

# SSA-3369 EDCS Screenshots for PRW NPRM

## Work History

The screenshot shows the SSA-3369 EDCS Work History form. The form is titled "3369 ID/Work History - AN: 031-07-7002 CEF: NYA". The left sidebar contains a navigation menu with items like "Forms", "3368", "About You", "Contacts", "Medical Conditions", "Work and Onset", "Job History", "Medical Sources", "Tests", "Medicines", "Other Medical Info", "Education/Training", "Remarks", "3367", "3369", "ID/Work History", "3369 Remarks", "827", "Internet Documents", "Title II/Title XVI", "Appointed Rep", and "Flags/Messages". The main content area is titled "3369 ID/Work History" and has sections for "Identification" (Name: Michael James Larsen, Daytime telephone number: 704-055-9114) and "Work Information". Below the "Work Information" section, there is a text box for "Job Title" with the placeholder text "JOB TITLE when added in EDCS" and an "Add Job" button. The form also has "Next Page" and "Previous Page" buttons at the bottom.

**Include- Suffix for the name**

**Modify to read: "Daytime numbers where we can call to speak with you or leave a message, if needed. Include area code or IDD and country code if outside the USA or Canada."**

**Add "Primary" to add the number**

**Modify Alternate to "Secondary"**

**Modify the instructions to say: "List the jobs (up to 5) that you had in the past 5 years. List all the jobs that you have had in the last 5 years:"**

- **Include self-employment**
- **Include work in a foreign country**
- **List your most recent job first"**

**Add question: "Did you have a job in the last 5 years?" Add checkboxes for  YES  NO**

**If yes, modify Job Listing instructions to say, "Select the number of jobs you have had in the past 5 years".**

## Job History

**Job Information -**

Occupation or job title:  
Examples:  
• Short-order cook, not just cook  
• Elementary school teacher, not just teacher  
• Long-haul truck driver, not just driver

Type of business:  
Do not give the employer's name.  
Examples:  
• Restaurant  
• Large hotel chain  
• Elementary school

**Dates Worked**

If you can't remember the exact dates, be as specific as possible (month or season and year). If you are currently working in this job, enter "Present" in the To input field.

From:  To:

**Most Recent Hours and Pay**

Average hours per day:   
Average days per week:

Rate of pay:  
If you did "piece work," give the average amount you earned per day. If you were on commission, give the average amount per month.  
\$  (per: )

What did you do all day in this job?

**In this job, did you:**

Use machines, tools, or equipment?  
Examples:  
• Carpenters may use tools like power saws and nail guns  
• Secretaries may use a computer  
 Yes  No  Not yet answered

Use technical knowledge or skills?  
Examples:  
• Electricians may use a computer  
• Teachers know the subjects they teach  
 Yes  No  Not yet answered

Do any writing, complete forms, or perform any duties like this?  
Examples:  
• Waitresses write customers' orders  
• Bookkeepers complete reports  
• Truck drivers complete log logs  
 Yes  No  Not yet answered

For Rate of Pay- Frequency in drop-down should be Per: hour, day, week, month, or year

What did you do all day in this job?  
We need to know about the types of job skills and physical tasks you had during a typical workday in this job. Include:  
• What were your main responsibilities?  
• What did you do during a normal workday?

Daily duties included:  
Examples of daily duties:

**In this job, did you:**

Use machines, tools, or equipment?  
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Examples:  
• Electricians may use a computer  
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• Bookkeepers complete reports  
• Truck drivers complete log logs  
 Yes  No  Not yet answered

Modify the questions to read as follows:

**“For this job, describe in detail the tasks you did in a typical workday. Examples of tasks include stocking shelves, greeting customers, scheduling appointments, and maintaining records.”** Add a text box for description.

**“If any of the tasks listed above involved writing or completing reports, describe the type of report you wrote or completed and how much time you spent on it per workday or workweek.”** Add a text box for description.

**If any of the tasks listed above involved supervising others, describe who or what you supervised and what supervisory duties you had. Examples of supervisory duties include performance management, making schedules, and maintaining time records.”** Add a text box for explanation.

**“List the machines, tools, and equipment you used regularly when doing this job and explain what you used them for. Examples include computer, telephones, forklift, air compressor, and meat slicer.”** Add a text box for description.

**“Tell us about the work-related skills you used in this job and the job duties you completed using these skills. Examples of work-related skills include reading blueprints to instruct workers on how to build houses and medical coding to determine the amount providers should be paid.”** Add a text box for explanation.

Add this question, **“Did your job require you to interact with coworkers, the general public, or anyone else?”** YES NO

If they select yes, display a textbox with the following instructions:

**“Describe who you interacted with, the purpose of this interaction, how you interacted, and how much time you spent doing it per workday or workweek. Examples include answering customer questions on the telephone for 5 hours per day or showing clients sale properties for 4 hours per day.”** Add a text box for explanation.

In this job, how many hours a day did you do these activities?

The following numbers do not have to add up to the total "Average" typing simultaneously.

Walk?

Stand?

Sit?

Climb?   
(stairs, ladders, etc.)

Stoop?   
(bend down and forward at waist)

Kneel?   
(bend legs and rest on knees)

Crouch?   
(bend legs and back down and forward)

Crawl?   
(crawl on hands and knees)

Handle, grab, or grasp big objects?

Examples:  

- Lift a box
- Move a lever such as a gear shift

Reach?

Write, type, or handle small objects?

Examples:  

- Write on a pad
- Enter numbers in a calculator
- Sort objects by hand

Modify the instructions to read: **“Tell us how much time you spent performing the following physical activities in a typical workday. The total hours/minutes for standing and/or walking and sitting should equal the Hours per Day. The example below shows an 8-hour workday with 2 hours standing and/or walking and 6 hours sitting (8 hours total).”** For each activity, add a text box or radio buttons to select for “Hours/ Minutes” to indicate time for each activity.

**\*The paper form includes an “Example” text box that shows how many hours/minutes for each activity. Standing and walking- 2 hours; stooping- 6 minutes. Work with Systems to determine how to include this on EDCS.**

Combine walk and stand to show, **“Standing and/or Walking”**

Sit to **“Sitting”**

Stoop to **“Stooping”**; keep explanation

Kneel to **“Kneeling”**; keep explanation

Crouch to **“Crouching”**; keep explanation

Crawl to **“Crawling”**; keep explanation

**“Using fingers to touch, pick, or pinch (e.g., using a mouse, keyboard, turning pages, or buttoning a shirt)”**  
Add radio buttons to select One Hand and Both Hands

**“Using hands to seize, hold, grasp, or turn (e.g., holding a large envelope, a small box, a hammer, or water bottle)”**; Add radio buttons to select One Hand and Both Hands

Reach to **“Reaching at or below the shoulder”**; Add radio button to select One Arm and Both Arms

**“Reaching overhead (above the shoulder)”**: Add radio buttons to select One Arm and Both Arms

Climb to **“Climbing stairs or ramps”**

**“Climbing ladders, ropes, or scaffolds”**

Modify Physical Activities Lifting and Carrying instructions: **“Tell us about lifting and carrying in this job. Explain what you lifted, how far you carried it, and how often you did it in a typical workday.”**

Physical Activities: Lifting and Carrying

Describe what you lifted, how far you carried it, and how often you lifted it.  
[Examples of lifting and carrying](#)

What is the heaviest weight you lifted?

How much weight did you lift frequently (from 1/3 to 2/3 of your workday)?  
 Example: A gallon of milk weighs 8 pounds

Modify the question to “**Select the weight frequently lifted (i.e., 1/3 to 2/3 of the workday)**”. Add “**Less than 1 lb.**” to the list of options in the drop down.

Modify the question to “**Select the heaviest weight lifted**” Add “**Less than 1 lb.**” to the list of options in the drop down.

After last heaviest weight question, add this question: “**Did your job expose you to any of the following? Check all that apply.**” Add radio buttons and text to select the following options:

“  **Outdoors**    **Extreme Heat (non-weather related)**    **Extreme Cold (non-weather related)**    **Wetness**    **Humidity**    **Hazardous Substances**    **Moving Mechanical Parts**    **High Exposed Places**    **Heavy Vibration**    **Loud Noise**    **Other**”

If one or more of the options are checked, add a text box with instructions that say, “**Tell us about the exposure(s) and how often you were exposed.**”

**Supervisory Duties**

In this job, did you supervise other people?  
 Yes  No  Not yet answered

How many people did you supervise?

What part of your time was spent supervising people?

Did you hire and fire employees?  
 Yes  No  Not yet answered

Were you a lead worker?  
Examples:  
• Foreman  
• Chief Electrician

Yes  No  Not yet answered

Remove the last two questions. - "Did you supervise other people in this job?" and "Were you a lead worker?"

Add this question and a textbox for explanation:

"Explain how your medical conditions affect your ability to do this job."

### Section 3- Remarks

## Section 4 “Who Is Completing this Report?”

**Person Completing the Report**

**Who is providing information?**

[ ]

Alternate Contact listed above

Someone else

**Name of Person Completing This Report**

First name:  Middle name:  Last name:  Suffix:

Agency name:

Relationship to disabled person:

**Address for Person Completing This Report**

Address is:  U.S.  Foreign

Street address line 1:

Street address line 2:

Street address line 3:

Street address line 4:

City:  State:  ZIP Code:

**Telephone for Person Completing This Report**

Telephone number is:  U.S.  Foreign  None

Daytime telephone number: (999-999-9999)  Ext:

This is a new section to add to the 3369 in EDCS.

Section Title: “Who is Completing this Report”

Modify this section as follows:

Remove Who is providing the information?

Add the following”

“Date Report Completed (MM/DD/YYYY)”

“Who is completing this report?” Add radio buttons and the following options:

“John Doe

Contact Person

Additional Contact Person

Someone else”

If they select radio button for Someone else, provide text boxes to complete the following information:

“Name (First, Middle Initial, Last)

Relationship to John Doe

Mailing Address (Street or PO Box) include the apartment number, if applicable.

CITY

STATE/Province

ZIP/Postal Code

Country (if not USA)

DAYTIME PHONE NUMBER where we may reach you or leave a message, if needed. Include the area code or IDD and country code if outside the USA or Canada.”