

## READI Revised SURVEY

(Air Force)

### A. 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

### Please select the circle to indicate your response

1. Not Competent
2. Minimally Competent
3. Moderately Competent
4. Highly Competent
5. Totally Competent

1.	How competent are you in your role as a nurse in a mass casualty (MASCAL) situation?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
2.	How competent are you to perform in emergency situations, such as those of patients in cardiac arrest?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
3.	How competent are you taking care of life threatening injuries?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
4.	How competent are you in providing nursing care to a multiple trauma patient?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
5.	How competent are you in the care of patients with ballistic missile injuries?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
6.	How competent are you in recognition of a patient with a tension pneumothorax?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
7.	How competent are you in the fluid resuscitation of a burn patient?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
8.	How competent are you in performing resuscitation with blood products?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>
9.	How competent are you with performing airway management?	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>

10.	How competent are you in implementing the triage categories?	1 ● 2 ● 3 ● 4 ● 5 ●
11.	How competent are you with evacuation of patients using aeromedical evacuation procedures?	1 ● 2 ● 3 ● 4 ● 5 ●
12.	How competent are you in understanding the capacities of each Level of Care, formerly called Echelons of Care?	1 ● 2 ● 3 ● 4 ● 5 ●
13.	How competent are you with knowing the Law of Armed Conflict (LOAC) violations that must be reported (i.e. ordered to protect patients with force)?	1 ● 2 ● 3 ● 4 ● 5 ●
14.	How competent are you in setting up your area for Field Sanitation and Hygiene?	1 ● 2 ● 3 ● 4 ● 5 ●
15.	How competent are you with your ability to carry out Deployable Medical Systems DEPMEDS Setup (i.e. setting up tents and equipment)?	1 ● 2 ● 3 ● 4 ● 5 ●
16.	How competent are you in dealing with the unexpected (i.e. providing patient care in a bomb shelter if necessary)?	1 ● 2 ● 3 ● 4 ● 5 ●
17.	How competent are you with the nursing care required for patients injured by weapons of mass destruction (i.e. weapons used by terrorists)?	1 ● 2 ● 3 ● 4 ● 5 ●
18.	How competent are you with what is required of you to protect yourself and/or your patient(s) if called upon to do so?	1 ● 2 ● 3 ● 4 ● 5 ●
19.	How competent are you in your ability to perform nursing skills while in the M40 mask and MOPP gear?	1 ● 2 ● 3 ● 4 ● 5 ●
20.	How competent are you with decontamination procedures of a patient exposed to chemical or biologic agents?	1 ● 2 ● 3 ● 4 ● 5 ●
21.	How competent are you in your ability to perform your primary military specialty under adverse and/or prolonged field conditions (i.e. limited staff to provide relief)?	1 ● 2 ● 3 ● 4 ● 5 ●
22.	How competent are you in your ability to decontaminate yourself using standard personal decontamination equipment?	1 ● 2 ● 3 ● 4 ● 5 ●
23.	How competent are you in knowing your status under the Geneva Convention?	1 ● 2 ● 3 ● 4 ● 5 ●
24.	How competent are you with use of field communications equipment (i.e. field radio)?	1 ● 2 ● 3 ● 4 ● 5 ●
25.	How competent are you with actions you must take during warning alarms?	1 ● 2 ● 3 ● 4 ● 5 ●

**B. For the following, please indicate your level of agreement according to this scale by indicating the circle for**

**your response**

1. Totally Disagree
2. Minimally Agree
3. Moderately Agree
4. Highly Agree
5. Totally Agree

26.	I have confidence that my support system (i.e. family, friends or family support group) will meet all of my psychosocial needs.	1 ● 2 ● 3 ● 4 ● 5 ●
27.	If I am deployed, I have confidence that my support system (i.e. family, friends or family support group) will maintain communication with me.	1 ● 2 ● 3 ● 4 ● 5 ●
28.	I am confident in my ability to manage stress related to my primary job.	1 ● 2 ● 3 ● 4 ● 5 ●
29.	I am confident in my ability to manage stress related to my family.	1 ● 2 ● 3 ● 4 ● 5 ●
30.	I am confident in my ability to manage stress related to my finances.	1 ● 2 ● 3 ● 4 ● 5 ●
31.	I am confident I will know how to access mental health services if needed while deployed.	1 ● 2 ● 3 ● 4 ● 5 ●
32.	I believe there is a real need for military rules and regulations to be adapted to the deployment setting.	1 ● 2 ● 3 ● 4 ● 5 ●
33.	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".	1 ● 2 ● 3 ● 4 ● 5 ●
34.	I believe I could perform successfully in the deployed setting in the absence of realistic and relevant training.	1 ● 2 ● 3 ● 4 ● 5 ●
35.	I believe I will be provided with sufficient deployment training prior to deployment.	1 ● 2 ● 3 ● 4 ● 5 ●
36.	If my deployment commander is unable to keep me informed of all pertinent information, I could still perform successfully.	1 ● 2 ● 3 ● 4 ● 5 ●
37.	I am prepared to deal with crowded, co-ed, and mixed ranks sleeping quarters while deployed.	1 ● 2 ● 3 ● 4 ● 5 ●
38.	Understanding my deployed unit's mission, vision, and values is critical to my ability to perform successfully.	1 ● 2 ● 3 ● 4 ● 5 ●
39.	I am confident I will be able to function as a group leader in a deployed setting if needed.	1 ● 2 ● 3 ● 4 ● 5 ●
40.	It is critical for me to have a successful working relationship with members in my	1 ● 2 ● 3 ● 4 ● 5 ●

deployment unit.

## PART 2 - Demographics

Please select from the drop down box the answer most applicable to yourself or enter the information as indicated. This information is very important for our research and is anonymous. No names are used.

1. What is your current component? **Active Duty**
  2. What is your primary AFSC? **46A3 Nursing Administrator**
  3. How many years of nursing experience do you have (include military and civilian experience [LP and RN])?
  4. Do you have prior technical medical experience (i.e. medical technician)? Yes  No
  5. Are you male or female? Male  Female
  6. What is your military rank? **01 2nd Lieutenant**
  7. What is your highest education level? **Associate Degree in Nursing**
  8. When was the last time you provided direct patient care? **More than 4 years ago**
  9. Do you have the following triage experiences and education?
    - 9a. Do you have the following triage experiences and education?  
**Not Applicable**
    - 9b. Do you have the following triage experiences and education?  
**Not Applicable**
    - 9c. Do you have the following triage experiences and education? **Not Applicable**
    - 9d. Do you have the following triage experiences and education?  
**Not Applicable**
  10. Are you currently assigned to a mobility platform (i.e. Unit Type Code (UTC) such as Expeditionary Medical Support/Air Force Theater Hospital (AFTH) or Aeromedical Evacuation)? Yes  No
  11. What is your deployment status? **I am deployed**
  12. Have you ever deployed? Yes  No
  13. How many times have you deployed?
  14. What is the length of your deployment? **2 weeks**
  - 15a. What year did your deployment begin?
  - 15b. What year did your deployment end?
  16. What is your age?
  17. How frequently do you exercise? **At least 3-5 times a week**
  18. How long ago did you have a physical exam? **1-12 months ago**
  19. Are you up to date on routine gender specific (i.e. mammogram for women/prostate for men), health related exams? Yes  No  Not sure
  20. If indicated, do you have a family care plan to make arrangements for your children (required for single parents or if both parents are military)? Yes  No  Not Applicable
  21. If single, do you have a support plan for your pets, finances or elder dependents? Yes  No  Not Applicable
- Do you use the following mechanism(s) to cope with stress? (Check all that apply)
- Music

- Tobacco
- Alcohol
- Physical Exercise
- Reading
- Relaxation/Meditation Techniques

- Talking with Friends
- Religious Faith
- Eating
- Sleeping
- Other (please specify below)

Thank you very much for completing this questionnaire.

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