The Readiness Estimate and Deployability Index- NAVY

(READI-R- USN-NC Version)

A. How Competent are you: Please rate your level of competency according to the following scale

1. I need theory, demonstration & supervised practice
2. I would need review & supervised practice
3. I would need some review & little supervision
4. I would need review only
5. I would need no review or supervision

Competency Scale
Not Competent 1 2 3 4 5 Totally Competent

1. Performing your role as a nurse in a mass casualty (MASCAL) situation? 1 2 3 4 5
2. Performing in emergency situations, such as those of patients in cardiac arrest? 1 2 3 4 5
3. Taking care of patients with life-threatening injuries? 1 2 3 4 5
4. Providing patient care to a multiple trauma patient? 1 2 3 4 5
5. Caring for patients with ballistic missile injuries? 1 2 3 4 5
6. Recognizing a patient with a tension pneumothorax? 1 2 3 4 5
7. Performing fluid resuscitation of a burn victim? 1 2 3 4 5
8. Resuscitating a patient with blood products? 1 2 3 4 5
9. Performing airway management? 1 2 3 4 5
10. Implementing the triage categories? 1 2 3 4 5

B. For the following, please indicate your level of agreement according to this scale by indicating the circle for
<table>
<thead>
<tr>
<th></th>
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<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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</thead>
<tbody>
<tr>
<td>11.</td>
<td>Utilizing patient aeromedical evacuation procedures?</td>
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<td>12.</td>
<td>Using field communications equipment (e.g. field radio)? Sanitation and Hygiene?</td>
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<td>13.</td>
<td>Carrying out the Deployable Medical Systems (DEPMEDS) Setup (e.g. setting tents and equipment)?</td>
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<td>14.</td>
<td>Dealing with the unexpected (e.g. providing patient care in a bomb shelter if necessary).</td>
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<td>15.</td>
<td>Providing patient care required for those injured by weapons of mass destruction (e.g. weapons used by terrorists)?</td>
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<td>16.</td>
<td>Protecting yourself and/or your patient(s) if called upon to do so?</td>
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<td>17.</td>
<td>Performing nursing skills while in the M40 mask and MOPP gear?</td>
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<td>18.</td>
<td>Utilizing decontamination procedures for patients exposed to chemical or biological agents?</td>
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<td>19.</td>
<td>Performing your primary military specialty under adverse and/or prolonged field conditions (i.e. limited staff to provide relief)?</td>
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<td>20.</td>
<td>Decontaminating yourself using standard personal decontamination equipment?</td>
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<td>21.</td>
<td>Knowing your status under the Geneva Convention?</td>
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<td>22.</td>
<td>Using field communications equipment (e.g. field radio)?</td>
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<td>23.</td>
<td>Taking actions necessary during warning alarms?</td>
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<td>24.</td>
<td>I am confident that my support system (e.g. family, friends or family support group) will meet all my psychosocial needs.</td>
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</table>

**your response**

1 = Totally Disagree  
2 = Minimally Agree  
3 = Moderately Agree  
4 = Highly Agree  
5 = Totally Agree
<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>Rating Options</th>
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</thead>
<tbody>
<tr>
<td>26.</td>
<td>I am confident in my ability to manage stress related to my primary job.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>27.</td>
<td>I am confident in my ability to manage stress related to my family.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>28.</td>
<td>I am confident in my ability to manage stress related to my finances.</td>
<td>1 2 3 4 5</td>
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<td>29.</td>
<td>I am confident that I will know how to access mental health services for myself, if needed, while deployed.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>30.</td>
<td>I believe there is a real need for military rules and regulations to be adapted to the deployment setting.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>31.</td>
<td>I am confident in my ability to perform my leadership role as a Navy Nurse Corps Officer: “Train Hospital Corpsmen.”</td>
<td>1 2 3 4 5</td>
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<td>32.</td>
<td>I think it is possible for the staff to compensate for a commander who does not put into practice the leadership principle: “Know your people and look out for their well-being.”</td>
<td>1 2 3 4 5</td>
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<td>33.</td>
<td>I believe I could perform successfully in the deployed setting in the absence of realistic and relevant training.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>34.</td>
<td>I believe I will be provided sufficient deployment training prior to a deployment.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>35.</td>
<td>If the commander of my deploying unit is unable to inform me of all pertinent information, I could still perform successfully.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>36.</td>
<td>I am prepared to deal with crowded, co-ed, and mixed ranks sleeping quarters while deployed.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>37.</td>
<td>Understanding my deployed unit’s mission, vision, and values is critical to my ability to perform successfully.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>38.</td>
<td>I am confident I will be able to function as a group leader in a deployed setting, if needed.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>39.</td>
<td>It is critical for me to have a successful working relationship with members in my deployment unit.</td>
<td>1 2 3 4 5</td>
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</table>

**C. Demographic Data**

1. What is your current affiliation with the military? (Choose One)
   - Active Duty
   - Drilling Reserve
   - Individual Ready Reserve
2. What is your primary Nursing Subspecialty Code? (Choose One)
   - 1900 Professional Nursing
   - 1901 Nursing Administration
   - 1903 Nursing Education
   - 1910 Medical Surgical Nursing
   - 1920 Maternal Infant Nursing
   - 1922 Pediatric Nursing
   - 1930 Psychiatric Nursing
   - 1940 Community Health Nursing
   - 1945 Emergency/Trauma Nursing
   - 1950 Perioperative Nursing
   - 1960 Intensive Care Nursing
   - 1964 Neonatal Intensive Care Nursing
   - 1972 Nursing Anesthesia
   - 1974 Pediatric Nurse Practitioner
   - 1976 Family Nurse Practitioner
   - 1980 Women's Health Nursing
   - 1981 Nursing Midwife
   - 1985 Health Care Administration
   - 3130 Manpower Systems Analyst
   - 3180 Education and Training Management Systems

3. How many years of nursing experience do you have (include military and civilian experience [LPN and RN])? __ years

4. Do you have prior technical medical experience (i.e. medical technician)? Yes ☐ No ☐

5. Sex: Male or Female? Male ☐ Female ☐

6. What is your military rank? (Choose One)
   - O1 / Ensign ☐
   - O2 / Lieutenant Junior Grade ☐
   - O3 / Lieutenant ☐
   - Lieutenant Commander ☐
   - Commander ☐
   - Captain ☐

7. What is your highest education level? (Choose One)
   - Bachelors in Nursing ☐
   - Bachelors in other than nursing ☐
   - Masters in Nursing ☐
   - Masters in other than nursing ☐
   - Doctorate in Nursing ☐
   - Doctorate in other than nursing ☐

8. Which of these statements describes the last time you provided direct patient care? (best choice)
   - More than 4 years ago ☐
   - Within the most recent 1-4 years ☐
   - Greater than six months, but less than one year ☐
   - Within the last 6 months ☐

9. What type(s) of triage experience and education have you had? (Select best choice)
   - I have no education or experience with triage ☐
   - Learned via inservices, nursing journals, handouts, etc. ☐
   - Practiced triage in an in an Emergency Department setting ☐
   - Practiced triage in a field setting ☐

10. Are you currently assigned to a mobility platform (e.g. Fleet Hospital, Casualty Receiving Ship, Fleet Surgical Team, or Fleet Marine Force). Yes ☐ No ☐

11. Have you ever been deployed? If No, proceed to question 16) Yes ☐ No ☐

12. How many times have you been deployed? __ times

13. What was the length of your longest deployment? __ days

14. What are the approximate dates of your most recent deployment? (Mo./Yr.) From: __-__-____ To: __-__-____
15. What is your age?  under 18  years

16. Which statement best describes how frequently you exercise? (Choose One)
   - Three to five times per week
   - Two times per week
   - One time per week
   - Less frequently than once per week

17. Which statement best represents how long ago you had a physical examination? (Choose One)
   - Less than one year
   - One to five years
   - Greater than five years

18. Are you up to date on routine gender specific health-related exams (e.g. mammogram / PAP for females and prostate exam for males)? Yes  No  Uncertain

19. If indicated, do you have a family care plan (required for unmarried active duty members and when both parents are active duty members)? Yes  No  Not Applicable

20. If single, do you have a support for your pets, finances, or elder dependents? Yes  No  Not Applicable

21. Which of the following would you use to help cope with stress? (Check all that apply)
   - Tobacco
   - Religious Faith
   - Relaxation/Meditation Techniques
   - Eating
   - Music
   - Sleeping
   - Reading
   - Talking with Friends
   - Other (please specify below)

Thank you for completing the READI.
Please provide any comments that might improve the READI.

Are there any relevant items that should have been, but are not included in the READI?

Please discuss any comments that you might have regarding the Navy Nursing READI and/or this evaluation:

Thank you very much for completing this questionnaire.