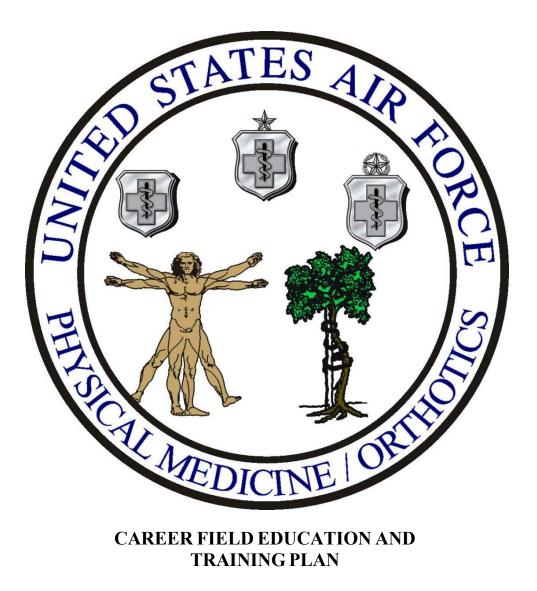
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Physical Medicine/Orthotics



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CAREER FIELD EDUCATION AND TRAINING PLAN PHYSICAL MEDICINE/ORTHOTICS SPECIALTY AFSC 4J0X2/A

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CAREER FIELD EDUCATION AND TRAINING PLAN PHYSICAL MEDICINE/ORTHOTICS SPECIALTY AFSC 4J0X2/A

Part I

Preface

1. This Career Field Education and Training Plan (CFETP) is a comprehensive education and training document that identifies life-cycle education/training requirements, training support resources, and minimum core task requirements for the physical medicine and orthotic specialties. The CFETP will provide personnel a clear career path to success and will instill rigor in all aspects of career field training. **NOTE:** Civilians occupying associated positions will use Part II to support duty position qualification training.

2. The CFETP consists of two parts. Both parts are used by the supervisors to plan, manage, and control training within the career field.

2.1. Part I provides information necessary for overall management of the specialty. Section A explains how everyone will use the plan. Section B identifies career field progression information, duties and responsibilities, training strategies, and career field path. Section C associates each level with specialty qualifications (knowledge, education, experience, training, and other). Section D indicates resource constraints. Some examples are funds, manpower, equipment, facilities. Section E identifies transition training requirements for SSgt through MSgt.

2.2. At the unit level, supervisors and trainers will use Part II to identify, plan, and conduct training commensurate with the overall goals of this plan. Part II provides training guidance for all skill levels. Section A identifies the Specialty Training Standard (STS) and includes duties, tasks, technical references (TR) to support training, Air Education and Training Command (AETC) conducted training, core task and correspondence course requirements. Section B contains Course Objective List and training standards supervisors will use to determine if Airmen satisfied training requirements. Section C identifies available support materials. An example is a Qualification Training Package (QTP), which may be developed to support proficiency training. Section D identifies MAJCOM-unique requirements supervisors can use to determine additional training required for the associated qualification needs.

3. Using guidance provided in this CFETP will ensure Physical Medicine/Orthotic individuals receive effective and efficient training at the appropriate points in their career. This plan will enable us to train today's work force for tomorrow's jobs.

ABBREVIATIONS/TERMS EXPLAINED

Advanced Training (AT). Formal course, which provides individuals who are qualified in one or more positions of their Air Force Specialty (AFS) with additional skills/knowledge to enhance their expertise in the career field. Training is for selected career Airmen at the advanced level of the AFS.

Air Education and Training Command (AETC). Conducts basic training for all Air Force enlisted personnel, produces skilled flying and ground personnel, and trains many of the world's military forces. Along with basic military, technical, and flying training, AETC provides other types of training, such as aircrew transitional, special, advanced, lateral, and survival training.

Air Force Career Field Manager (AFCFM). Representative appointed by HQ USAF/SG to ensure assigned AF specialties are trained and utilized to support AF mission requirements.

Air Force Job Qualification Standard (AFJQS). A comprehensive task list, which describes a particular job type or duty position. JQSs are used by supervisors to document task qualification. The tasks on AFJQS are common to all persons serving in the described duty position.

Air Force Specialty (AFS). A group of positions (with the same title and code) that require common qualifications.

Air Reserve Component (ARC). The Air Reserve Component consists of the Air Force Reserve and Air National Guard.

Career Development Course (CDC). Self-study correspondence course to provide Airmen with fundamental knowledge of their AFS.

Career Field Education and Training Plan (CFETP). Comprehensive core training document that identifies: Lifecycle education and training requirements, training support resources, and minimum core task requirements. The CFETP aims to give personnel a clear path and instill a sense of industry in career field training.

Certification. A formal indication of an individual's ability to perform a task to required standards.

Certification Official. A person whom the commander assigns to determine an individual's ability to perform a task to required standards.

Continuation Training. Additional training exceeding requirements with emphasis on present or future duty assignments.

Continuum of Learning (CoL). Designed to deliberately integrate developmental opportunities through a common taxonomy to produce adaptable, knowledge-enabled Airmen for today and tomorrow.

Core Task. Tasks the AFCFM identifies as minimum qualification requirements for everyone within an Air Force Specialty Code (AFSC) regardless of duty position. Core tasks may be specified for a particular skill level or in general across the AFSC. Guidance for using core tasks can be found in the CFETP narrative.

Course Objective List (COL). A publication derived from initial/advanced skills course training standard identifying the tasks and knowledge requirements and respective standards provided to achieve a 3-skill level in this career field. Supervisors use the COL to assist in conducting graduate evaluations.

Course Training Standard (CTS). Training standard that identifies the training members will receive in a specific course.

Clinical Performance Instrument (CPI). A method developed by the American Physical Therapy Association to evaluate the knowledge, skill, and attitude of Physical Therapist Assistant students. The instrument is used by each site's clinical instructor to evaluate the student's readiness to function as a Physical Therapist Assistant.

Duty Position Tasks. Tasks assigned to an individual to be qualified for the position currently held. These include as a minimum all core tasks that correspond to the duty position as directed by the AFCFM or Major Command (MAJCOM) Functional Manager and tasks assigned by the supervisor.

Education and Training Course Announcement (ETCA). Contains specific MAJCOM procedures, fund cite instructions, reporting instructions, and listings for those formal courses conducted or managed by the MAJCOMs or field operating agencies. The ETCA contains courses conducted or administered by the AF and reserve forces and serves as a reference for the Air Force, Department of Defense (DoD), other military services, government agencies, and security assistance programs. ETCA can be accessed through the Air Force Portal.

Electronic Career Development Course. Enhances the availability of CDCs and promotes utilization of advanced distance learning (ADL) concepts resulting in an educationally sound product for all Airmen within their Air Force specialties.

Enlisted Initial Skills Training. A formal school course that results in an AFSC 3-skill level award for enlisted.

Go. The stage at which an individual has gained enough skill, knowledge, and experience to perform tasks without supervision.

Governing Bodies. American Board of Certification (ABC), American Occupational Therapy Association (AOTA), American Physical Therapy Association (APTA), Board for Orthotists and Prosthetist Certification (BOC), National Board Certification Occupational Therapy (NBCOT), and Pedorthic Footwear Association.

Instructional System Development (ISD). A deliberate and orderly but flexible process for planning, developing, implementing, and managing instructional systems. It ensures personnel are taught in a cost efficient way with the knowledge, skills, and attitudes essential for successful job performance.

Initial Skills Training. A formal resident course, which results in award of the entry skill level.

Knowledge Training. Training used to provide a base of knowledge for task performance. It may also be used in lieu of task performance when the training capability does not exist. Learning gained through knowledge rather than hands-on experience.

MAJCOM Functional Manager (MFM). A person appointed by their respective Command Surgeon as the senior representative for an AFS within a specific MAJCOM. Among other responsibilities, the MFMs work with AFCFM to develop, implement and maintain the CFETP.

Master Task List (MTL). A comprehensive list (100%) of all tasks performed within a work center. It consists of, as a minimum, the current CFETP or AFJQS and locally developed AF Form 797, *Job Qualification Standard Continuation/Command JQS*. The MTL should include tasks required for deployment and/or unit type code (UTC) requirements.

Master Training Plan (MTP). Employs a strategy for ensuring the completion of all work center job requirements by using a Master task Listing and provides milestones for task, CDC completion, and prioritizes deployment/UTC, home station training tasks, upgrade, and qualification tasks.

Medical Education and Training Campus (METC). Tri-Service campus located on Fort Sam Houston, TX in the city of San Antonio. METC is a state-of-the-art DoD healthcare education campus where enlisted medical personnel are trained.

No Go. Term used to describe that a trainee has not gained enough skill, knowledge, and experience to perform the task without supervision.

Occupational Analysis (OA). Collecting and analyzing factual data on the tasks and/or knowledge performed by Air Force career fields. This data is used to provide personnel and training decision-makers with factual and objective job information which enables them to justify and/or change personnel utilization policies and programs, refine and maintain occupational structures, and establish, validate, and adjust testing and training programs.

On-the-Job Training (OJT). Hands-on, over-the-shoulder training conducted to certify personnel in both upgrade (skill level award) and job qualification (duty position certification) training.

Optimal Training. The ideal combination of training settings results in the highest levels of proficiency on specified performance requirements within the minimum time possible.

Physical Therapy Practicum. The Physical Therapy Practicum, which is **mandatory for those Airmen who graduated J3ABR4J032 course at Sheppard AFB, TX,** is designed to complete the requirements for the an Associate of Applied Science in Physical Therapist Assistant degree from the Community College of the Air Force (CCAF). **Reference paragraph 7.3.6. and ETCA.**

Qualification Training (QT). Hands-on performance training designed to qualify an Airman in a specific position. This training occurs both during and after upgrade training to maintain up-to-date qualifications.

Qualification Training Package (QTP). An instructional package designed for use at the unit to qualify, or aid qualification, in a duty position or program, or on a piece of equipment. It may be printed, computer-based, or in other audiovisual media.

Readiness Skill Verification Program (RSVP). Recurring training necessary to maintain skills of a fully qualified individual to adequately perform the mission and related duties required in peacetime and wartime.

Resource Constraints. Resource deficiencies, such as money, facilities, time, manpower, and equipment that preclude desired training from being delivered.

Specialty Training. The total training process used to qualify Airmen in their assigned specialty.

Specialty Training Requirements Team (STRT). Team comprised of AFCFM, MFMs, and subject matter experts (SME) that determine present training requirements to the AETC Training Pipeline Manager and course Training Manager.

Specialty Training Standard (STS). An AF publication that describes an AFS in terms of tasks and knowledge an Airman in that specialty may be expected to perform or to know on the job. STSs identify the training provided to achieve a 3-, 5-, or 7-skill level within an enlisted AFS. It further serves as a contract between AETC and the functional user to show which of the overall training requirements for an AFSC are taught in formal schools and correspondence courses.

Standard. An exact value, a physical entity, or an abstract concept, established and defined by authority, custom, or common consent to serve as a reference, model, or rule in measuring quantities or qualities, establishing practices or procedures, or evaluating results. A fixed quantity or quality.

Third Party Certification. An evaluation of completed training conducted by the task certifier and is only required when directed by the AFCFM.

Total Force. All collective Air Force components (active, reserve, guard, and civilian elements) of the United States Air Force.

Trainer. A trained and qualified person who teaches Airmen to perform specific tasks through OJT methods. Also, includes equipment that the trainer uses to teach Airmen specified tasks.

Upgrade Training (UGT). Mandatory training, which leads to attainment of higher level of proficiency.

Utilization and Training Workshop (U&TW). A forum of MAJCOM AFSC functional managers, SMEs, and AETC training personnel that determine career ladder training requirements.

Section A - General Information

1. Purpose. This CFETP provides information necessary for the AFCFM, MFMs, commanders, training managers, supervisors, and trainers to plan, develop, manage, and conduct an effective career field training program. The plan outlines the training individuals should receive to develop and progress throughout their career. This plan identifies initial skills, upgrade, qualification, advanced, and proficiency training. Initial skills training is AFS specific training an individual receives upon entry into the Air Force or upon retraining into this specialty for award of the 3-skill level. For the 4J0X2 career field, initial skills training is provided by the 937th Training Group (937 TRG) at JBSA-Fort Sam Houston, TX. 4J0X2A initial skills training is provided by the 937 TRG in Wilford Hall Ambulatory Surgical Center at JBSA-Lackland, TX. Upgrade training identifies the mandatory courses, task qualification requirements, and correspondence course completion requirements for award of the 3-, 5-, 7-, and 9skill levels. Qualification training is actual hands-on task performance training designed to qualify an Airman in a specific duty position. This training program occurs both during and after the upgrade training process. It is designed to provide the performance skills and knowledge required to perform as a physical medicine and/or orthotic technician. Advanced training is formal specialty training used for selected Airmen. Proficiency training is additional training, either in-residence, exportable advanced training courses, or on-the-job training provided to personnel to increase their skills and knowledge beyond the minimum required for upgrade. The CFETP has several purposes, some are:

1.1. Serves as a management tool to plan, manage, conduct, and evaluate a career field training program. Also, it is used to help supervisors identify training at the appropriate point in an individual's career.

1.2. Identifies task and knowledge training requirements for each skill level in the specialty and recommends education/training throughout each phase of an individual's career.

1.3. Lists training courses available in the specialty, identifies sources of training, and the training delivery method.

1.4. Identifies major resource constraints, which impact full implementation of the desired career field training process.

2. Uses of the CFETP. The plan will be used by MFMs and supervisors at all levels to ensure comprehensive and cohesive training programs are available for each individual in the specialty.

2.1. AETC training personnel will develop/revise formal resident, non-resident, field and exportable training based on requirements established by the users and documented in Part II of the CFETP. They will also work with the AFCFM to develop acquisition strategies for obtaining resources needed to provide the identified training.

2.2. MFMs will ensure their training programs complement the CFETP's mandatory, initial, upgrade, and proficiency requirements. OJT, resident training, contract training, or exportable courses can satisfy identified requirements. MAJCOM-developed training to support this AFS must be identified for inclusion into the plan and must not duplicate existing training.

2.3. Each individual will complete the mandatory training requirements specified in this plan. The lists of courses in Part II will be used as a reference to support training.

3. Coordination and Approval. The AFCFM is the approval authority for changes and updates to the CFETP. Also, the AFCFM will initiate an annual review of this document to ensure currency and accuracy. MAJCOM representatives and AETC training personnel will identify and coordinate on the career field training requirements.

Section B - Career Field Progression and Information

4. Specialty Description.

4.1. Physical Medicine 4J0X2/A.

4.1.1. Physical Medicine/Orthotic Apprentice (4J032/A)/Journeyman (4J052/A)/Craftsman (4J072/A).

4.1.1.1. *Specialty Summary*. Manages and directs personnel, materiel and equipment; administers patient care activities in physical therapy, occupational therapy, and orthotic services. Implements treatment plans and coordinates activities to ensure efficient and effective programs associated with patient care delivery programs.

4.1.1.2. Duties and Responsibilities. (4J032/A, 4J052/A, 4J072/A).

4.1.1.2.1. Plans, implements, and manages physical therapy, occupational therapy, and orthotic services. Maintains high patient care standards and ethical conduct while working as part of a patient care team. Participates in planning, providing, and evaluating patient care interventions. Utilizes therapeutic principles to restore function and support activities of daily living. Conducts treatments utilizing special equipment, modalities, and other treatment procedures. Fabricates splints and aid devices to protect or assist patient in achieving optimal independent physical function. Constructs orthoses for spine, upper, and lower limbs; casts and corrects shoes as prescribed by a privileged provider. Gathers and documents performance data. Observes, records, and reports patient responses to treatment. Assists therapist with evaluations, tests, measurements, procedures, and wound and burn care.

4.1.1.2.2. (4J052/A, 4J072/A) Performs, assists with, or manages physical therapy, occupational therapy, and orthotic services administration and all related activities to assure effective and efficient delivery of patient care and programs. Supervises and conducts continuing education, in-service and upgrade training. Oversees and participates in process improvement efforts to boost clinic efficiency.

4.1.1.2.3. (4J052/A, 4J072/A) Manages material and equipment. Recommends need for resource requirements. Submits annual budget. Ensures compliance with inspection and maintenance procedures and safeguards equipment. Provides quality patient care in an ethical, legal, safe, sanitary, caring, and efficient environment.

4.1.2. Physical Medicine Superintendent (4J090)/Chief Enlisted Manager (CEM 4J000).

4.1.2.1. *Specialty Summary*. Manages and directs personnel, materiel and equipment; administers patient care activities in physical therapy, occupational therapy, and orthotic services. Implements treatment plans and coordinates activities to ensure efficient and effective programs associated with patient care delivery programs.

4.1.2.2. Duties and Responsibilities.

4.1.2.2.1. Plans, implements, and manages physical therapy, occupational therapy, and orthotic services. Maintains high care standards and ethical conduct while working as part of a patient care team. Participates in planning, providing, and evaluating patient care interventions. Utilizes therapeutic principles to restore function and support activities of daily living. Conducts treatments utilizing special equipment, modalities, and other treatment procedures. Fabricates splints and aid devices to protect or assist patient in achieving optimal independent physical function. Constructs orthoses for spine, upper, and lower limbs; casts and corrects shoes as prescribed by a privileged provider. Gathers and documents performance data. Observes, records, and reports patient responses to treatment. Assists therapist with evaluations, tests, measurements, procedures, and wound and burn care.

4.1.2.2.2. Performs, assists with, or manages physical therapy, occupational therapy, and orthotic services administration and all related activities to assure effective and efficient delivery of patient care and programs. Supervises and conducts continuing education, in-service, and upgrade training. Oversees and participates in process improvement efforts to boost clinic efficiency.

4.1.2.2.3. Manages materiel and equipment, recommends need for resource requirements, and submits annual budget. Ensures compliance with inspection and maintenance procedures and safeguards equipment. Provides quality patient care in an ethical, legal, safe, sanitary, caring, and efficient environment.

5. Skill/Career Progression. Adequate training and timely progression from the apprentice through the superintendent skill level play an important role in the Air Force's ability to accomplish its mission. It is essential that everyone involved in training must do their part to plan, manage, and conduct an effective training program. The guidance provided in this part of the CFETP will ensure that each individual receives viable training at appropriate points in their career. **NOTE:** For course numbers, reference Section D, Training Course Index.

5.1. Physical Medicine Apprentice (3) Level. Initial skills training in this specialty consists of the task and knowledge training provided in the 3-skill level resident course located METC, Fort Sam Houston, TX. Task and

knowledge training requirements are identified in the specialty training standard, Part II, Section A. All individuals must complete the initial skills course to be awarded the 4J032 AFSC. After completion of this course and upon arrival at first duty assignment, the apprentice will work with a trainer to enhance knowledge and skills. The apprentice will enter upgrade training using CDCs and task qualification training to progress in the career field. Once certified on a task, the apprentice may perform the task unsupervised.

5.2. Orthotic Apprentice (3) Level. Initial skills training in this specialty consists of the task and knowledge training provided in the 3-skill level resident course located JBSA-Lackland, TX. Task and knowledge training requirements are identified in the specialty training standard, Part II, Section A. All individuals must complete the initial skills course to be awarded the 4J032A AFSC. After completion of this course and upon arrival at first duty assignment, the apprentice will work with a trainer to enhance knowledge and skills. The apprentice will enter upgrade training using OJT to progress in the career field. Once certified on a task, the apprentice may perform the task unsupervised.

5.3. Physical Medicine Journeyman (5) Level. Upgrade training to the 5-skill level in this specialty consists of the following: (1) must complete minimum of 12 months of OJT (9 months for retrainees); (2) satisfactory completion of CDCs 4J052A & 4J052B; (3) satisfactory completion of all STS core task requirements; and (4) supervisor's recommendation and commander's approval. Once upgraded, journeymen continue training to broaden their experience base. Journeymen will attend the Airman Leadership School (ALS) after 48 months in the Air Force, or sooner if selected for promotion to Staff Sergeant. After ALS, journeymen can perform supervisory duties. Journeymen can train and certify tasks after completing the Air Force Training Course. To enhance their skills, they are highly encouraged to continue their education toward a CCAF degree and pursue Physical Therapist Assistant certifications/licensure to build skills and add value as a 4J0.

5.4. Orthotic Journeyman (5) Level. Upgrade training to the 5-skill level in this specialty consists of the following: (1) must complete minimum of 12 months of OJT (9 months for retrainees); (2) satisfactory completion of all STS core task requirements; and (3) supervisor's recommendation and commander's approval. To enhance their skills, they are highly encouraged to continue their education toward a CCAF degree and pursue Orthotic and Physical Therapist Assistant certifications/licensure to build skills and add value as a 4J0.

5.5. Physical Medicine Craftsman (7) Level. Upgrade training to the 7-skill level in this specialty consists of the following: (1) satisfactory completion of all STS core task requirements through upgrade training; (2) achieve the rank of SSgt or higher; (3) complete a minimum of 12 months in 7-level upgrade training, of OJT (6 months for retrainees); (4) successful completion of the 7-skill level CDC; and (5) supervisor's recommendation and commander's approval. Once upgraded, a craftsman can expect to fill various supervisory and management positions, such as Noncommissioned Officer in Charge (NCOIC), supervisor, program manager, and task trainer or certifier. Craftsman will attend the Noncommissioned Officer Academy (NCOA) after selection for promotion to Technical Sergeant (active duty (AD) only). Continued academic education through CCAF and higher degree programs is encouraged.

5.6. Orthotic Craftsman (7) Level. Upgrade training to the 7-skill level in this specialty consists of the following: (1) satisfactory completion of all STS core task requirements through upgrade training; (2) achieve the rank of SSgt or higher; (3) complete a minimum of 12 months of OJT (6 months for retrainees); (4) successful completion of the 7-skill level CDC; and (5) supervisor's recommendation and commander's approval. Once upgraded, a craftsman can expect to fill various supervisory and management positions such as NCOIC, supervisor, program manager, and task trainer or certifier. Craftsmen will attend the NCOA after selection for promotion to Technical Sergeant (AD only). Continued academic education through CCAF and higher degree programs is encouraged.

5.7. Superintendent (9) Level. To qualify for 9-level, Airmen must sew-on SMSgt and complete in-resident SNCOA. A superintendent can expect to fill positions such as Flight Chief, Superintendent, functional manager, and various staff positions. Additional training in the areas of resources, leadership skills, and management should be pursued through continuing education. Completion of higher degree programs is highly recommended.

5.8. Chief Enlisted Manager (CEM). Awarded after promotion to Chief Master Sergeant. A CEM can expect to fill positions such as CFM, MFM, group or squadron Superintendent, or Flight Chief. Additional training in the areas of resources, leadership skills, and management should continue. Completion of higher degree programs is highly recommended.

6. Training Decisions. The CFETP uses a building block approach (simple to complex) to encompass the entire spectrum of training requirements for the Physical Medicine/Orthotic career fields. The spectrum includes a strategy for when, where, and how to meet the training requirements. The strategy must be apparent and affordable to reduce duplication of training and eliminate a disjointed approach to training. The decisions regarding training were made during the 4J0X2/4J0X2A STRT (12-15 August 2013) and U&TW (13 February 2014).

7. Community College of the Air Force (CCAF. Enrollment in CCAF occurs upon classification into an AFSC. CCAF provides the opportunity to obtain an Associates of Applied Science Degree. In addition to its associates degree program, CCAF offers the following:

7.1. CCAF Instructor Certification (CIC) Program. CCAF offers the CIC Program for qualified instructors who teach CCAF collegiate-level credit awarding courses at a CCAF affiliated school. The CIC is a professional credential that recognizes the instructor's extensive faculty development training, education, and qualification required to teach a CCAF collegiate course and formally acknowledges the instructor's practical teaching experience. The program is a three-level program (CIC-I, CIC-II and CIC-III). The CIC program replaced the CCAF Occupational Instructor Certification (OIC) Program, which officially closed on 1 January 2011.

7.2. Instructional Systems Development (ISD) Certification Program. CCAF offers the ISD Certification Program for qualified curriculum writers and managers who are formally assigned to an affiliated school to develop/write and/or manage CCAF collegiate-level credit awarding courses. The ISD certification is a professional credential that recognizes the curriculum writer's or manager's extensive training, education, qualifications, and experience required to develop/write and manage CCAF collegiate courses.

7.3. Degree Requirements. Airmen are automatically entered into the CCAF program. Prior to completing an Associate's degree, the 5-skill level must be awarded and the following requirements must be met:

Academic Requirements	Semester Hours
Technical Education	24
Physical Therapy Practicum	6
Leadership, Management and Military Studies	6
Physical Education	4
General Education (3 hours in each of the following)	15
Oral Communication	3
Written Communication	3
Mathematics	3
Social Science	3
Humanities	3
Program elective	15
Total	64

7.3.1. Technical Education (24 Semester Hours): A minimum of 12 semester hours of Technical Core subjects/courses must be applied and the remaining semester hours applied from Technical Core/Technical Elective courses.

7.3.1.1. Twenty-two semester hours are awarded to the graduates of the 3-skill level in-resident course. Upon award of the 5-skill level, journeymen are awarded an additional 4 hours of CCAF credit. Another 4 hours of CCAF credits are awarded for each upgrade in skill level.

7.3.2. Leadership, Management, and Military Studies (6 Semester Hours): Professional military education and/or civilian management courses.

7.3.3. Physical Education (4 Semester Hours): This requirement is satisfied by completion of Basic Military Training.

7.3.4. General Education (15 Semester Hours): Applicable courses must meet the criteria for application of courses to the General Education Requirements (GER) and be in agreement with the definitions of applicable General Education subjects/courses as provided in the CCAF General Catalog.

7.3.5. Program Elective (15 Semester Hours): Satisfied with applicable Technical Education; Leadership, Management, and Military Studies; or General Education subjects/courses, including natural science courses meeting GER application criteria. Six (6) semester hours of CCAF degree applicable technical credit otherwise not applicable to this program may be applied. See the CCAF General Catalog for details regarding the Associates of Applied Science for this specialty.

7.3.6. Physical Therapy Practicum: The Physical Therapy practicum is clinical training, which is mandatory for those Airmen that graduated J3ABR4J032 course at Sheppard AFB, TX), is designed as the capstone event to the completion of course requirements for the Associates of Applied Science in Physical Therapist Assistant degree from the CCAF.

7.3.6.1. Physical Therapy Practicum Description: The Physical Therapy practicum (140 training hours) must be completed within a minimum of 30 calendar days and a maximum of one year after enrollment. Course content will satisfy requirements for the Associates of Applied Sciences in Physical Therapist Assistant from the CCAF. Center Coordinators of Clinical Education (CCCE) will assign written assignments. Since the practicum is designed as a degree capstone event, enrollment is limited until the general degree requirements (see table in paragraph 7.3.) are satisfied. Each MTF will be the site for the practicum.

7.3.6.2. Enrollment: Practicum enrollment can only be accomplished after completion of 5-level CDCs and General Education electives. The individual is responsible for contacting their Unit Training Monitor (UTM). Each Clinic's CCCE/CI, as identified on each clinic's Clinical Site Information Form (CSIF), will be responsible for contacting the Physical Medicine Course through the "Admin Instructions" listed on the Education & Training Course Announcements website (https://etca.randolph.af.mil).

7.3.6.3. Course Content: The Clinical Instructor's use of the APTA's Clinical Performance Instrument (CPI) emphasizes the instruction of consistent educational objectives needed to satisfy the clinical aspects of the student's training. The educational content of this apprenticeship will focus on neurological, geriatric, pediatric, and cardiac physical therapy treatment concepts; additionally, the student must provide an in-service and complete a case study. Clinical rotations at civilian or other military facilities to observe a variety of physical therapy services should be included to enhance the overall development of the student. The CCCE/CI will ensure the student is continuously progressing and meeting the requirements as set in the CPI.

7.3.6.4. Assigned Work: The following is a breakdown in hours for the practicum:

Neurology	40 Hours
Geriatrics	32 Hours
Pediatrics	32 Hours
Cardiac	24 Hours
In-Service	6 Hours
Case Study	6 Hours

The CCCE/CI will be responsible for ensuring the student obtains the necessary exposure (civilian clinics if needed) to obtain adequate coverage of the above subjects. At a minimum, the CCCE/CI will assign a 4 to 5-page case study to be graded by the Physical Medicine Schoolhouse at METC, Fort Sam Houston, TX.

7.3.6.5. Upon completion of the practicum, the CCCE/CI will forward copies of in-service notes and case-study papers to the Physical Medicine course for evaluation, grading, and to confirm satisfactory completion of the practicum. The 937 TRG Registrar at Fort Sam Houston will notify CCAF of satisfactory completion.

7.3.7. Additional off-duty education is a personal choice that is highly encouraged for all. Earning an Associates degree from the CCAF is a mandatory requirement to receive a senior rater endorsement consideration on AF Form 911, *Enlisted Performance Report, MSgt-CMSgt.* Also, individuals desiring to become an AETC Instructor must actively pursue an Associates degree in accordance with AETC Instruction 36-2202, *Faculty Development and Master Instructor Programs.* A degreed faculty is necessary to maintain accreditation through the Southern Association of Colleges and Schools.

7.4. Accreditation. The CCAF Physical Therapist Assistant degree program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE). Graduates of this program are eligible to sit for the National Physical Therapist Assistant examination. Because state licensing requirements vary, graduates should contact the Licensing Board for Physical Therapy of the state in which licensure is desired. **NOTE:** Consult your Base

Education Office for CCAF catalog revisions reflecting current degree requirements.

8. Career Field Path. The 4J0X2/A Career shows general rank requirements for each training and career progression area. (Reference Figures 8.1–8.2)

		Grade Requirements						
Education And Training Requirements	Rank	Average Promotion	Earliest Sew-on	High Year of Tenure (HYT)				
Basic Military Training School								
Apprentice Technical School (3-Skill Level)	Amn A1C	6 Months 16 Months						
 Upgrade To Journeyman (5-Skill Level) Minimum 12 months UGT (9 months for retrainees with 5-level in previous AFS) Complete 4J052A and 4J052B CDCs Complete all duty position training requirements 	Amn A1C SrA	3 Years	22 Months	8 Years				
 Airman Leadership School (ALS) Must be a SrA with 48 months time in service or be a SSgt Select Resident graduation is a prerequisite for SSgt sew-on (AD Only). 								
 Upgrade To Craftsman (7-Skill Level) Minimum rank of SSgt. 12 months upgrade training (6 months if individual holds a 7-level in a previous AFS) Complete appropriate CDC Certification of all core tasks and duty position requirements 	SSgt	4 Years	3 Years	15 Years				
Noncommissioned Officer Academy (NCOA) - Must be a TSgt or TSgt Selectee	TSgt	11.5 Years	5 Years	20 Years				
- Resident graduation is a prerequisite for MSgt sew-on (AD Only)	MSgt	15 Years	8 Years	24 Years				
 USAF Senior NCO Academy Correspondence Must have completed NCOA in residence (AD Only) USAF Senior NCO Academy (SNCOA) Must be a SMSgt or selectee; Selected MSgts also eligible Resident graduation is a prerequisite for SMSgt sew-on (AD Only) 			I					
Upgrade To Superintendent (9-Skill Level) - Minimum rank of SMSgt	SMSgt	19.5 Years	11 Years	26 Years				
Chief Enlisted Manager (4J000) - Selected for promotion to CMSgt - Developmental Education	CMSgt	23 Years	14 Years	30 Years				

Figure 8.1. The Enlisted Career Path

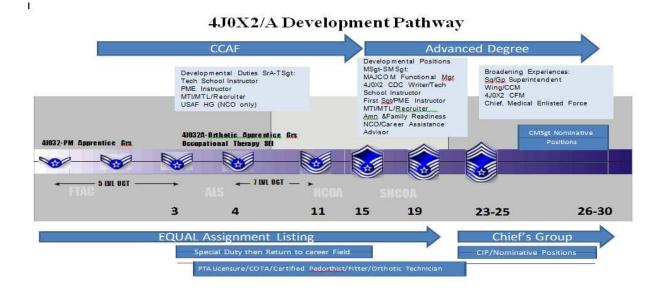


Figure 8.2. Development Pathway

Section C - Skill Level Training Requirements

9. Purpose. Skill level training requirements in this career field are defined in terms of task and knowledge requirements. This section outlines the specialty qualification requirements for each skill level in broad, general terms and establishes the mandatory requirements for entry, award, and retention of each skill level. The specific task and knowledge training requirements are identified in the STS at Part II, Sections A and B of this CFETP.

10. Specialty Qualification:

10.1. Apprentice Level Training (4J0X2).

10.1.1. Specialty Qualification:

10.1.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of physical/occupational therapy and orthotic scope of practice, therapeutic modalities, orthotic laboratory equipment, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.1.1.2. Education. Completion of high school or college courses in human anatomy and physiology, biology, and physical science are desirable.

10.1.1.3. Training. Completion of the basic Physical Medicine Apprentice Course is mandatory for award of AFSC 4J032 and the CCAF degree.

10.1.2. Training Sources and Resources. Completion of the Physical Medicine Apprentice course at METC, Fort Sam Houston, TX satisfies the knowledge and task requirements specified in the specialty qualification section (above) for award of the 3-skill level. If you desire a copy of this list contact the METC Standards & Evaluations Division http://www.metc.mil.

10.1.3. Implementation. Entry into the physical medicine career field is accomplished by attending the Physical Medicine Apprentice Course. Entry in the physical medicine career field requires a minimum General Air Force selection composite score of 49.

10.2. Apprentice Level Training (4J0X2A).

10.2.1. Specialty Qualifications.

10.2.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of physical/occupational therapy and orthotic scopes of practice, therapeutic modalities, orthotic laboratory equipment, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.2.1.2. Education. Completion of high school or college courses in human anatomy and physiology, biology, and physical science are desirable.

10.2.1.3. Training. Completion of a basic Orthotic Apprentice course is mandatory for award of the AFSC 4J032A.

10.2.2. Training Sources/Resources. Completion of Orthotic Apprentice course at JBSA-Lackland, TX satisfies the knowledge and training requirements specified in the specialty qualification section (paragraph 2.1.) for the award of the 3-skill level.

10.2.3. Implementation. Entry into training is accomplished by approved retraining of 5- and 7-level Airmen from the 4J0X2 career field. After graduation, job qualification training is initiated anytime an individual is assigned duties they are not qualified to perform.

10.3.1. Journeyman Level Training (4J0X2). Specialty Qualification. All 4J032 qualifications apply to the 4J052 requirements.

10.3.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of physical/occupational therapy scopes of practice, therapeutic modalities, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.3.1.2. Education. Completion of continuation education classes in physical/occupational therapy subjects is desirable.

10.3.1.3. Training. For AFSC 4J052, completion of career development course (CDC) 4J052 is mandatory. Completes all core tasks identified in column 2 of the STS, completes 12 months in upgrade training (9 months if holding a 5-level in a previous AFS), and meets mandatory 5-skill level requirements listed in the specialty description in the Air Force Enlisted Classification Directory (AFECD).

10.3.1.4. Experience. Qualification in and possession of AFSC 4J032. Also, experience in functions such as administering physical/occupational therapy care is mandatory.

10.3.2. Training Sources and Resources. Must meet all physical medicine 3-skill level prerequisites and successfully complete the 4J052A/B CDCs. The STS identifies all the core tasks required for qualification. Qualified trainers provide upgrade and qualification training.

10.3.3. Implementation. The 5-skill level is awarded when: (1) an individual possesses the 3-skill level and is in the rank of A1C or higher; (2) completes a minimum of 12 months in 5-level UGT (9 months if holding a 5-level in a previous AFS); (3) completes the appropriate 5-level CDC; (4) completes all STS core tasks specified in column 2 of the STS for the assigned duty position; and (5) be recommended by their supervisor and approved by his or her unit commander according to AFI 36-2101, *Classifying Military Personnel (Officer and Airmen)*. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform.

10.4. Journeyman Level Training (4J0X2A).

10.4.1. Specialty Qualifications. All 4J032A qualifications apply to the 4J052A requirements.

10.4.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting orthotic scope of practice, therapeutic modalities, orthotic laboratory equipment, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative

procedures, and medical ethics.

10.4.1.2. Education. Completion of continuation education classes in orthotic and physical/occupational therapy subjects is desirable.

10.4.1.3. Training. Completion of the following requirements is mandatory for the award of the 5-skill level AFSC:

10.4.1.3.1. Completion of all STS core tasks specified for the assigned duty position.

10.4.1.4. Experience. Qualification in and possession of AFSC 4J032A. Also, experience in functions such as fabricating, adjusting, and repairing orthopedic orthoses.

10.4.2. Training Sources/Resources. Completion of Orthotic Apprentice 3-level course, 4J032A and successful completion of the knowledge and task requirements specified in the STS for award of the 5-skill level. The STS identifies all the core tasks required for qualification. Upgrade and qualification training is provided by a qualified trainer. Qualified trainers will be identified by local orthotic laboratory NCOICs. Core tasks are identified in the STS listed as Part II, Section A, Attachment 3 of this CFETP.

10.4.3. Implementation. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform. All identified STS core tasks will be completed to be awarded the 5-skill level.

10.5. Craftsman Level Training (4J0X2).

10.5.1. Specialty Qualification. All 4J032 and 4J052 qualifications apply to the 4J072 requirements.

10.5.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of physical/occupational therapy scopes of practice; therapeutic modalities, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.5.1.2. Education. Completion of continuation education classes in physical/occupational therapy subjects is desirable. Completion of an associates or CCAF degree as well as state licensure in career field is highly encouraged.

10.5.1.3. Training. Airmen must be SSgt or higher, complete a minimum of 12 months in 7-skill level upgrade training (6 months if individual holds a 7-level in a previous AFS). CDC 4J072/A Physical Medicine/Orthotic Craftsman must be successfully completed prior to award of the 7-skill level.

10.5.1.4. Experience. Qualification in and possession of AFSC 4J052. Also, experience is mandatory in performing supervising functions such as administering physical medicine care, personnel, and resources. Must have experience coordinating administrative activities, budget management and requisition. Airmen must complete a minimum of 12 months in 7-skill level UGT (6 months if individual holds a 7-level in a previous AFS) and completion of all CFETP/STS core tasks specified in column 2, Attachment 2 of the STS.

10.5.2. Training Sources and Resources. Must meet all physical medicine 3-and 5-skill level prerequisites. The STS identifies all the core tasks required for qualification. Qualified trainers provide upgrade and qualification training.

10.5.3. Implementation. Entry into upgrade training is initiated when an individual possesses the 5-skill level and is a SSgt select or possesses the rank of SSgt or above. Qualification training is initiated anytime an individual is assigned duties he/she is not qualified to perform. The individual must complete a minimum of 12 months in 7-skill level UGT (6 months if individual holds a 7-level in a previous AFS).

10.6. Craftsman Level Training (4J0X2A).

10.6.1. Specialty Qualifications. All 4J052A qualifications apply to the 4J072A requirements.

10.6.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social,

and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of orthotic and physical/occupational therapy scopes of practice, therapeutic modalities, orthotic laboratory equipment, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.6.1.2. Education. Completion of continuation education classes in physical medicine/orthotic subjects is desirable. Completion of an associates or CCAF degree as well as civilian certification in career field is highly encouraged. Reference governing bodies on page 5.

10.6.1.3. Training: Airmen must be SSgt or higher, complete a minimum of 12 months in 7-skill level upgrade training (6 months if individual holds a 7-level in a previous AFS). CDC 4J072/4J072A Physical Medicine/Orthotic Craftsman must be successfully completed prior to award of the 7-skill level.

10.6.1.4. Experience: Qualification in and possession of AFSC 4J052. Also, experience performing or supervising functions such as fabricating and repairing orthoses. Minimum of 12 months in 7-skill level UGT or 6 months for individual which held 7-skill level in previous AFS.

10.6.2. Training Sources and Resources. Must meet all physical medicine 3-and 5-skill level prerequisites. The STS identifies all the core tasks required for qualification. Qualified trainers provide upgrade and qualification training.

10.6.3. Implementation. Entry into upgrade training is initiated when an individual possesses the 5-skill level and is in the grade of SSgt or higher. Qualification training is initiated anytime an individual is assigned duties they are not qualified to perform. The 4J072/A Physical Medicine/Orthotic Craftsman CDC must be completed prior to award of 7-skill level.

10.7. Superintendent Level Training (4J090).

10.7.1. Specialty Qualification. All applicable 4J032/A, 4J052/A and 4J072/A qualifications apply to the 4J090 requirements.

10.7.1.1. Knowledge. Knowledge is mandatory of sciences including physical, physiological, anatomical, social, and behavioral; basic and clinical sciences, including laboratory or other practical experience; testing and treatment procedures constituting scope of physical/occupational therapy and orthotic scopes of practice, therapeutic modalities, orthotic laboratory equipment, medical terminology, communication skills and instruction methods, basic medical logistics procedures, administrative procedures, and medical ethics.

10.7.1.2. Education. Completion of continuation education classes in physical/occupational therapy subjects is desirable. Completion of an associates or CCAF degree as well as state licensure in career field is highly encouraged. A bachelors degree in health related fields is also recommended.

10.7.1.3. Training. No formal training requirements.

10.7.1.4. Experience. Qualification and possession of AFSC 4J072 or 4J072A. Also, experience managing functions within the physical/occupational therapy or orthotics element.

10.7.2. Training Sources/Resources. Completion of all training requirements for award of 9-skill level is mandatory.

10.7.3. Implementation. The 9-skill level is awarded to the individuals that have sewn-on SMSgt.

10.8. Special Experience Identifier (SEI).

10.8.1. SEI 462, Legacy Occupational Therapy Technician: Requires successful completion of formal training course 303- N3, Occupational Therapy (OT) Specialist Course.

10.8.2. SEI 464, Occupational Therapy Technician: Requires completion of course L5AZO4J052-00AA, PDS code 0EL.

10.8.3. Refer to the AFECD (found on the ASK AFPC website) for procedures to award and update personnel data systems with applicable SEI.

Section D - Resource Constraints

11. Purpose. This section identifies known resource constraints, which preclude optimal/desired training from being developed or conducted, including information such as cost and manpower. Narrative explanations of each resource constraint and an impact statement describing what effect each constraint has on training are included. Also, included in this section are actions required, office of primary responsibility, and target completion dates. Resource constraints will be, as a minimum, reviewed and updated annually.

12. Three-Level Training. There are currently no resource constraints for 3-level training at this time.

13. Five-Level Training. There are currently no resource constraints for 5-level training at this time.

14. Seven-Level Training. There are currently no resource constraints for 7-level training at this time.

15. Qualification Training. There are currently no qualification training requirements.

16. QTP. There are currently no QTPs.

Section E. Transitional Training

There is currently no transitional training requirement. This area is reserved.

Part II

Section A - Specialty Training Standard (STS).

1. Implementation. This STS will be used for technical training provided by AETC.

2. Purpose. As prescribed in AFI 36-2201, this STS:

2.1. Lists in Column 1 (Task, Knowledge, and Technical Reference) the most common tasks, knowledge, and TRs necessary for Airmen to perform duties in the 3-, 5-, and 7-skill level. Number task statements sequentially (i.e., 1.1, 1.2, 2.1). Column 2 (Core) identifies, by "*" specialty-wide training requirements.

2.2. Provides certification for OJT. Column 3 is used to record completion of tasks and knowledge training requirements. Use the automated Air Force Training Record (AFTR) to document technician qualifications.

2.3. Shows formal training and correspondence course requirements. Column 4 shows the proficiency to be demonstrated on the job by the graduate as a result of training on the task/knowledge and the career knowledge provided by the correspondence course.

2.4. Qualitative Requirements. Attachment 1 contains the proficiency code key used to indicate the level of training and knowledge provided by resident training and career development courses.

2.5. Documentation. Use AFTR to document all technician qualifications. Document and certify completion of training. As a minimum, complete the following columns in Part 2 of the CFETP: Training start date (day, month, and year), training complete date (day, month, and year), Trainee Initials, Trainer Initials, and Certifier Initials (if applicable).

2.5.1. Transcribing to new CFETP. Transcribing documentation to a new CFETP is an administrative function, not a reevaluation of training. Upon publication of a new CFETP, transcribe in accordance with AFI 36-2201.

2.5.2. Documenting Career Knowledge. When a CDC is not available, the supervisor identifies STS training references that the trainee requires for career knowledge and ensures, as a minimum, that trainees cover the mandatory items in AFI 36-2201. **NOTE:** Career knowledge must be documented prior to submitting a CDC waiver request.

2.5.3. Decertification and Recertification. When a supervisor determines an Airman is unqualified on a task previously certified for his or her duty position, the supervisor deletes certification. Appropriate remarks pertaining to the reason for decertification are entered on the AF Form 623a, *On-The-Job Training Record Continuation Sheet*. Refer to AFI 36-2201. Begin recertification if required.

2.5.4. Performance Standard. Tasks are trained and qualified to the "Go" level.

2.6. The STS is a guide for development of promotion tests used in the Weighted Airman Promotion System. Senior Noncommissioned Officers with extensive practical experience in their career fields develop Specialty Knowledge Tests (SKTs) at the United States Air Force Occupational Measurement Squadron. The tests sample knowledge of STS subject matter areas judged by test development team members as most appropriate for promotion to higher grades. Questions are based upon study references listed in the *Enlisted Promotions Reference and Requirements Catalog*.

2.7. The need dates for the CDCs are established as follows:

7-Level CDC, 4J072, need date is 1 Jan 15 5-Level CDC, 4J052A, need date is 8 Jun 15 5-Level CDC, 4J052B, need date is 29 Dec 15

3. Recommendations. Identify inadequacies and recommend changes to this training standard through channels at 937 TRG/TGE, 2931 Harney Road, Fort Sam Houston, TX 78234-7674 or use the Customer Service Information Line (DSN 420-1080; Commercial (210) 808-1080) to report your findings.

Attachments:

- 1. Qualitative Requirements
- 2. 4J0X2 STS with Common 4J0X2/X2A 7-Level Tasks
- 3. Orthotic Specific STS
- 4. Technical Reference Source Summary STS 4J0X2/X2A

BY ORDER OF THE SECRETARY OF THE AIR FORCE

OFFICIAL

THOMAS W. TRAVIS Lieutenant General, USAF, MC, CFS Surgeon General

Attachment 1 Qualitative Requirements

This Blo	ck Is For Identification Purpe	oses Only	
Name Of Trainee		r r	
Printed Name (Last, First, Middle Initial)	Initials (Written)	SSN	
Printed Name Of Trainer or Certifying Official And W	ritten Initials		
N/I	N/I		
N/I	NI		
N/I	N/I		

QUALITATIVE REQUIREMENTS

	QUALITATIVE REQUIREMENTS
Scale Value	Definition: The individual
1	Can do simple parts of the task. Needs to be told or shown how to do most of the task. (Extremely Limited)
2	Can do most parts of the task. Needs only help on hardest parts. (Partially Proficient)
3	Can do all parts of the task. Needs only a spot check of completed work. (Competent)
4	Can do the complete task quickly and accurately. Can tell or show others how to do the task. (Highly Proficient)
a	Can name parts, tools, and simple facts about the task. (Nomenclature)
b	Can determine step by step procedures for doing the task. (Procedures)
c	Can identify why and when the task must be done and why each step is needed. (Operating Principles)
d	Can predict, isolate, and resolve problems about the task. (Advanced Theory)
Α	Can identify basic facts and terms about the subject. (Facts)
В	Can identify relationship of basic facts and state general principles about the subject. (Principles)
С	Can analyze facts and principles and draw conclusions about the subject. (Analysis)
D	Can evaluate conditions and make proper decisions about the subject. (Evaluation)
	1 2 3 4 a b c d A B C

Explanations:

* A task knowledge scale value may be used alone or with a task performance scale value to define a level of knowledge for a specific task. (Example: b and 1b).

** A subject knowledge scale value is used alone to define a level of knowledge for a subject not directly related to any specific task, or for a subject common to several tasks.

- This mark is used alone instead of a scale value to show that no proficiency training is provided in the course or CDC.

X This mark is used alone in course columns to show that training required but not given due to limitations in resources.

Attachment 2 4J0X2 STS with Common 4J0X2/X2A 7-Level Tasks

	2. Core		3. Cert	ification f	for OJT		4. Proficiency Codes Used To Indicate Training/Information Provided		
1. Tasks, Knowledge And Technical References	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC
1. CAREER LADDER PROGRESSION									
1.1. Physical medicine career field and educational opportunities TR: AFI 36-2306							Α	В	-
1.2. Skill level duties and responsibilities; 4J032/A, 4J052/A, 4J072/A, 4J090, and CEM 4J000 TR: AFI 36-2101, AFI 36-2618, AFECD							А	В	В
1.3. USAF Graduate Evaluation Program TR: AFI 36-2201							-	-	В
2. USAF MEDICAL SERVICE									
2.1. Mission TR: AFI 44-102, AFPD 41-1, 44-1							-	В	-
2.2. Organization TR: AFI 38-101, 44-102; AFPD 41-1; AFMS Flight Path							-	В	В
2.3. Function TR: AFIs 41-210, 41-211, 46-101							-	В	-
3. MEDICAL READINESS (Initial Medical Readiness Training directed by AFI 41-106. (Continuing/on-going Medical Readiness Training for the individual is the responsibility of each medical facility.)									
4. AIR FORCE OCCUPATIONAL SAFETY AND HEALTH (AFOSH) STANDARDS FOR AFSC 4J0X2 TR: AFI 91-302, AFI 44-119									
4.1. Hazards							В	B	-
4.2. AFOSH standards4.3. Safety precautions during job							A	B	-
4.3. Safety precautions during job performance							В	В	-

	2. Core		3. Ce	ertification	n for OJ]	ſ	4. Proficiency Codes Used To Indicate Training/Information Provided			
1. Tasks, Knowledge And Technical References	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level	
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC	
5. TRAINING										
5.1. Plan and supervise OJT TR: AFI 36-2201, AFMAN 36-2236							-	-	c	
5.2. Conduct training TR: AFI 36- 2201, AFMAN 36-2236							-	-	c	
6. PHYSICAL MEDICINE ADMINISTRATION										
6.1. Patient scheduling							-	-	-	
6.2. Annotate medical records TR: AFIs 41-210, 44-102							2b	c	-	
 6.2.1. Code patient encounter TR: DODD 6040.41, DODI 6040.42, Military Health System Coding Guidance: Professional Services and Specialty Coding Guidelines Version 3.6 							-	b	-	
6.3. Medical Expense and Performance Reporting System (MEPRS) TR: AFI 41-102, DoD 6010.13-M							-	А	В	
6.4. Joint Commission (JC)/The Accreditation Association for Ambulatory Health Care (AAAHC) TR: AFIs 41-211, 44-119, Joint Commission website, 2013 Accreditation Handbook for Ambulatory Health Care (AAAHC)							-	A	В	
7. RESOURCE/MEDICAL MANAGEMENT TR: AFI 41-120										
7.1. Data quality TR: DODI 6040.40							-	-	Α	
7.2. Personnel management TR: AFI 38-204, AFPD 38-2							-	-	Α	
7.3. Business plan							-	-	Α	
7.4. Budget and finance TR: AFI 16-501							-	-	В	
7.5. Tricare TR: AFI 41-210							-	В	-	
7.6. Third-Party Collection Program							-	В	-	
8. MEDICAL LOGISTICS PROCEDURES										
8.1. Materiel discipline TR: AFMAN 23-220							-	В	-	
8.2. Prepare materiel requests TR: AFI 41-209							-	b	-	

	2. Core		3. Ce	ertification	n for OJI	[4. Proficiency Codes Use	ed To Indicate Training	e Training/Information Provided		
1. Tasks, Knowledge And Technical References	Tasks	А	В	С	D	Е	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level		
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC		
9. MEDICAL TERMINOLOGY AND ABBREVIATIONS TR: Essential Medical Terminology							В	-	-		
10. PROFESSIONAL AND PATIENT RELATIONSHIPS TR: AFIs 41-210, 44-102; Health Professional and Patient Interaction, American Physical Therapy Association: Standards of Ethical Conduct for the Physical Therapy Assistant, AFPD 36-27, Principles & Techniques of Patient Care											
10.1. Professional relationships and ethical conduct	*						В	В	В		
10.2. Perform professional journal review							2b	-	-		
10.3. Multi-disciplinary team approach							Α	В	-		
11. PSYCHOLOGY OF THE DISEASED AND INJURED TR: Health Professional and Patient Interaction, Experience Human Development											
11.1. Losses incurred by physical disability							Α	В	-		
11.2. Adapting to physical disability							Α	В	-		
11.3. Patient-staff interactions resulting from physical disability							Α	В	-		
12. HUMAN GROWTH AND DEVELOPMENT TR: Experience Human Development							В	В	-		
13. VITAL SIGNS TR: Emergency Care and Transportation of Sick and Injured											
13.1. Monitor and record blood pressure	*						2b	с	-		
13.2. Monitor and record respiration rate	*						2b	с	-		
13.3. Monitor and record oxygen saturation	*						2b	c	-		
13.4. Monitor and record pulse rate	*						2b	с	-		
14. ANATOMY AND PHYSIOLOGY TR: Clinical Kinesiology and Anatomy											
14.1. Cell Structure							Α	-	-		
14.2. Body systems and their pathophysiological conditions											
14.2.1. Nervous							В	В	-		
14.2.2. Respiratory							В	В	-		
14.2.3.Cardiovascular							В	В	-		
14.2.4. Lymphatic							В	В	-		
14.2.5. Renal							-	В	-		
14.2.6. Endocrine							-	В	-		

	2. Core		3. Ce	ertificatio	n for OJI	ſ	4. Proficiency Codes Used To Indicate Training/Information Provided			
1. Tasks, Knowledge And Technical References	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level	
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC	
14.2.7. Integumentary							В	В	-	
14.2.8. Digestive							-	В	-	
14.2.9. Skeletal							В	В	-	
14.2.10. Muscular							В	В	-	
15. FUNCTIONAL ANATOMY TR: Essentials of Kinesiology for Physical Therapist Assistant; Muscle Testing: Techniques of Manual Examination; Orthopedic Physical Assessment										
15.1. Axial skeleton							В	В	-	
15.2. Upper extremity							В	В	-	
15.3. Lower extremity							В	В	-	
16. MUSCULOSKELETAL SYSTEM DISORDERS TR: Orthopedic Physical Assessment; Essentials of Musculoskeletal Care 4; Rehabilitation of the Hand and Upper Extremity										
16.1. Axial skeleton							В	В	-	
16.2. Upper extremity							В	В	-	
16.3. Lower extremity							В	В	-	
17. PHYSICAL MEDICINE PROCEDURES TR: Principles & Techniques of Patient Care; Measurement of Joint Motion; Manual for Physical Agents; Orthotics and Prosthetics in Rehabilitation; Comprehensive Wound Management, Therapeutic Electro physical Agents, Measurement of Joint Motion: A Guide to Goniometry; Orthopedic Physical Assessment; Essentials of Musculoskeletal Care; Muscle Testing: Techniques of Manual Examination; Therapeutic Exercise: Foundations and Techniques; Joint Structure & Function: A Comprehensive Analysis; Greeman's Principles of Manual Medicine; Willard & Spackman's Occupational Therapy 17.1. Therapeutic										
exercise instruction										
17.1.1. Physiological effects							В	В	-	
17.1.2. Administer programs										
17.1.2.1. Axial skeleton	*						2b	c	-	
17.1.2.2. Upper extremity	*						2b	c	-	
17.1.2.3. Lower extremity	*						2b	c	-	
17.1.3. Instruct ROM	•									
17.1.3.1. Axial skeleton	*						2b	c	-	

	2. Core		3. Ce	rtification	for OJT		4. Proficiency Codes Used To Indicate Training/Information Provided			
. Tasks, Knowledge And Technical	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level	
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC	
17.1.3.2. Upper extremity	*						2b	с	-	
17.1.3.3. Lower extremity	*						2b	c	-	
17.1.4. Instruct strengthening										
17.1.4.1. Axial skeleton	*						2b	с	_	
17.1.4.2. Upper extremity	*						2b	c	_	
17.1.4.3. Lower extremity	*						2b	с	_	
17.1.5. Instruct stretching	*						2b	с	_	
17.1.5.1. Axial skeleton	*									
17.1.5.2. Upper extremity	*						2b	c	-	
17.1.5.3. Lower extremity 17.1.6. Principles of exercise							2b	c	-	
progression 17.1.7. Conduct gross motor control							В	В	-	
activities							2b	b	-	
17.1.8. Conduct fine motor control activities							2b	b	-	
17.2. Measure/Assess										
17.2.1. Joint range of motion										
17.2.1.1. Upper extremity basic techniques	*						2b	с	-	
17.2.1.2. Lower extremity basic techniques	*						2b	c	-	
17.2.2. Leg length							Α	В	_	
basic techniques 17.2.3. Extremity girth basic							-	_	_	
techniques 17.2.4. Conduct manual muscle testing										
17.2.4.1. Upper extremity							2b	с	-	
17.2.4.2. Lower extremity							2b	c	-	
17.2.5. Sensation							2b	b	-	
17.3. Joint mobilization principles							Α	В	-	
17.3.1. Perform upper extremity physiological joint mobs										
17.3.1.1. Shoulder	*						2b	c	-	
17.3.1.2. Elbow							-	-	-	
17.3.1.3. Wrist 17.3.2. Perform lower extremity							-	-	-	
physiological joint mobs 17.3.2.1. Hip	*						2b	с	_	
17.3.2.2. Knee	*						2b 2b	c	-	
17.3.2.3. Ankle	*						2b	c	-	
17.3.3. Perform upper extremity accessory joint mobs										
17.3.3.1. Shoulder	*						2b	c	-	
17.3.3.2. Elbow							-	-	-	
17.3.3.3. Wrist 17.3.4. Perform lower extremity							-	-	-	
accessory joint mobs	*									
17.3.4.1. Hip 17.3.4.2. Knee	*						2b 2b	c c	-	

I. Tasks, Knowledge And Technical References Tasks References A B C D E A A J Skill Level 55kill Level 75kill Level References Tasks Tasks Tasks Tasks Course COUC COUC 75kill Level 17.4.1.5.Askele * Image Tasks Course Course COUC COUC COUC 17.4.1.5.0 diskit * Image Tasks Tasks Course Cours		2. Core		3. Ce	rtification	for OJT		4. Proficiency Codes Used To Indicate Training/Information Provided			
initial initial initial initial initial initial initial initial initial initial 		Tasks	А	В	С	D	E			C 7 Skill Level	
17.3.4. Note assilte 20 c - det S. to ransfer 8 - - dechaigues 8 - - 17.5.1. Independent * 2b c - 17.5.2. Nassitive * 2b c - 17.5.1. Nassitive * 2b c - 17.5.2. Nassitive * 2b c - 17.5.3. Nassitive * 2b c - 17.6.2. Perform dehridement 2b c - - 17.6.2. Perform dehridement 2b c - - 17.7. Abustation 1 2b c - - 17.7. Abustation 2b c - - - 17.7.4. Coreguipment 1 2b c - - 17.7.4. Coregu								Course	CDC	CDC	
devices n </td <td>17.3.4.3. Ankle</td> <td>*</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>2b</td> <td>c</td> <td>-</td>	17.3.4.3. Ankle	*						2b	c	-	
Or NA Image: Constraint of the constraint of								В	-	-	
17.51. Independent * 0 2b c 17.52. Assistive * 0 2b c 17.53. Dependent * 0 2b c 17.64. Wound care 0 0 2b c 17.61. Use asptic techniques 0 0 2b c 17.62. Perform debridement 0 0 2b c 17.63. Apply andiges 0 0 0 0 17.7.1. Principles of gait 0 0 0 0											
1.2.1. nonceptudam * 2.0 c - 17.5.2. Assistive * 2.0 c - 17.5.3. Dependent * 2.0 c - 17.6. Wound care 2.0 c - 17.6.1. Use asceptic techniques 2.0 c - 17.6.2. Perform debridement 2.0 c - 17.6.3. Apply 2.0 c - - 17.6.3. Apply shadages 2.0 c - - 17.7.1. Principles of gait 2.0 c - - 17.7.1. Structures * 2.0 c - <td></td>											
11.2.7.3.0300'e * 2.0 c - 17.5.3.Dependent * 2.0 c - 17.6.4.Wound care 2.0 c - - 17.6.1.Use aseptic techniques 2.0 c - - 17.6.2.Perform debridsment 2.0 c - - 17.6.2.Perform debridsment 2.0 c - - 17.6.2.Perform debridsment 2.0 c - - 17.7.A.Districtpatient 2.0 c - - 17.7.1.Principles of gait 1 2.0 C - - 17.7.2.Adjust/finaids 2.0 C - - - 17.7.4.Use equipment * 2.0 C - 17.7.4.Use equi										-	
1										-	
7.1. Use aspicit echniques Image: Section of the sectin section section sectin section section section of the	-	*						2b	c	-	
17.6.2. Perform debridement Image: Section of the sectin the sectin the section of the section of the sectin t	17.6. Wound care										
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dressingshandages c 2.b c - 17.7. Ambulation I								2b	с	-	
17.1. Principles of gait A B - 17.7.2. Adjust/fit aids 2b c - 17.7.3. Istruct patient * 2b c - in gaits * 2b c - 17.7.4. Uscequipment 2b c - - 17.7.4. Uscequipment 2b c - - 17.7.4. Suscequipment 2b c - - 17.7.4. Suscequipment 2b c - - 17.7.4. Suscequipment 2b c - - 17.8. Augustures * 2b c - - 17.8. Soft Sissue mobilization - - - - - 17.8. Soft Sissue mobilization - <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>2b</td> <td>c</td> <td>-</td>								2b	c	-	
17.2. Adjust/fit ads 2b c - 17.7.3. Instruct patient * 2b c - in gaits 2b c - - 17.7.4. Use equipment 2b c - - 17.7.4. Soft (issue mobilization 2b c - - 17.8. Soft (issue mobilization A B - - 17.8.0.1 (issue mobilization 2b c - - 17.9.2 Apply procedure 2b c - - 17.10.1. Physiol	17.7. Ambulation										
17.7.3. Instruct patient * 2b c - in gaits 2b c - - 17.7.4. Use equipment 2b c - 17.7.4. Use equipment 2b c - 17.7.4. Use equipment 2b c - 17.7.4. Use equipment * 2b c - 17.7.4. Use equipment 2b c - 17.7.4. Use equipment A B - 17.8.2. Apply procedure A B - 17.9.1. Physiological effects A B - 17.9.2. Apply procedure B B - 17.10.1. Physiological effects B B - 17.10.3.1. Apply dreactherets B <td>17.7.1. Principles of gait</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>В</td> <td>-</td>	17.7.1. Principles of gait								В	-	
in gaiss Image	5							2b	c	-	
17.7.4.1. Crutches * 2b c - 17.7.4.2. Walkers * 2b c - 17.7.4.3. Canes * 2b c - 17.8. Soft issue mobilization 2b c - - 17.8. Soft issue mobilization A B - - 17.8.1. Physiological effects A B - - 17.8.2. Apply procedure 2b c - - 17.9.1. Physiological effects A B - - 17.9.1. Physiological effects A B - - 17.9.2. Apply procedure 2b c - - 17.10.1. Physiological effects A B - - 17.10.2. Methods of heat exchange B B - - 17.10.3.1.1. Apply * 2b c - 17.10.3.1.2. Apply moistheat 2b c - - 17.10.3.1.3. Phonophoresis B B B - 17.10.3.1.3. Apply moist heat 2b c -		*						2b	с	-	
17.7.4.2. Walkers * 2b c - 17.7.4.2. Walkers * 2b c - 17.8.3.0ft tissue mobilization * 2b c - 17.8.3.0ft tissue mobilization A B - - 17.8.1. Physiological effects A B - - 17.8.2. Apply procedure 2b c - - 17.9.1. Physiological effects A B - - 17.9.2. Apply procedure A B - - 17.9.1. Physiological effects A B - - 17.9.2. Apply procedure A B - - 17.9.1. Physiological effects A B - - 17.10.1. Physiological effects B B B - 17.10.2. Methods of heat exchange B B - - 17.10.3.1.1. Apply * 2b c - 17.10.3.1.2. Apply * B B - 17.10.3.1.3. Phonophoresis B B -	17.7.4. Use equipment										
17.7.4.3. Cances * 2b c - 17.8. Soft issue mobilization 2b c - 17.8. Soft issue mobilization A B - 17.8.1. Physiological effects A B - 17.9.1. Physiological effects A B - 17.9.2. Apply procedure A B B - 17.9.1. Physiological effects B B B - 17.10.1. Physiological effects B B B - 17.10.3.1. Methods of heat exchange B B - - 17.10.3.1. Utrasound * 2b c - 17.10.3.1.2. Apply * B B - 17.10.3.1.3. Phonophoresis B B -	17.7.4.1. Crutches								c	-	
17.8. Soft issue mobilization Image: Constraint of the c									c	-	
17.8.1. Physiological effectsAB-17.8.2. Apply procedure2bc-17.9. Compression therapyAB-17.9.1. Physiological effectsAB-17.9.2. Apply procedureAB-17.9.2. Apply procedureBB-17.10.1. Physiological effectsBB-17.10.1. Physiological effectsBB-17.10.1. Physiological effectsBB-17.10.3. ThermatherapyBB-17.10.3. Thermath modalitiesC17.10.3.1. UltrasoundC17.10.3.1.1. Apply indirect contact methods*2bc17.10.3.1.2. Apply indirect contact methods*BB17.10.3.2. Apply moist heatBB-17.10.3.3. Apply paraffin bathC		*						2b	с	-	
17.8.2. Apply procedure122217.8.2. Apply procedure111117.9.Compression therapy111117.9.1. Physiological effects1AB-17.9.2. Apply procedure112bc-17.9.2. Apply procedure112bc-17.10. Thermotherapy1111117.10.1. Physiological effects1BB-17.10.2. Methods of heat exchange1BB-17.10.3. Thermal modalities111117.10.3.1.1. Apply direct contact methods*2bc-17.10.3.1.2. Apply indirect contact methods*2bc-17.10.3.1.3. Phonophoresis112bc-17.10.3.2. Apply moist heat12bc-17.10.3.3. Apply paraffin bath112bc-								•	D		
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17.9.2. Apply procedureImage: constraint of the sector of the									-		
17.10. ThermotherapyImage: constraint of the sector of the se									В	-	
17.10.1. Physiological effects B B - 17.10.2. Methods of heat exchange B B - 17.10.3. Thermal modalities B B - 17.10.3. Thermal modalities - - - 17.10.3. I. Ultrasound - - - 17.10.3.1.1. Apply * 2b c - 17.10.3.1.2. Apply * 2b c - 17.10.3.1.2. Apply * 2b c - 17.10.3.1.3. Phonophoresis B B - - 17.10.3.2. Apply moist heat 2b c - - 17.10.3.3. Apply paraffin bath 0 2b c - 17.10.3.3. Apply paraffin bath 0 2b c -	17.9.2. Apply procedure							2b	c	-	
17.10.2. Methods of heat exchangeImage: Constraint of the c	17.10. Thermotherapy										
17.10.3. Thermal modalities Image: constraint of the second s	17.10.1. Physiological effects							В	В	-	
17.10.3.1. Ultrasound *	17.10.2. Methods of heat exchange							В	В	-	
17.10.3.1.1. Apply direct contact methods*2bc-17.10.3.1.2. Apply indirect contact methods*2bc-17.10.3.1.3. PhonophoresisBB17.10.3.2. Apply moist heat2bc-17.10.3.3. Apply paraffin bath2bc-	17.10.3. Thermal modalities										
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17.10.3.1.2. Apply indirect contact methods 2b c - 17.10.3.1.3. Phonophoresis B B - 17.10.3.2. Apply moist heat 2b c - 17.10.3.3. Apply paraffin bath 2b c -								2b	c	-	
17.10.3.2. Apply moist heat 2b c - 17.10.3.3. Apply paraffin bath 2b c -		*						2b	c	-	
17.10.3.3. Apply paraffin bath 2b c -	17.10.3.1.3. Phonophoresis							В	В	-	
	17.10.3.2. Apply moist heat							2b	c	-	
17.10.3.4. Apply fluidotherapy 2b c -	17.10.3.3. Apply paraffin bath							2b	c	-	
	17.10.3.4. Apply fluidotherapy							2b	c	-	
17.11. Electrical stimulation	17.11. Electrical stimulation										
17.11.1. Physiological effects B -	17.11.1. Physiological effects							В	В	-	
17.11.2. Apply modality	17.11.2. Apply modality										
17.11.2.1. High volt * 2b c -		*						2b	c		
17.11.2.2. Transcutaneous Electrical * 2b c -		*						2b	с	-	
Nerve stimulation (TENS) * 2b c - 17.11.2.3. Iontophoresis * 2b c -		*								_	

	2. Core		3. Ce	ertificatio	n for OJ	Г	4. Proficiency Codes Used To Indicate Training/Information Provided				
1. Tasks, Knowledge And Technical References	Tasks	Α	В	с	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level		
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC		
17.12. Apply ultrasound-electrical stimulation	*						2b	с	-		
17.13. Traction											
17.13.1. Physiological effects							В	В	-		
17.13.2. Apply modality											
17.13.2.1. Cervical	*						2b	c	-		
17.13.2.2. Pelvic	*						2b	c	-		
17.14. Cryotherapy											
17.14.1. Physiological effects							В	В	-		
17.14.2. Apply modality											
17.14.2.1. Cold packs	*						2b	с	-		
17.14.2.2. Ice massage	*						2b	с	-		
17.14.2.3. Contrast baths	*						2b	c	-		
18. Orthotics and therapeutic aids. TR: Rehabilitation of the Hand and Upper Extremity; Introduction to Splinting: A Clinical Reasoning and Problem Solving Approach; Willard & Spackman's Occupational Therapy											
18.1. Pre-fabricated orthopedic supports											
18.1.1. Axial skeleton							-	-	-		
18.1.2. Upper extremity							В	В	-		
18.1.3. Lower extremity							В	В	-		
18.2. Upper extremity splints											
18.2.1. Construct Static splint							1a	b	-		
18.2.2. Dynamic splints							Α	В	-		
18.2.3. Static progressive splints							Α	В	_		

Attachment 3 Orthotic Specific STS

1 T I Z I I A IT I I I			3. Certifi	cation For	OJT	4. Proficiency Codes Used To Indicate Training/Information Provided (See Note)			
 Tasks, Knowledge And Technical References 	2. Core Tasks	Α	B	С	D	Е	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC
1. Orthotic Career Field							-	-	-
1.1. Duties and career ladder progression							-	-	-
1.2. Relationship of this field							A	-	-
o other professional services									
1.3. The code of ethics as promulgated by the Federal Trade Commission and certifying agencies							Α	-	-
2. TREATMENT OF PATHOPHYSIOLOGICAL CONDITIONS TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							-	-	-
2.1. Illnesses and injuries							В	-	-
2.2. Type of orthoses used with orthopedic conditions							В	-	-
2.3. Orthotic terminology							В	-	-
3. ORTHOTIC LABORATORY TR: AFI 91-302, AFOSHSTD 48-20							-	-	-
3.1. Resource use, identification and safety							-	-	-
3.1.1. Materials							В	-	-
3.1.2. Equipment							В	-	-
3.1.3. Tools							В	-	-
3.1.4. AFOSH safety standards							В	-	-
4. GENERAL ORTHOTIC LABORATORY TASKS TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							-	-	-
4.1. Perform molding procedures							-	-	-
4.1.1. Negative molds							2b	-	-
4.1.2. Positive molds							2b	-	-
4.2. Mold thermoplastic							2b	-	-
4.3. Shape metals							2b	-	-
4.4. Work leather							2b	-	-
4.5. Prepare, modify, and use construction specifications		_					-	-	-
4.5.1. Sketches/tracings							2b	-	-
4.5.2. Impressions							2b	-	-
4.5.3. Molds							2b	-	-
4.5.4. Patterns							2b	-	-
4.6. Prescription interpretation						1	В	-	-

1. Tasks, Knowledge And Technical	2. Core		3. Co	ertification	n for OJT		4. Proficiency Codes Used To Indicate Training/Information Provided			
References	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level	
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC	
4.7. Operate and maintain equipment							-	-	-	
4.7.1. Drill press							2a	-	-	
4.7.2. Sander							2a	-	-	
4.7.3. Band saw							2a	-	-	
4.7.4. Sewing machine							2a	-	-	
4.7.5. Oven							2a	-	-	
4.8. Use of Hand tools							2a	-	-	
4.9. CAD/CAM, CNC router							Α	-	-	
5. FABRICATE TO PATIENT MODEL, FIT, AND INSTRUCT PATIENT ON UPPER EXTREMITY ORTHOSES TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							-	-	-	
5.1. Tennis elbow straps							2b	-	-	
5.2. Arm slings							2b	-	-	
5.3. Wrist splints							-	-	-	
5.3.1. Cock-up							2b	-	-	
5.3.2. Thumb spica							-	-	-	
5.4. Humerus orthoses							2b	-	-	
5.5. Shoulder immobilizer							2b	-	-	
6. FABRICATE TO PATIENT MODEL, FIT, AND INSTRUCT PATIENT ON LOWER EXTREMITY ORTHOTICS TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							-	-	-	
6.1. Knee, ankle, foot orthoses (KAFO)							-	-	-	
6.1.1. Plastic						1	2b	-	-	
6.1.2. Metal							2b	-	-	
6.2. Ankle, foot orthoses (AFO)							-	-	-	
6.2.1. Plastic							2b	_	-	
6.2.2. Metal						1	2b 2b		-	
6.3. Patella tendon bearing orthoses (PTB)							-	-	-	
							21	-	-	
6.4. Posterior lower extremity night splint6.5. Hip abduction orthoses							2b		_	
6.5.1. Plastic						1	-	-	-	
6.5.2. Metal							-	-	-	
0.0.2. IVICIAI							-	-	-	
7. SPINAL ORTHOTICS TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices									-	

	2. Core		3. Co	ertificatior	1 for OJT		4. Proficiency Codes Used To Indicate Training/Information Provided			
1. Tasks, Knowledge And Technical References	Tasks	А	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level	
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC	
7.1. Fabricate/fit and instruct patient and instruct use								-	-	
7.1.1. TLSO							2b	-	-	
7.1.2. LSO							2b	-	-	
7.2. Spinal orthosis theory							-	-	-	
7.2.1. Scoliosis Module							В	-	-	
8. FIT AND INSTRUCT PATIENT ON SOFT GOODS /PREFABRICATED TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							-	-	-	
8.1. Knee supports (neoprene/elastic)							-	-	-	
8.1.1. Hinged knee							3b	-	-	
8.1.2. Sleeve							3b	-	-	
8.1.2.1. Without patella							3b	-	-	
8.1.2.2. With patella							3b	-	-	
8.2. Knee orthoses							-	-	-	
8.2.1. Anterior cruciate ligament							2b	-	-	
8.2.2. Posterior cruciate ligament							2b	-	-	
8.2.3. Lateral collateral ligament							2b	-	-	
8.2.4. Medial collateral ligament							2b	-	-	
8.2.5. Range of motion							3b	-	-	
8.2.6. Immobilizer							2b	-	-	
8.2.7. Osteoarthritis							2b	-	-	
8.3. Hip orthoses							-	-	-	
8.3.1. Pavlik harness							2b	-	-	
8.3.2. (HKAFO)							2b	-	-	
8.3.2.1. Plastic							2b	-	-	
8.3.2.2. Metal							2b	-	-	
8.4. Cervical systems							-	-	-	
8.4.1. Soft							3b	-	-	
8.4.2. Hard							3b	-	-	
8.4.3. S.O.M.I.							3b	-	-	
8.5. Thoracolumbar systems							-	-	-	
8.5.1. Lumbosacral supports							2b	-	-	
8.5.1.1. Soft							2b	-	-	
8.5.1.2. Rigid							2b	-	-	
8.5.2. Abdominal binder							2b	-	-	
8.5.3. Hyperextension							2b	-	-	
8.5.3.1. Jewett							2b	-	-	
8.5.3.2. Cash							2b	-	-	
8.5.4. TLSO							2b	-	-	
8.6. Foot orthotics							3b	-	-	
8.7. Ankle supports							-	-	-	
8.7.1. Walkers fixed/ articulated						1	3b	-	-	

1. Tasks, Knowledge And Technical	2. Core		3. Cer	tification for	OJT		4. Proficiency Codes Used To Indicate Training/Information Provided		
References	Tasks	A	В	С	D	E	A 3 Skill Level	B 5 Skill Level	C 7 Skill Level
		Trng Start	Trng Complete	Trainee Initials	Trainer Initials	Certifier Initials	Course	CDC	CDC
8.7.2. Lace-up							2b	-	-
8.7.3. Stirrup							2b	-	-
8.8. Wrist supports							2b	-	-
8.8.1. Forearm/wrist gauntlet, plastic							-	-	-
8.9. Dennis Brown bars							-	-	-
8.10. Clavicular straps							2b	-	-
9. FABRICATE TO PATIENT MODEL, FIT, AND INSTRUCT PATIENTS ON FOOT ORTHOTICS TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices; AFI 23-211							-	-	-
9.1. Rebuild and modify shoes for orthopedic corrections							-	-	-
9.1.1. Internal							2b	-	-
9.1.2. External							2b	-	-
9.2. Custom foot orthoses							-	-	-
9.2.1. Materials							-	-	-
9.2.1.1. Plastics							2b	-	-
9.2.1.2. Thermocork							2b	-	-
9.2.1.3. EVA							2b	-	-
9.2.1.4. Carbon fiber							-	-	-
9.2.2. Types							-	-	-
9.2.2.1. Diabetic							2b	-	-
9.2.2.2. Toe filler						_	2b	-	-
9.2.2.3. Morton's extension							2b	-	-
9.2.2.4. Schaeffer orthoses							2b	-	-
9.2.2.5. UCBL							2b	-	-
10. MEASURE, FIT, AND INSTRUCT F O R CUSTOM ORTHOPEDIC BOOTS/ SHOES TR: Orthotics: A Comprehensive Clinical Approach; AAOS Atlas of Orthoses and Assistive Devices							2b	-	-

Attachment 4 Technical Reference (TR) Source Summary STS 4J0X2/X2A

3.2. TECHNICAL REFERENCE (TR) SOURCE SUMMARY

3.2.1. Technical References

- American Academy of Orthopedic Surgeons (2005). *Emergency Care and Transportation of Sick and Injured*. (9th ed.). Jones and Bartlett Publishers, Sudbury, MA.

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- Brucker, J. & Edelstein, J. (2002). Orthotics: A Comprehensive Clinical Approach. Slack Incorporated

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- Irion, G.L. (2010). Comprehensive Wound Management (2nd ed.). SLACK Incorporated.

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- Pierson, F., & Fairchild S. (2008). Principles & Techniques of Patient Care (4th ed.). W.B. Saunders.

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- Salter, Robert C. MD (2014). *Textbook of Disorders and Injuries of the Musculoskeletal System*. (4th ed.). Lippincott, Williams, & Wilkins.

- Sarwark, John F (2010). *Essentials of Musculoskeletal Care (4th Ed)*. American Academy of Orthopaedic Surgeons.

- Skirven, Osterman, Fedorczyk, & Amadio. *Rehab of the Hand and Upper Extremity Vol 1 (6th Ed, 2011)*. Elsevier Mosby, Philadelphia, PA.

- Skirven, Osterman, Fedorczyk, & Amadio. *Rehab of the Hand and Upper Extremity Vol 2 (6th Ed, 2011)*. Elsevier Mosby, Philadelphia, PA.

- Stanfield, P. (2008). Essential Medical Terminology (3rd Ed). Jones and Bartlett Publishers, Boston, MA.

3.2.2. Air Force Instructions (AFI)

Number	Title
AFI 16-501	Control and Documentation of Air Force Programs
AFI 23-211	Special Measurement Clothing and Footwear, Orthopedic Footwear, Duidons, Streamers, and Flags
AFI 36-2101	Classifying Military Personnel (Officer and Enlisted)
AFI 36-2201	Air Force Training Program
AFI 36-2306	Voluntary Education Program
AFI 36-2618	The Enlisted Force Structure
AFI 38-101	Air Force Organization
AFI 38-204	Programming USAF Manpower
AFI 41-102	Air Force Medical Expense and Performance Reporting System (MEPRS) for Fixed
	Military Medical and Dental Treatment Facilities
AFI 41-106	Medical Readiness Program Management
AFI 41-120	Medical Resource Operations
AFI 41-209	Medical Logistics Support
AFI 41-210	TRICARE Operations and Patient Administration Functions
AFI 41-211	Management of Medical Information Services
AFI 44-102	Medical Care Management
AFI 44-119	Medical Quality Operations
AFI 46-101	Nursing Services and Operations
AFI 91-302	Air Force Occupational and Environmental Safety, Fire Protection, and Health (AFOSH) Standards

3.2.3 Air Force Manuals (AFMAN)

AFMAN 36-2236	Guidebook for Air Force Instructors
AFMAN 23-220	Reports of Survey for Air Force Property

3.2.4. Air Force Policy Directive (AFPD)

AFPD 36-27	Equal Opportunity (EO)
AFPD 38-2	Manpower
AFPD 41-1	Health Care Programs and Resources
AFPD 44-1	Medical Operations

3.2.5. Air Force Occupational Safety and Health Standard (AFOSH)

AFOSHSTD 48-20	Occupational Noise and Hearing Conservation Program
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3.2.6. DoD Directives

DODD 6040.41	Medical Records Retention and Coding at Military Treatment Facilities
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3.2.7. DoD Instruction

DODI 6040.40	Military Health System Data Quality Management Control Procedures
DODI 6040.42	Medical Encounter and Coding at Military Treatment Facilities

3.2.8. DoDManual (DoD-M)

DOD 6010.13-M	Medical Expense and Performance Reporting System for Fixed Military Medical and Dental
	Treatment Facilities Manual

Section B - Course Objective List

1. Resident Courses. If a written copy of the course objective list is required, contact physical medicine training at DSN 420-5932 or write to 382 TRS/XYAE, 2931 Harney Road, Fort Sam Houston TX 78234-2532. A copy will be sent to you as soon as possible.

2. Career Development Courses. CDC information can be obtained from the Air Force Career Development Academy at Maxwell AFB, Gunter Annex, AL.

Section C - Support Material

There are currently no support material requirements. This area is reserved.

Section D - Training Course Index

1. Purpose. This section of the CFETP identifies training courses available for the specialty. Refer to the ETCA website for complete information on the courses listed in this section.

1.1. Air Force In-Resident Courses.

Course Number	Course Title	Location
L8ABJ47032 01AA	Physical Medicine Apprentice Course	JBSA-Fort Sam Houston, TX
L5ALO4J032A00AA	Orthotic Apprentice Course	JBSA-Lackland, TX
L5AZO4J052 00AA	Air Force Occupational Therapy Specialty Course	JBSA-Lackland, TX
J6AZL4JOX2 00AA	Physical Therapy Practicum	Various Locations

1.2. Air Force Institute for Advanced Distributed Learning Courses.

Course Number	Course Title	Location
CDC 4J052 A/B	Physical Medicine Journeyman	Non-resident Course
CDC 4J072	Physical Medicine and Orthotic Craftsman	Non-resident Course

1.3. Exportable Courses: N/A

1.4. Courses Under Development/Revision: N/A

Section E – MAJCOM-Unique Requirements

There are currently no MAJCOM-unique requirements. This area is reserved.