Form Approved

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**NIOSH Heat Stress Training for Employers of Outdoor Workers**

**Pre-Test**

1. **Knowledge**

|  |  |  |  |
| --- | --- | --- | --- |
| **True or False** | **True** | **False** | **Unsure** |
| Some medications may affect tolerance to the heat | Ο | Ο | Ο |
| Victims always stop sweating with heat stroke. | Ο | Ο | Ο |
| Dark, infrequent urination may mean dehydration | Ο | Ο | Ο |
| High temperature and humidity are the only risk factors for heat-related illnesses | Ο | Ο | Ο |
| Taking a break in the air conditioning will ruin your acclimatization | Ο | Ο | Ο |
| Having a previous heat-related illness puts you at higher risk for another heat-related illness | Ο | Ο | Ο |
| Salt tablets are an effective way to restore electrolytes lost during sweating | Ο | Ο | Ο |
| Heat stroke is not always a medical emergency | Ο | Ο | Ο |

1. **Behavior Intentions**

Public reporting burden of this collection of information is estimated to average 20 mins per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATTN: PRA (0920-1154).

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **30f. Thinking about the next 6 months,** **on a scale from 1 to 10, where 1 is *not at all likely* and 10 is *extremely likely*, how likely are you to do the following at your workplace?** | **Not at all likely**  **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **Extremely likely**  **10** |
| Use an acclimatization program | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |
| Provide annual heat stress training for workers | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |
| Ensure workers take rest breaks | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |
| Ensure workers are hydrating properly | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |
| Make updates or develop a heat illness prevention program | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |
| Identify heat stress resources for my workers | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο | Ο |

For 30f, if you selected 1-5 for any of the activities, are there particular reasons? Please describe.

|  |
| --- |
|  |

1. **Self-efficacy**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **46f. How confident are you that you can do the following at work?** | **Not at all confident** | **Slightly confident** | **Moderately confident** | **Very confident** | **Extremely confident** |
| Make a difference regarding heat stress safety at my workplace. | Ο | Ο | Ο | Ο | Ο |
| Know the signs and symptoms of heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Distinguish between heat exhaustion and heat stroke | Ο | Ο | Ο | Ο | Ο |
| Administer first aid for heat-related illnesses at my workplace | Ο | Ο | Ο | Ο | Ο |
| Know when to contact emergency medical services for a heat-related illness | Ο | Ο | Ο | Ο | Ο |
| Know what to do if one of my workers became ill because of the heat | Ο | Ο | Ο | Ο | Ο |
| Protect my workers from heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Train my workers to recognize signs and symptoms of heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Train my workers about risk factors for heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Train my workers on first aid for heat-related illnesses | Ο | Ο | Ο | Ο | Ο |

1. **Attitudes**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly agree** |
| 47f. I think that heat stress at work is a critical issue. | Ο | Ο | Ο | Ο | Ο |
| 48f. Employers should make a strong effort to do something about heat stress at their workplace. | Ο | Ο | Ο | Ο | Ο |
| **I have received sufficient training on:** | **Strongly disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly agree** |
| Recognition of signs and symptoms of heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| First aid for heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Environmental risk factors for heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Personal risk factors for heat-related illnesses | Ο | Ο | Ο | Ο | Ο |
| Proper hydration | Ο | Ο | Ο | Ο | Ο |
| Additional heat burden caused by exertion, clothing, and PPE | Ο | Ο | Ο | Ο | Ο |
| Acclimatization (how to achieve and maintain) | Ο | Ο | Ο | Ο | Ο |
| Using a work/rest schedule | Ο | Ο | Ο | Ο | Ο |