



# WORK CONTEXT

Some Important Questions About  
The Work Context Of Your  
Occupation



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Form D R1  
OMB#1205-0421  
Expires: 11/30/2027  
Version: 310E

A stylized illustration of a laptop screen. The screen is white and contains text. The laptop body is dark blue.

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## Getting Started

These questions are about **working conditions**, including the work setting and possible hazards, the pace of work, and interactions with others. Please respond with answers that best describe **your current job**, summarized below.

### Registered Nurses

Assess patient health problems and needs, develop and implement nursing care plans, and maintain medical records. Administer nursing care to ill, injured, convalescent, or disabled patients. May advise patients on health maintenance and disease prevention or provide case management. Licensing or registration required.

Mark your response by placing a check mark, an "X," or completely filling in the circle:



**1. How frequently does your current job require each of the following items?**

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Face-to-face discussions with individuals and within teams	○	○	○	○	○
b. Public speaking (one speaker with an audience)	○	○	○	○	○
c. Telephone conversation	○	○	○	○	○
d. E-mail	○	○	○	○	○
e. Written letters and memos	○	○	○	○	○

**2. How much contact with others (by telephone, face-to-face, or otherwise) is required to perform your current job?**

- ☐ No contact with others
- ☐ Occasional contact with others
- ☐ Contact with others about half the time
- ☐ Contact with others most of the time
- ☐ Constant contact with others

**3. In your current job, how important are each of the following interactions?**

	Not important at all	Fairly important	Important	Very important	Extremely important
a. Work with or contribute to a work group or team	○	○	○	○	○
b. Deal with external customers (as in retail sales) or the public in general (as in police work)	○	○	○	○	○
c. Coordinate or lead others in accomplishing work activities ( <u>not</u> as a supervisor or team leader)	○	○	○	○	○

4. In your current job, how responsible are you for the following?

	No responsibility	Limited responsibility	Moderate responsibility	High responsibility	Very high responsibility
a. Health and safety of other workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Work outcomes and results of other workers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. How frequently do the following occur in your current job?

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Conflict situations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Dealing with unpleasant, angry, or discourteous people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Dealing with violent or physically aggressive people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. How often does your current job require you to work in the following environments?

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Indoors in an environmentally controlled environment (like a warehouse <u>with</u> air conditioning)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. In an environment that is not environmentally controlled (like a warehouse <u>without</u> air conditioning)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Outdoors, exposed to all weather conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Outdoors, under cover (like in an open shed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. In an open vehicle or operating equipment (like a tractor)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. In a closed vehicle or operate enclosed equipment (like a car)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. How **physically close to other people** are you when you perform your current job?

- ☐ I don't work near other people (beyond 100 ft.)
- ☐ I work with others but not closely (e.g., private office)
- ☐ Slightly close (e.g., shared office)
- ☐ Moderately close (at arm's length)
- ☐ Very close (nearly touching)

8. In your current job, how often are you exposed to the following conditions?

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Sounds and noise levels that are distracting and uncomfortable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Very hot (above 90° F) or very cold (under 32° F) temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Extremely bright or inadequate lighting conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Contaminants (such as pollutants, gases, dust, or odors)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Cramped work space that requires getting into awkward positions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Whole body vibration (like operating a jackhammer or earth moving equipment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. How often does your current job require that you be exposed to the following conditions?

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Radiation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Diseases or infection— <i>This can happen with workers in patient care, laboratory work, sanitation control, etc.</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. High places— <i>This can happen for workers who work on poles, scaffolding, catwalks, or ladders longer than 8 feet in length</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Hazardous conditions— <i>This can happen when working with high-voltage electricity, flammable material, explosives, or chemicals. Do not include working with hazardous equipment</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Hazardous equipment— <i>This includes working with saws, close to machinery with exposed moving parts, or working near vehicular traffic (but not including driving a vehicle)</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Minor burns, cuts, bites, or stings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



**10. How much time in your current job do you spend doing each of the following?**

	Never	Less than half the time	About half the time	More than half the time	Continually or almost continually
a. Sitting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Standing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Climbing ladders, scaffolds, poles, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Walking or running	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Kneeling, crouching, stooping, or crawling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**11. How much time in your current job do you spend doing each of the following?**

	Never	Less than half the time	About half the time	More than half the time	Continually or almost continually
a. Keeping or regaining your balance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Using your hands to handle, control, or feel objects, tools, or controls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Bending or twisting your body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Making repetitive motions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**12. In your current job, how often do you wear each of the following?**

	Never	Once a year or more but not every month	Once a month or more but not every week	Once a week or more but not every day	Every day
a. Common protective or safety equipment, such as safety shoes, glasses, gloves, hearing protection, hard hats, or life-jackets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Specialized protective or safety equipment, such as breathing apparatus, safety harness, full protection suits, or radiation protection	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. **How serious a mistake can you make on your current job (one you can't easily correct)?**
- ☐ Not serious at all
  - ☐ Fairly serious
  - ☐ Serious
  - ☐ Very serious
  - ☐ Extremely serious
14. **In your current job, what results do your decisions usually have on other people or the image or reputation or financial resources of your employer?**
- ☐ No results
  - ☐ Minor results
  - ☐ Moderate results
  - ☐ Important results
  - ☐ Very important results
15. **In your current job, how often do your decisions affect other people or the image or reputation or financial resources of your employer?**
- ☐ Never
  - ☐ Once a year or more but not every month
  - ☐ Once a month or more but not every week
  - ☐ Once a week or more but not every day
  - ☐ Every day
16. **In your current job, how much freedom do you have to make decisions without supervision?**
- ☐ No freedom
  - ☐ Very little freedom
  - ☐ Limited freedom
  - ☐ Some freedom
  - ☐ A lot of freedom
17. **How automated is your current job?**
- ☐ Not at all automated
  - ☐ Slightly automated
  - ☐ Moderately automated
  - ☐ Highly automated
  - ☐ Completely automated
18. **How important to your current job is being very exact or highly accurate?**
- ☐ Not important at all
  - ☐ Fairly important
  - ☐ Important
  - ☐ Very important
  - ☐ Extremely important

19. How important to your current job are continuous, repetitive physical activities (like key entry) or mental activities (like checking entries in a ledger)?
- ☐ Not important at all
  - ☐ Fairly important
  - ☐ Important
  - ☐ Very important
  - ☐ Extremely important
20. How much freedom do you have to determine the tasks, priorities, or goals of your current job?
- ☐ No freedom
  - ☐ Very little freedom
  - ☐ Limited freedom
  - ☐ Some freedom
  - ☐ A lot of freedom
21. How competitive is your current job?
- ☐ Not at all competitive
  - ☐ Slightly competitive
  - ☐ Moderately competitive
  - ☐ Highly competitive
  - ☐ Extremely competitive
22. How often does your current job require you to meet strict deadlines?
- ☐ Never
  - ☐ Once a year or more but not every month
  - ☐ Once a month or more but not every week
  - ☐ Once a week or more but not every day
  - ☐ Every day
23. How important to your current job is keeping a pace set by machinery or equipment?
- ☐ Not important at all
  - ☐ Fairly important
  - ☐ Important
  - ☐ Very important
  - ☐ Extremely important
24. How regular is your work schedule at your current job?
- ☐ Regular (established routine, set schedule)
  - ☐ Irregular (changes with weather conditions, production demands, or contract duration)
  - ☐ Seasonal (only during certain times of the year)
25. How many hours do you work in a typical week on your current job?
- ☐ Less than 40 hours
  - ☐ 40 hours
  - ☐ More than 40 hours



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## Work Tasks

These questions are about tasks related to your current job. A **task** is an action or set of actions performed together to accomplish an objective. You will be asked about each task's **relevance**, **frequency**, and **importance**. Rate each task as if you were performing work that is typical of your current job.

**Task 1:** Consult and coordinate with health care team members to assess, plan, implement and evaluate patient care plans.

1. Is Task 1 relevant at all to performance of your current job?

- ☐ Yes  
☐ No → Go to 2

1b. How often is Task 1 performed in your current job?

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

1c. How important is Task 1 to performance of your current job?

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 2:** Maintain accurate, detailed reports and records.

2. Is Task 2 relevant at all to performance of your current job?

- ☐ Yes  
☐ No → Go to 3

→2b. How often is Task 2 performed in your current job?

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

2c. How important is Task 2 to performance of your current job?

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important



**Task 3:** *Modify patient treatment plans as indicated by patients' responses and conditions.*

**3. Is Task 3 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 4

**→3b. How often is Task 3 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**3c. How important is Task 3 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important



**Task 4:** Monitor all aspects of patient care, including diet and physical activity.

**4. Is Task 4 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 5

→**4b. How often is Task 4 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**4c. How important is Task 4 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 5:** Monitor, record and report symptoms and changes in patients' conditions.

**5. Is Task 5 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 6

**→5b. How often is Task 5 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**5c. How important is Task 5 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 6:** *Observe nurses and visit patients to ensure that proper nursing care is provided.*

**6. Is Task 6 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 7

→**6b. How often is Task 6 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**6c. How important is Task 6 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 7:** *Prepare patients for, and assist with, examinations and treatments.*

**7. Is Task 7 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → **Go to 8**

**→7b. How often is Task 7 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**7c. How important is Task 7 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 8:** *Prepare rooms, sterile instruments, equipment and supplies, and ensure that stock of supplies is maintained.*

**8. Is Task 8 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → **Go to 9**

→**8b. How often is Task 8 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**8c. How important is Task 8 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 9:** Provide health care, first aid, immunizations and assistance in convalescent and rehabilitation in locations such as schools, hospitals and industry.

**9. Is Task 9 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 10

**→9b. How often is Task 9 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**9c. How important is Task 9 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 10:** *Record patients' medical information and vital signs.*

**10. Is Task 10 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → **Go to 11**

→**10b. How often is Task 10 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**10c. How important is Task 10 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 11:** *Assess the needs of individuals, families, and/or communities, including assessment of individuals' home and/or work environments to identify potential health or safety problems.*

**11. Is Task 11 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 12

**→11b. How often is Task 11 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**11c. How important is Task 11 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important



**Task 12:** *Conduct specified laboratory tests.*

**12. Is Task 12 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → **Go to 13**

→**12b. How often is Task 12 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**12c. How important is Task 12 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 13:** Consult with institutions or associations regarding issues and concerns relevant to the practice and profession of nursing.

**13. Is Task 13 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 14

**→13b. How often is Task 13 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**13c. How important is Task 13 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 14:** *Direct and supervise less skilled nursing/health care personnel, or supervise a particular unit on one shift.*

**14. Is Task 14 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 15

→**14b. How often is Task 14 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**14c. How important is Task 14 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 15:** *Hand items to surgeons during operations.*

**15. Is Task 15 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → **Go to 16**

**→15b. How often is Task 15 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**15c. How important is Task 15 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 16:** *Instruct individuals, families and other groups on topics such as health education, disease prevention and childbirth, and develop health improvement programs.*

**16. Is Task 16 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 17

→**16b. How often is Task 16 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**16c. How important is Task 16 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 17:** Order, interpret, and evaluate diagnostic tests to identify and assess patients' condition.

**17. Is Task 17 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 18

**→17b. How often is Task 17 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**17c. How important is Task 17 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 18:** *Prescribe or recommend drugs, medical devices or other forms of treatment, such as physical therapy, inhalation therapy, or related therapeutic procedures.*

**18. Is Task 18 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 19

→**18b. How often is Task 18 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**18c. How important is Task 18 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 19:** Provide or arrange for training/instruction of auxiliary personnel or students.

**19. Is Task 19 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 20

**Task 20:** Refer students or patients to specialized health resources or community agencies furnishing assistance.

**20. Is Task 20 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 21

**→19b. How often is Task 19 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**19c. How important is Task 19 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**→20b. How often is Task 20 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**20c. How important is Task 20 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important



**Task 21:** Work with individuals, groups, and families to plan and implement programs designed to improve the overall health of communities.

**21. Is Task 21 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 22

**Task 22:** Administer local, inhalation, intravenous, and other anesthetics.

**22. Is Task 22 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 23

**→21b. How often is Task 21 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**21c. How important is Task 21 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**→22b. How often is Task 22 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**22c. How important is Task 22 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 23:** Contract independently to render nursing care, usually to one patient, in hospital or private home.

**23. Is Task 23 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 24

**Task 24:** Deliver infants and provide prenatal and postpartum care and treatment under obstetrician's supervision.

**24. Is Task 24 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 25

**→23b. How often is Task 23 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**23c. How important is Task 23 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**→24b. How often is Task 24 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**24c. How important is Task 24 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 25:** Direct and coordinate infection control programs, advising and consulting with specified personnel about necessary precautions.

**25. Is Task 25 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 26

**Task 26:** Engage in research activities related to nursing.

**26. Is Task 26 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 27

**→25b. How often is Task 25 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**25c. How important is Task 25 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**→26b. How often is Task 26 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**26c. How important is Task 26 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 27:** Inform physician of patient's condition during anesthesia.

**27. Is Task 27 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 28

**Task 28:** Perform administrative and managerial functions, such as taking responsibility for a unit's staff, budget, planning, and long-range goals.

**28. Is Task 28 relevant at all to performance of your current job?**

- ☐ Yes  
☐ No → Go to 29

**→27b. How often is Task 27 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**27c. How important is Task 27 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**→28b. How often is Task 28 performed in your current job?**

- ☐ Once per year or less  
☐ More than once per year  
☐ More than once per month  
☐ More than once per week  
☐ Daily  
☐ Several times per day  
☐ Hourly or more often

**28c. How important is Task 28 to performance of your current job?**

- ☐ Not important  
☐ Somewhat important  
☐ Important  
☐ Very important  
☐ Extremely important

**Task 29:** *Perform physical examinations, make tentative diagnoses, and treat patients en route to hospitals or at disaster site triage centers.*

**29. Is Task 29 relevant at all to performance of your current job?**

☐ Yes

☐ No → *Go to next page*

**→29b. How often is Task 29 performed in your current job?**

☐ Once per year or less

☐ More than once per year

☐ More than once per month

☐ More than once per week

☐ Daily

☐ Several times per day

☐ Hourly or more often

**29c. How important is Task 29 to performance of your current job?**

☐ Not important

☐ Somewhat important

☐ Important

☐ Very important

☐ Extremely important

**Are there any additional tasks relevant to your current job?**

☐ Yes

☐ No → *Go to next section*

→ **Please describe up to 5 additional tasks that are relevant to your current job:**

a.

b.

c.

d.

e.

**Which of the following best describes how closely this description matches the duties and responsibilities of your current job summarized below?**

**Registered Nurses**

Assess patient health problems and needs, develop and implement nursing care plans, and maintain medical records. Administer nursing care to ill, injured, convalescent, or disabled patients. May advise patients on health maintenance and disease prevention or provide case management. Licensing or registration required.

- ☐ It describes almost exactly what I do.
- ☐ Most of it matches, but there are a few things that don't match what I do.
- ☐ Some things match, but most of it does not match what I do.
- ☐ It does not at all describe what I do.

## Background

The goal of this project is to get accurate, up-to-date information on your occupation from a representative set of workers in the field. Please answer the following questions about your current job to help us achieve this goal.

**1. What is the title of your current job?**

**2. How long have you worked at this job?**

- ☐ Less than 1 month
- ☐ At least 1 month, but less than 3 months
- ☐ At least 3 months, but less than 12 months
- ☐ At least 1 year, but less than 3 years
- ☐ At least 3 years, but less than 6 years
- ☐ At least 6 years, but less than 10 years
- ☐ Ten years or more

**3. Which of the following best describes your employer in your most recent job in this occupation?**

- ☐ Family business
- ☐ Self-employed
- ☐ Government
- ☐ Private for-profit company
- ☐ Non-profit organization, including tax-exempt and charitable organizations
- ☐ Academic institution
- ☐ Other (Specify) ↓

**4. What sex were you assigned at birth, on your original birth certificate?**

- ☐ Female
- ☐ Male

**5. What is your age?**

- ☐ Less than 21 years old
- ☐ 21-40 years old
- ☐ 41-60 years old
- ☐ 61 years old or older

**6. What is your race and/or ethnicity? Select all that apply.**

- ☐ American Indian or Alaska Native

*For example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of*



Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

☐ Asian

*For example, Chinese, Asian Indian, Filipino, Vietnamese, Korean, Japanese, etc.*

☐ Black or African American

*For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.*

☐ Hispanic or Latino

*For example, Mexican, Puerto Rican, Salvadoran, Cuban, Dominican, Guatemalan, etc.*

☐ Middle Eastern or North African

*For example, Lebanese, Iranian, Egyptian, Syrian, Iraqi, Israeli, etc.*

☐ Native Hawaiian or Other Pacific Islander

*For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc.*

☐ White

*For example, English, German, Irish, Italian, Polish, Scottish, etc.*

**7. What is the highest level of education that you have completed?**

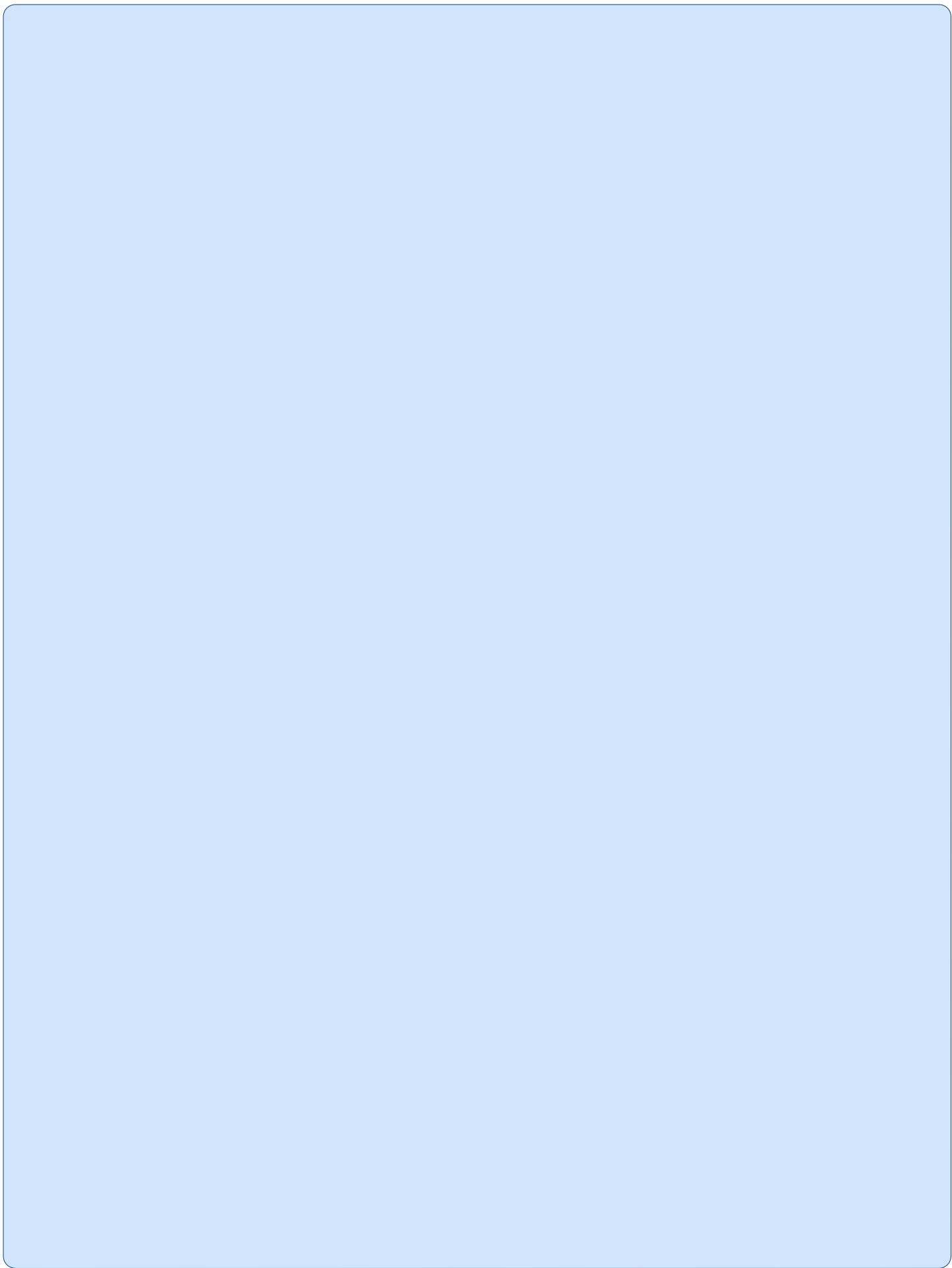
- ☐ Less than a High School Diploma
- ☐ High School Diploma or the equivalent (such as a GED)
- ☐ Post-Secondary Certificate
- ☐ Some College Courses
- ☐ Associate's Degree or other 2-year degree
- ☐ Bachelor's Degree
- ☐ Post-Baccalaureate Certificate
- ☐ Master's Degree
- ☐ Post-Master's Certificate
- ☐ Doctor's Degree – Professional Practice (such as a J.D. for Law or an M.D. for Medicine)
- ☐ Doctor's Degree – Research/Scholarship (such as a Ph.D.)
- ☐ Post-Doctoral Training

**8. Are you deaf or do you have serious difficulty hearing?**

- ☐ Yes
- ☐ No

**9. Are you blind or do you have serious difficulty seeing even when wearing glasses?**

- ☐ Yes
- ☐ No



**Thank you for your participation in the O\*NET Data Collection Program. We appreciate the time and effort you have taken to answer these questions.**

If you have any additional comments, please include them in the space below.

O=00000 C=00000 B=00000  
Occupation Title  
Form X, Line 1  
Web site username: 000000000000X  
Web site password: survey000





Prefer to complete this  
questionnaire online?  
LOG INTO: