTOMY	SCRUB
31	ARTHROPLASTY	SCRUB
32	TENORRHAPHY	SCRUB
33	AMPUTATION	SCRUB
34	DISARTICULATION	SCRUB
35	ARTHRODESIS	SCRUB
36	TRIPLE ARTHRODESIS	SCRUB
37	MENISECTOMY	SCRUB
38	OPEN REDUCTION OF FRACTURES	SCRUB
39	SPINAL FUSION	SCRUB
40	HIP NAILING	SCRUB
41	INSERTION OF ORTHOPEDIC PINS, NAILS	SCRUB
42	EXTRACTION OF ORTHOPEDIC PINS	SCRUB
43	BONE GRAFTS	SCRUB
44	INSERTION OF AUSTIN-MOORE PROSTHESIS	SCRUB
45	INSERTION OF TOTAL HIP PROSTHESIS	SCRUB
46	INSERTION OF SPINAL PROSTHESIS	SCRUB
47	TENDON TRANSFER	SCRUB
48	BUNIONECTOMY	SCRUB
49	SOUTHWICK PROCEDURE KNEE	SCRUB
50	MAGUSON-STOCK REPAIR OF SHOULDER	SCRUB

TURN PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 04  
| OF RESPONSE BOOKLET

1	ICINOPLASTY	SCRUB
2	CARPAL TUNNEL RELEASE	SCRUB
3	STUMP REVISION	SCRUB
4	INSERTION OF BONE PLATE	SCRUB
5	GANGLIONECTOMY	SCRUB
6	Z-PLASTY SKIN	SCRUB
7	SKIN GRAFTS	SCRUB
8	SCAR REVISIONS	SCRUB
9	REPAIR OF MULTIPLE FACIAL FRACTURES	SCRUB
10	INCISION AND DRAINAGE	CIRCULATE
11	ARTHROTOMY	CIRCULATE
12	OSTEOTOMY	CIRCULATE
13	ARTHROPLASTY	CIRCULATE
14	TENORRHAPHY	CIRCULATE
15	AMPUTATION	CIRCULATE
16	DISARTICULATION	CIRCULATE
17	ARTHRODESIS	CIRCULATE
18	TRIPLE ARTHRODESIS	CIRCULATE
19	MENISECTOMY	CIRCULATE
20	OPEN REDUCTION OF FRACTURES	CIRCULATE
21	SPINAL FUSION	CIRCULATE
22	HIP NAILING	CIRCULATE
23	INSERTION OF ORTHOPEDIC PINS, NAILS	CIRCULATE
24	EXTRACTION OF ORTHOPEDIC PINS	CIRCULATE
25	BONE GRAFTS	CIRCULATE

GO TO RIGHT HAND PAGE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 04 OF RESPONSE BOOKLET	
26	INSERTION OF AUSTIN-MOORE PROSTHESIS	CIRCULATE
27	INSERTION OF TOTAL HIP PROSTHESIS	CIRCULATE
28	INSERTION OF SPINAL PROSTHESIS	CIRCULATE
29	TENDON TRANSFER	CIRCULATE
30	BUNIONECTOMY	CIRCULATE
31	SOUTHWICK PROCEDURE KNEE	CIRCULATE
32	MAGUSON-STOCK REPAIR OF SHOULDER	CIRCULATE
33	CARPAL TUNNEL RELEASE	CIRCULATE
34	STUMP REVISION	CIRCULATE
35	INSERTION OF BONE PLATE	CIRCULATE
36	GANGLIONECTOMY	CIRCULATE
37	Z-PLASTY SKIN	CIRCULATE
38	SKIN GRAFTS	CIRCULATE
39	SCAR REVISIONS	CIRCULATE
40	DERMABRASION	CIRCULATE
41	REPAIR OF MULTIPLE FACIAL FRACTURES	CIRCULATE
42	TAPE ANKLE, WRIST, KNEE, CHEST FOR IMMOBILIZATION	
43	APPLY/CHANGE BANDAGES, E.G. ROLLER, TRIANGULAR, KURLEX	
44	GIVE CARE TO PATIENT IN A CAST, E.G. PAD/PETAL CAST, TURN	
45	GIVE HYDROTHERAPY TO HELP PATIENT ACHIEVE RANGE OF MOTION	
46	WRAP STUMP FOR SHAPE/SHRINKAGE	
47	GOWN FOR STERILE PROCEDURE	
48	SET UP MAYO STAND WITH INSTRUMENTS	
49	PASS STERILE DRAPES TO SURGEON	
50	OBTAIN EQUIPMENT, MEDICATIONS, INSTRUMENTS P.R.N. FOR PERSONNEL PERFORMING STERILE PROCEDURE	

TURN PAGE

TASK NO. ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 05  
OF RESPONSE BOOKLET

- 1 TIE UP SURGICAL GOWN FOR SCRUBBED PERSONNEL
- 2 PASS STERILE MATERIALS, EQUIPMENT, MEDICATION, TO PERSONNEL PERFORMING STERILE PROCEDURE
- 3 ARRANGE FURNITURE/SET UP EQUIPMENT/SUPPLIES FOR PROCEDURE, E.G. EXAM, TREATMENT
- 4 HOLD VIALS/AMPULES OF DRUGS FOR USE AND DRUG VERIFICATION DURING STERILE PROCEDURE
- 5 GLOVE FOR STERILE PROCEDURE
- 6 MAKE INCISION FOR MINOR SURGERY
- 7 AUSCULTATE HEART TO DETECT ABNORMAL SOUNDS, I.E. P.V.C., BRUITS, MURMURS
- 8 PERFORM CIRCULATION CHECK, E.G. COLOR, PULSE, TEMPERATURE OF SKIN, CAPILLARY RETURN
- 9 TEACH VASCULAR EXERCISES, E.G. BUERGER-ALLEN
- 10 EXAMINE FOR SYMPTOMS OF INTERNAL HEMORRHAGE
- 11 COLLECT, COUNT AND LAYOUT USED SPONGES FOR CALCULATING BLOOD LOSS AND FOR SPONGE COUNT
- 12 WEIGH USED SPONGES FOR CALCULATING BLOOD LOSS
- 13 EXAMINE LEGS TO DETECT/RULE OUT CALF TENDERNESS/VARICOSE VEINS
- 14 PERFORM TILT TEST FOR CIRCULATION
- 15 EVALUATE SYMPTOMS OF PATIENT COMPLAINING OF CHEST PAIN
- 16 EXAMINE FOR SYMPTOMS OF CONGESTIVE HEART FAILURE
- 17 AUSCULTATE LUNGS TO DETECT ABNORMAL SOUNDS, I.E. RALES, WHEEZE, RONCHI
- 18 PERFORM TRACHEOTOMY/TRACHEOSTOMY
- 19 EXPLAIN/ANSWER PATIENT/FAMILY QUESTIONS ABOUT BEHAVIORAL CHANGES, E.G. DEPRESSION, MEMORY LOSS
- 20 OBSERVE PATIENT'S PHYSICAL MOVEMENT, E.G. MUSCULAR COORDINATION, POSTURE, BALANCE
- 21 CHECK PATIENT'S SENSORY RESPONSES TO TASTE, SMELL
- 22 CHECK BABINSKI REFLEX
- 23 CHECK ELBOW/KNEE-JERK, I.E. BICEPS/PATELLAR REFLEX
- 24 EXAMINE TYMPANIC MEMBRANE FOR REDNESS, SWELLING
- 25 EXAMINE TYMPANIC MEMBRANE FOR PERFORATION

GO TO RIGHT HAND PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 05  
| OF RESPONSE BOOKLET

- 26 | CALCULATE/PLAN ORAL FLUID RESTRICTIONS
- 27 | EXAMINE MOUTH AND PHARYNX FOR LESIONS, SORES, LEUKOPLAKIA
- 28 | OBSERVE FOR/REPORT SYMPTOMS OF CARIES, SIMPLE AND ADVANCED
- 29 | OBSERVE FOR/REPORT SYMPTOMS OF PERIODONTAL ABSCESS
- 30 | OBSERVE FOR/REPORT SYMPTOMS OF DENTURE IRRITATION
- 31 | OBSERVE FOR/REPORT SYMPTOMS OF INFECTION OF ORAL MUCOSA, E.G.  
| THRUSH
- 32 | PALPATE (FEEL) ABDOMEN FOR DISTENSION (HARDNESS/SOFTNESS)
- 33 | PALPATE (FEEL) BLADDER FOR DISTENSION (FULLNESS)
- 34 | EXAMINE FOR SYMPTOMS OF VENEREAL DISEASE
- 35 | CATHETERIZE THE URINARY BLADDER, FEMALE
- 36 | CATHETERIZE URINARY BLADDER, CHILDREN
- 37 | MEASURE MUSCLE GIRTH
- 38 | MEASURE RANGE OF MOTION OF JOINTS
- 39 | CHECK/OUTLINE AREA OF DRAINAGE ON CAST
- 40 | OBSERVE/REPORT PATIENT'S MUSCLE TONE, E.G. RIGID, FLACCID,  
| SPASTIC, SPASMS
- 41 | PALPATE MUSCLES/TENDONS FOR CONTRACTION/CONTRACTURES
- 42 | PALPATE COSTOVERTEBRAL ANGLE FOR DEFORMITIES/PAIN
- 43 | PALPATE JOINTS FOR SWELLING, DEFORMITY, PAIN
- 44 | OBSERVE FOR/REPORT SYMPTOMS/SIGNS OF SKELETAL DISLOCATION
- 45 | EXAMINE FOR SIGNS OF SPAINS
- 46 | EXAMINE FOR SYMPTOMS OF FRACTURES
- 47 | EXAMINE FOR EVIDENCE OF SPINAL CORD INJURIES
- 48 | OBSERVE FOR/REPORT SYMPTOMS OF OSTEOMYELITIS
- 49 | EXAMINE CHILD'S FEET FOR PIGEON TOE (TALIPES VARUS)
- 50 | TEACH ACTIVE RANGE OF MOTION EXERCISES

TURN PAGE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 06 OF RESPONSE BOOKLET
1	ASSIST PATIENT IN PERFORMING ACTIVE ASSISTIVE RANGE OF MOTION EXERCISES
2	GIVE PASSIVE STRETCH AGAINST CONTRACTURE
3	INSTRUCT PATIENT HOW TO ACTIVELY STRETCH CONTRACTURE
4	INSTRUCT PATIENT IN EXERCISES TO ACHIEVE/STRENGTHEN HAND GRASP
5	INSTRUCT PATIENT IN EXERCISES TO ACHIEVE/STRENGTHEN FINGER DEXTERITY
6	TEACH PATIENT TO USE CANES
7	TEACH PATIENT TO USE AXILLARY CRUTCHES
8	TEACH PATIENT TO USE LOFSTRAND CRUTCHES
9	TEACH PATIENT TWO POINT CRUTCH GAIT
10	TEACH PATIENT FOUR POINT CRUTCH GAIT
11	TEACH PATIENT SWING TO OR SWING THROUGH GAIT
12	TEACH PATIENT WITH CRUTCHES TO ASCEND/DESCEND STAIRS AND RAMP
13	TEACH PATIENT THREE POINT CRUTCH GAIT
14	TEACH PATIENT/FAMILY TRANSFER TECHNIQUES, E.G. BED TO CHAIR, CHAIR TO COMMODE
15	DETERMINE TIME FOR APPLICATION/REMOVAL OF CAST
16	DETERMINE NEED TO TRIM OR BIVALVE CAST
17	APPLY RIB BELT
18	APPLY/REMOVE SLING, E.G. ARM, LEG
19	APPLY/REMOVE SPLINT
20	APPLY/REMOVE PROSTHETIC APPLIANCE
21	APPLY/REMOVE BRACE
22	APPLY BODY PLASTER CAST (SPICA)
23	APPLY CERVICAL COLLAR PLASTER CAST
24	APPLY HIP SPICA PLASTER CAST
25	APPLY LONG LEG CYLINDER PLASTER CAST

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| TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 06  
OF RESPONSE BOOKLET

- |    |                                                                                          |
|----|------------------------------------------------------------------------------------------|
| 26 | APPLY LONG LEG PLASTER CAST OTHER THAN CYLINDER CAST                                     |
| 27 | APPLY SHORT LEG PLASTER CAST                                                             |
| 28 | APPLY TRACTION SPLINTS                                                                   |
| 29 | APPLY LONG ARM PLASTER CAST                                                              |
| 30 | APPLY VELPEAU PLASTER CAST                                                               |
| 31 | APPLY SHORT ARM PLASTER CAST                                                             |
| 32 | APPLY GAUNTLET/NAVICULAR PLASTER CAST                                                    |
| 33 | APPLY HAND PLASTER CAST                                                                  |
| 34 | APPLY EXTENSION (HYPER) PLASTER JACKET                                                   |
| 35 | APPLY FLEXION PLASTER JACKET                                                             |
| 36 | APPLY CALOT PLASTER JACKET                                                               |
| 37 | APPLY PLASTER LEG SPLINT                                                                 |
| 38 | APPLY PLASTER ARM SPLINT                                                                 |
| 39 | APPLY FINGER/HAND SPLINT                                                                 |
| 40 | APPLY CLUB FOOT PLASTER CAST                                                             |
| 41 | APPLY REESER PLASTER JACKET                                                              |
| 42 | APPLY SARMIENTO PLASTER CAST                                                             |
| 43 | APPLY MINERVA JACKET PLASTER CAST                                                        |
| 44 | APPLY WALKING PLASTER CAST                                                               |
| 45 | APPLY QUADRALATERAL PLASTER CAST (FOR FRACTURED FEMUR)                                   |
| 46 | BIVALVE/WINDOW/TRIM PLASTER CAST                                                         |
| 47 | REMOVE PLASTER CAST                                                                      |
| 48 | GIVE CRUTCHFIELD TONG CARE                                                               |
| 49 | TAKE PATIENT IN AND OUT OF TRACTION                                                      |
| 50 | DETERMINE NEED AND INITIATE REALIGNMENT OF TRACTION, E.G. LINE OF PULL, CHANGE IN WEIGHT |

TURN PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 07  
| OF RESPONSE BOOKLET

- 1 | PLACE STUMP IN SKIN TRACTION
- 2 | PLACE PATIENT IN CERVICAL HALTER TRACTION
- 3 | PLACE PATIENT IN BRYANT'S TRACTION
- 4 | PLACE PATIENT IN BUCK'S TRACTION
- 5 | PLACE PATIENT IN RUSSELL TRACTION
- 6 | PLACE PATIENT IN SKELETAL TRACTION WITH THOMAS SPLINT
- 7 | PLACE PATIENT IN BALANCED SUSPENSION TRACTION
- 8 | PLACE PATIENT IN T-SPLINT CLAVICLE TRACTION
- 9 | PLACE PATIENT IN DUNLOP'S ARM TRACTION
- 10 | PLACE PATIENT IN PELVIC TRACTION
- 11 | PLACE PATIENT IN SKULL TRACTION WITH CRUTCHFIELD TONGS
- 12 | REMOVE ORTHOPEDIC PIN, I.E. SKELETAL TRACTION
- 13 | SET FRACTURE, I.E. CLOSED REDUCTION
- 14 | FABRICATE SPLINTS FOR PREVENTION/CORRECTION OF ORTHOPEDIC DEFORMITY
- 15 | FABRICATE FRACTURE SPLINT
- 16 | FABRICATE ORTHOPEDIC SHOE CORRECTION
- 17 | FABRICATE PATTERN FOR MOULDS
- 18 | EXPLAIN X-RAY PROCEDURES TO PATIENT
- 19 | REPEAT SHOOTING OF X-RAY UNTIL X-RAY IS READABLE
- 20 | INFORM DOCTOR OF UNEXPECTED X-RAY FINDINGS
- 21 | READ X-RAY FILMS FOR TECHNICAL ADEQUACY
- 22 | POINT OUT POSSIBLE ABNORMALITIES ON X-RAY FILM TO DOCTOR
- 23 | DETECT BONE ABNORMALITIES ON X-RAY FILM
- 24 | CHECK TONIC NECK REFLEX (FENCING POSITION)
- 25 | OBTAIN BIRTH HISTORY

GO TO RIGHT HAND PAGE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 07 OF RESPONSE BOOKLET
26	ELICIT INFORMATION TO ASCERTAIN PATIENT'S UNDERSTANDING/ACCEPTANCE OF ILLNESS/TREATMENT
27	CONFER WITH PATIENT/FAMILY TO PLAN PATIENT CARE
28	REVIEW PAST AND PRESENT MEDICAL/DENTAL HISTORY TO PLAN CARE
29	EVALUATE PATIENT'S SOCIO-CULTURAL BACKGROUND FOR INFLUENCES ON HEALTH CARE
30	SUGGEST CHANGES IN NURSING CARE PLAN FOR PATIENT
31	INITIATE AND IMPLEMENT CHANGE IN PATIENT CARE PLAN
32	EVALUATE PATIENT'S PROGRESS/RESPONSE TO THERAPEUTIC REGIME
33	EVALUATE QUALITY OF NURSING CARE GIVEN TO INDIVIDUAL PATIENT
34	COORDINATE PATIENT TREATMENT PLAN WITH OTHER DEPARTMENTS/AGENCIES
35	CONFER WITH PARAMEDICAL PERSONNEL TO DISCUSS PATIENT PROGRESS/PROBLEMS, E.G. O.T., P.T., SOCIAL WORKER
36	RECOMMEND PSYCHOLOGICAL APPROACH TO USE WITH PATIENT
37	RECOMMEND NEED FOR PARAMEDICAL CONSULT OR REFERRAL, E.G. SOCIAL WORKER, O.T., P.T.
38	FOLLOW UP PATIENT TO DETERMINE IF NEEDED SERVICES WERE OBTAINED
39	INTERVIEW/EVALUATE PATIENT/FAMILY FOR REFERRAL/CONSULT
40	PLAN PATIENT DISCHARGE, E.G. REFERRALS NEEDED, HEALTH EDUCATION NEEDS, FAMILY/HOME PREPARATION
41	INSTRUCT FAMILY IN CARE OF PATIENT ON PASS/LEAVE, E.G. PATIENT LIMITATIONS, POTENTIAL PROBLEMS
42	EVALUATE PATIENT/FAMILY RESOURCES/PREPARATION FOR ADMISSION/DISCHARGE, E.G. TRANSPORTATION, CHILD CARE
43	FOLLOW UP/EVALUATE PATIENT TREATMENT/PROGRESS AFTER DISCHARGE FROM MEDICAL FACILITY
44	FOLLOW UP FAILED APPOINTMENT, E.G. BY PHONE, LETTER, HOME VIST
45	INFORM PATIENT OF CLUBS ESTABLISHED FOR PEOPLE WITH SPECIFIC DISEASES
46	DETERMINE TYPE OF LECTURES AND CONSULTANTS FOR PATIENT INSTRUCTION
47	EVALUATE PSYCHOLOGICAL NEEDS OF PATIENT IN RELATION TO HIS PHYSICAL DISABILITY
48	REINFORCE PATIENT'S POSITIVE RESPONSE TO THERAPY
49	INFORM PATIENT OF PROGRESS OF THERAPY
50	CONDUCT CLASSES FOR GROUPS OF PATIENTS REGARDING CARE OF SPECIFIC DISABILITY/DISEASE

ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE OR  
OF RESPONSE BOOKLET

- 1 | TEACH PATIENT/FAMILY CARE OF SPECIFIC DISEASES/DISABILITIES,  
E.G. DIABETES, CVA
- 2 | RECOMMEND/GIVE PATIENT/FAMILY SUPPLEMENTARY HEALTH EDUCATION  
PAMPHLETS OR BOOKS
- 3 | TEACH PATIENT/FAMILY SELF USE OF THERAPEUTIC EQUIPMENT/DEVICES
- 4 | TEACH PATIENT/FAMILY NURSING CARE PROCEDURES, E.G. DRESSING  
CHANGE, CAST CARE
- 5 | COUNSEL FAMILY IN CARE OF GERIATRIC PATIENT
- 6 | TEACH PATIENT/FAMILY HEALTH PROMOTION PRACTICES, E.G. ROUTINE  
PHYSICALS, EXERCISE, DIET
- 7 | TEACH PATIENT/FAMILY WARNING SIGNS OF CANCER
- 8 | INSTRUCT PATIENT IN PREVENTIVE CARE OF FINGER AND TOENAIL  
ABNORMALITIES
- 9 | LISTEN TO PATIENT/FAMILY DISCUSS THEIR PERSONAL PROBLEMS
- 10 | COUNSEL PATIENT WITH TERMINAL ILLNESS OR HIS FAMILY
- 11 | PREPARE, LABEL AND SEND ROUTINE SPECIMENS E.G. URINE, BLOOD TO  
LABORATORY
- 12 | PREPARE, LABEL AND SEND CULTURE SPECIMENS TO LABORATORY
- 13 | PREPARE, LABEL AND SEND BIOPSY SPECIMENS TO LABORATORY
- 14 | COLLECT BLOOD FROM CHILDREN/INFANTS
- 15 | TAKE WOUND SPECIMEN FROM PATIENT
- 16 | TAKE PUS SPECIMEN FROM PATIENT
- 17 | PREPARE QUALITY CONTROL CULTURES
- 18 | DETERMINE COAGULATION (CLOTTING) TIME
- 19 | SCRUB FOR SURGERY/STERILE PROCEDURE
- 20 | SET UP SURGICAL BACK TABLE WITH STERILE INSTRUMENTS/EQUIPMENT
- 21 | SET UP SUTURE BOOK/TOWEL
- 22 | PASS INSTRUMENTS TO PHYSICIAN
- 23 | CLAMP BLOOD VESSELS
- 24 | TIE SUTURES/LIGATURES FOR HEMOSTASIS
- 25 | CUT TISSUE AS DIRECTED BY SURGEON

GO TO RIGHT HAND PAGE

TASK NO.	ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE OR OF RESPONSE BOOKLET
26	POSITION/HOLD RETRACTORS TO MAINTAIN OPEN INCISION
27	REMOVE FLUID FROM SURGICAL SITE WITH SPONGES OR SUCTION
28	PASS STERILE ACCESSORIES, EQUIPMENT, E.G. TUBING, CORDS TO CIRCULATOR FOR CONNECTION
29	LABEL MEDICINE GLASSES WITH NAME AND AMOUNT OF DRUG FOR STERILE FIELD
30	COUNT NEEDLES/INSTRUMENTS PRE/POST SURGERY
31	FLASH STERILIZE INSTRUMENTS
32	LOG IN PATIENTS TO CLINIC/DEPARTMENT/SICK CALL
33	INSTRUCT OR HELP PATIENT/FAMILY FILL OUT FORMS
34	ANSWER TELEPHONE/TAKE MESSAGES, MEMOS
35	LOCATE MISPLACED CHARTS/HEALTH RECORDS
36	PREPARE REQUISITIONS FOR DIAGNOSTIC PROCEDURES, E.G. LAB, EEG
37	OBTAIN PATIENT'S PAST HOSPITALIZATION RECORDS/X-RAYS
38	FILE COMPLETED/RETURNED CHITS/REPORTS IN PATIENT RECORD
39	PREPARE/ASSEMBLE MEDICAL BOARD REPORTS FOR COMPLETION
40	REVIEW AND FOLLOW THROUGH ON COMPLETED CONSULT REPORTS
41	RECORD PHYSICIAN EXAMINATION FINDINGS
42	PREPARE REPORT/FEEDER REPORT ON NUMBERS OF INPATIENT/OUTPATIENT SERVICES PERFORMED
43	MAINTAIN DAILY RECORDS ON PATIENT PROCEDURES/EXAMINATIONS PERFORMED
44	PREPARE WORK ORDERS/WORK REQUESTS
45	PREPARE REPORTS FOR TRANSMITTAL TO OTHER COMMANDS
46	REVIEW REPORTS/REQUESTS FOR PROPER PREPARATION AND COMPLETION
47	COORDINATE WITH HOSPITAL ON ADMISSION OF PATIENTS
48	CONTACT OTHER DEPARTMENTS TO OBTAIN/COORDINATE PATIENT/PERSONNEL APPOINTMENTS
49	SCHEDULE APPOINTMENTS FOR CLINIC/DEPARTMENT, E.G., MAINTAIN APPOINTMENT BOOK
50	MAINTAIN CALL LIST TO FILL BROKEN/CANCELLED APPOINTMENTS

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| TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 09  
OF RESPONSE BOOKLET

- 1 | COORDINATE WITH HOSPITAL/DEPARTMENT SUPPORT SERVICES, E.G. SOCIAL SERVICES, RED CROSS
- 2 | ESTABLISH LIAISON WITH CIVILIAN SPECIALISTS/CONSULTANTS
- 3 | PREPARE RADIOGRAPHS FOR VIEWING BY DOCTOR
- 4 | MAKE RECOMMENDATIONS ON/APPROVE/DISAPPROVE PERSONNEL REQUESTS TO ATTEND MEETINGS/CONFERENCES
- 5 | CONDUCT STAFF MEETINGS TO DISCUSS PLANS/ACTIVITIES/PROBLEMS
- 6 | PREPARE STANDING OPERATING PROCEDURES, GUIDES AND INSTRUCTIONS FOR USE BY PERSONNEL
- 7 | INITIATE NEW OR CHANGED TECHNICAL PROCEDURES
- 8 | COMPOSE/DRAFT AN AGENDA FOR STAFF MEETINGS
- 9 | WRITE/ENTER INTO LOG MINUTES/NOTES OF MEETINGS
- 10 | MAINTAIN ATTENDANCE RECORDS
- 11 | ARRANGE TIME/DETAIL SCHEDULES
- 12 | ADJUST DAILY ASSIGNMENT SHEET/WORK SCHEDULE AS NEEDED
- 13 | ASSIGN PERSONNEL TO DUTIES/WORK ACCORDING TO SCHEDULE
- 14 | DETERMINE DUTIES FOR PERSONNEL
- 15 | REQUEST/RECOMMEND ADDITIONAL PERSONNEL WHEN REQUIRED
- 16 | ROTATE PERSONNEL DUTIES, E.G. FOR EXPERIENCE/VARIETY
- 17 | INTERVIEW/COUNSEL/ADVISE STAFF
- 18 | COUNSEL PERSONNEL/TRAINees ON CAREER PLANS, E.G. AVAILABILITY OF EDUCATIONAL PROGRAMS
- 19 | GIVE DIRECT SUPERVISION TO CORPSMEN/TECHNICIANS
- 20 | REVIEW SUGGESTIONS AND COMPLAINTS FROM PERSONNEL
- 21 | REVIEW/COMMENT ON/FORWARD PERSONNEL REQUESTS/MEMOS/LETTERS
- 22 | EVALUATE THE PERFORMANCE OF PERSONNEL
- 23 | RECOMMEND DISCIPLINARY ACTION FOR PERSONNEL AS REQUIRED
- 24 | RECOMMEND PERSONNEL FOR REASSIGNMENT, I.E. NEW COMMAND
- 25 | RECOMMEND PERSONNEL FOR EDUCATION/TRAINING

GO TO RIGHT HAND PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 09  
| OF RESPONSE BOOKLET

- 26 | SET UP/BREAK DOWN CLASSROOM DEMONSTRATIONS/TEACHING AIDS
- 27 | COORDINATE/ARRANGE FOR USE OF ROOMS, E.G. LECTURES, CONFERENCE
- 28 | REQUISITION TRAINING AIDS FROM OTHER HOSPITALS/CLINICS OR  
| CIVILIAN/GOVERNMENT HEALTH FACILITIES
- 29 | DESIGN TRAINING AIDS, ILLUSTRATIONS, GRAPHICS
- 30 | LEAD DISCUSSION ON MEDICAL TOPICS DURING UNIT'S CLASSES/  
| CONFERENCES
- 31 | GIVE FIRST AID INSTRUCTION
- 32 | INSTRUCT NON-MEDICAL PERSONNEL IN HEALTH SUBJECTS
- 33 | SCHEDULE LECTURES
- 34 | PLAN CONFERENCES FOR STUDENTS DURING PRACTICAL TRAINING
- 35 | SELECT TOPICS FOR STAFF LECTURE SERIES
- 36 | CONDUCT SEMINARS
- 37 | WRITE REPORTS FOR CLASSES/CONFERENCES
- 38 | DEMONSTRATE NEW EQUIPMENT OR PRODUCTS TO STUDENTS/STAFF
- 39 | DEMONSTRATE CLINICAL PROCEDURES USING PATIENT/SUBJECT
- 40 | PERFORM CLASSROOM DEMONSTRATIONS
- 41 | SELECT WORK EXPERIENCES FOR STUDENT/TRAINEE
- 42 | DECIDE WHEN TRAINEE IS CAPABLE OF PERFORMING A PROCEDURE WITHOUT  
| DIRECT SUPERVISION
- 43 | CHECK INDIVIDUAL'S PROGRESS DURING OJT
- 44 | MAINTAIN RECORD OF TRAINEE'S EXPERIENCE IN OJT PROGRAM, E.G.  
| COURSES , PRACTICAL EXPERIENCE
- 45 | POST/ENTER TRAINING INFORMATION INTO INDIVIDUAL RECORDS
- 46 | EVALUATE EFFECTIVENESS OF UNIT'S OJT PROGRAM
- 47 | PLAN CONTENT FOR OJT PROGRAM
- 48 | ORIENT TRAINEES/STUDENTS TO PROGRAM, I.E. OBJECTIVES OF PROGRAM,  
| CLASS SCHEDULE
- 49 | PLAN/WRITE STUDENTS ROTATION SCHEDULE
- 50 | EVALUATE TEACHER EFFECTIVENESS

TURN PAGE

LEFT PAGE 10 ORTHO (HOSP CORPS) TASK BOOKLET

TASK NO. ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 10  
OF RESPONSE BOOKLET

- 1 EVALUATE CLASSROOM/CLINICAL INSTRUCTIONAL TECHNIQUES
- 2 EVALUATE INSTRUCTIONAL MATERIAL FOR CONTENT
- 3 EVALUATE NURSING CARE PROCEDURES/STANDARDS
- 4 USE AND EVALUATE NEW EQUIPMENT/MATERIAL (USER-TRIAL)
- 5 CALIBRATE/TEST EXPERIMENTAL EQUIPMENT/APPARATUS
- 6 ORDER STOCK MEDICATIONS FROM PHARMACY
- 7 DO AN INVENTORY OF DRUGS OTHER THAN NARCOTICS AND CONTROLLED DRUGS
- 8 DISPOSE OF/RETURN MEDICATIONS/DRUGS WHOSE SHELF-LIFE HAS EXPIRED
- 9 MAKE LOCAL (OPEN) PURCHASE OF SUPPLIES
- 10 ORDER SUPPLIES/EQUIPMENT THROUGH FEDERAL SUPPLY SYSTEM
- 11 VERIFY AND CO-SIGN INVENTORY
- 12 DO SUPPLY/EQUIPMENT INVENTORY
- 13 ISSUE SUPPLIES/INSTRUMENTS/EQUIPMENT/MATERIALS
- 14 VERIFY/SIGN OFF ON REQUISITIONS/RECEIPTS FOR SUPPLIES/EQUIPMENT/MATERIAL
- 15 MAINTAIN PROPERTY CUSTODY CARDS FOR EQUIPMENT
- 16 DETERMINE CORRECT NUMBER OF TABLES/STRETCHERS FOR PATIENTS
- 17 COORDINATE WITH MANUFACTURERS/CONTRACTORS FOR EQUIPMENT REPAIR/MAINTENANCE
- 18 APPROVE/DISAPPROVE NEW EQUIPMENT REQUESTS
- 19 ASSIGN SPACE FOR EQUIPMENT AND SUPPLIES
- 20 DETERMINE THE PHYSICAL LAYOUT OF WORK AREA FURNITURE/EQUIPMENT
- 21 PICK UP/DELIVER EQUIPMENT
- 22 STORE SUPPLIES
- 23 STORE INSTRUMENTS
- 24 INSPECT THAT SUPPLIES/MATERIALS/EQUIPMENT ARE STORED PROPERLY
- 25 EVALUATE THE MAINTENANCE AND USE OF SUPPLIES, EQUIPMENT AND WORK SPACE

GO TO RIGHT HAND PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 10  
| OF RESPONSE BOOKLET

- 26 | SUPERVISE ROUTINE EQUIPMENT MAINTENANCE FOR SECTION/UNIT
- 27 | DETERMINE IF EQUIPMENT NEEDS REPAIR/SERVICE
- 28 | DO MINOR REPAIR ON EQUIPMENT
- 29 | MODIFY EQUIPMENT FOR NON-STANDARD USAGE
- 30 | PACKAGE (WRAP/DATE/LABEL) STERILE SUPPLIES
- 31 | PREPARE RUBBER GOODS FOR STERILIZATION
- 32 | BREAK DOWN SURGICAL INSTRUMENTS FOR POST OPERATIVE CLEANING
- 33 | WASH GLASSWARE/INSTRUMENTS
- 34 | SELECT/SET UP STANDARD INSTRUMENT TRAYS FOR SCHEDULED SURGERY
- 35 | ESTABLISH/MAINTAIN SUTURE/INSTRUMENT TRAY CARDS
- 36 | DETERMINE METHOD OF STERILIZATION FOR INSTRUMENTS/EQUIPMENT
- 37 | DETERMINE/SELECT AGENTS/PROCESSES FOR EQUIPMENT/INSTRUMENT  
| STERILIZATION
- 38 | TEST AUTOCLAVE EFFECTIVENESS WITH CULTURE STRIPS
- 39 | SELECT/SET UP INSTRUMENTS FOR SMALL PACKS
- 40 | DO HOUSEKEEPING/CLEANING DUTIES
- 41 | ARRANGE FOR HOUSEKEEPING/CLEANLINESS OF AREA
- 42 | CHANGE LINENS, E.G. BED, EXAM TABLES, BEDSIDE CURTAIN
- 43 | INSPECT SPACES FOR CLEANLINESS
- 44 | CHECK EQUIPMENT FOR ELECTRICAL HAZARDS AND GROUNDS
- 45 | DO PERIODIC MECHANICAL SAFETY CHECKS ON POWER OPERATED EQUIPMENT
- 46 | ADVISE PERSONNEL/PATIENT ON ROUTINE RADIATION SAFETY PRECAUTIONS
- 47 | ENSURE THAT SAFE INDUSTRIAL PRACTICES ARE ADHERED TO, E.G. USE  
| OF PROTECTIVE EYE GLASSES

Part II B

LIST OF INSTRUMENTS AND EQUIPMENT

LEFT PAGE 11 ORTHO (HOSP CORPS) TASK BOOKLET

( TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 11  
| OF RESPONSE BOOKLET

- 1 | GURNEY CARTS
- 2 | WHEEL CHAIR
- 3 | STETHOSCOPE
- 4 | SPHYGMOMANOMETER (BLOOD PRESSURE APPARATUS)
- 5 | SPECULUM, EAR
- 6 | HYDROCOLLATOR MACHINE
- 7 | TRAY, OPERATING ROOM PREP
- 8 | SUTURE REMOVAL SET
- 9 | TRAY, CLIP REMOVAL
- 10 | PLASTIC DRESSING TRAY
- 11 | BURN PACK
- 12 | TRAY, ANAESTHETIC, LOCAL
- 13 | TRAY, ANAESTHETIC SPINAL
- 14 | TRAY, INCISION DRAINAGE
- 15 | TRAY, JOINT ASPIRATION/INJECTION
- 16 | CVP (VENOUS PRESSURE) TRAY
- 17 | CHEST TUBE TRAY
- 18 | TRAY, LUMBAR PUNCTURE
- 19 | INSTRUMENT TRAY, MINOR SURGERY
- 20 | TRAY, SKIN BIOPSY
- 21 | TRAY, MUSCLE BIOPSY
- 22 | PARACENTESIS TRAY
- 23 | PHLEBOTOMY TRAY
- 24 | SMP (BONE MARROW) TRAY
- 25 | THORACENTESIS TRAY

GO TO RIGHT HAND PAGE

RIGHT PAGE 11 ORTHO (HOSP CORPS) TASK BOOKLET

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN RIGHT SIDE OF PAGE 11  
 | OF RESPONSE BOOKLET

- 26 | DEFIBRILLATOR, PORTABLE
- 27 | ENDOTRACHEAL TUBE
- 28 | STRYKER FRAME
- 29 | TILT TABLE
- 30 | GONIOMETER
- 31 | CERVICAL COLLARS
- 32 | BRACES (LEG, HAND, ARM)
- 33 | CRUTCHES
- 34 | WALKER
- 35 | TRACTION MACHINE, INTERMITTENT
- 36 | BALKAN FRAME
- 37 | TRACTION EQUIPMENT , E.G. PULLEYS, WEIGHTS, BOWS, CORDS
- 38 | THOMAS SPLINT AND ATTACHMENTS
- 39 | CRUTCHFIELD/VINKE TONGS
- 40 | LEG LENGTHENING DEVICES, E.G. STRYKER
- 41 | STEINMAN PIN
- 42 | ORTHOPEDIC TABLES/ACCESSORIES
- 43 | SPICA BODY TABLE
- 44 | SHERLE-BOHLER BODY JACKET MACHINE
- 45 | ALBEE COMPER TABLE
- 46 | RISSER TABLE
- 47 | SAW, PLASTER CAST
- 48 | FRACTURE SPLINTS
- 49 | CAST CUTTERS
- 50 | PLASTER CAST CART

TURN PAGE

TASK NO. | ENTER RESPONSES TO STATEMENTS BELOW IN LEFT SIDE OF PAGE 12  
| OF RESPONSE BOOKLET

- 1 | CAST BENDERS
- 2 | CAST MATERIALS, E.G. PLASTER ROLLS, SPLINTS, WEBRIL, FOAM RUBBER
- 3 | FOOT PLATES
- 4 | PROCESSING MACHINE, X-RAY FILM, AUTOMATIC
- 5 | STATIONARY X-RAY UNIT
- 6 | PORTABLE X-RAY UNIT
- 7 | X-RAY DEVELOPER, MANUAL, DRY PROCESS
- 8 | COMPOUND MICROSCOPE
- 9 | INSTRUMENT WASHER-STERILIZER
- 10 | AUTOCLAVE, DRY HEAT
- 11 | AUTOCLAVE, GAS
- 12 | AUTOCLAVE, STEAM
- 13 | ELECTRONIC DATA PROCESSING EQUIPMENT
- 14 | AUTOMATIC DATA PROCESSING EQUIPMENT