

UNCLASSIFIED

SUBSTITUTION POLICIES AND GUIDELINES

APPENDIX 3 TO ANNEX F

THIS APPENDIX IS UNCLASSIFIED

OPR: HQ USAF/SGXR

Use the following parameters for deliberate planning to staff contingency tasking requirements. The substitution policy shall not restrict the authority of individual medical treatment facility commanders during contingencies to use personnel according to their best judgment.

1. AFSC Substitution. The listing below establishes two levels of substitution denoting an order and priority of skill and experience. Substitution is not permitted for AFSCs not listed below.

a. Required AFSC. To the maximum extent possible, wartime AFSC requirements should be filled with fully-trained individuals, credentialed during peacetime to perform in that particular AFSC. Substitution criteria is as follows: (Note: Each group may consist of more than one AFSC):

(1). Alternate AFSC. Acceptable substitutes that, when applied, do not significantly decrease mission capability but which require supervision by a fully-qualified AFSC. Additional training and experience is desired but not required. However, predeployment training conducted by the unit must be certified.

(2). Critical AFSCs. To the maximum extent possible, do not substitute critical wartime AFSCs for another critical AFSC even though it may be listed as an available substitution, e.g., general surgeon for an orthopedic surgeon and vice versa.

2. Cross-Leveling. The primary emphasis on cross-leveling of UTC requirements within a command will be to obtain the stated AFSC requirements, especially fully-qualified individuals in critically needed specialties such as general surgeons, orthopedic surgeons, anesthesiologists, nurse anesthetists, general nurses, and operating room nurses. As an objective, UTC fragging and inserting, if used, should be to no more than 40 percent of the UTC requirements. Those units with less than 60% of the fragged UTC may not use substitute AFSCs.

3. Status of Resources and Training System (SORTS). The application of the list by the base level planner will be subject to MAJCOM guidance. The applicable MAJCOM will monitor the use of the list by requesting that AFSC substitutions be reflected in the Remarks Section of SORTS reports. Once AFSC substitutions have been incorporated into the medical UTC MISCAPS, they should be, excluding those involving residents, secondary AFSCs, and second choice possibilities, objectively considered in SORTS as long as all prerequisites for such substitutions are met. The above exceptions should be addressed in the commander's subjective assessment of SORTS.

4. Substitutions. Substitutions shall not exceed 50 percent of any AFSC requirement (unless otherwise noted) in a single UTC or set of UTCs that collectively make up an operational platform (e.g., Air Transportable Hospital). Standard rounding methodology to the next whole number will apply (e.g., UTC FFQC1 requires 2 AFSC 48G3; $2 \times 0.5 = 1$). Deviations from this planning factor must be approved by HQ USAF/SGXR. If the AFSC requirement for a particular UTC is less than three, at least one must be fully-qualified in that particular skill. Any exceptions will be determined by the applicable MAJCOM on a case-by-case basis. Substitutes should not be expected to function as independent practitioners. Plans should incorporate provisions for supervision of substitute personnel by a fully-qualified individual in that AFSC.

7. Secondary AFSCs. Use of personnel possessing secondary AFSCs to satisfy UTC requirements shall be certified by the unit commander that they are current, and therefore able, to perform duties in the primary or designated mobility AFSC. Predeployment refresher training should be considered.

6. Residents. Residents will not be used as substitutes (except as a GMO, family physician, dermatologist, or emergency physician) for an AFSC other than the one for which they are being trained. With the exception of physicians in fellowship, residents should not function as independent practitioners.

REQUIRED AFSC

Commander 40C0

SUBSTITUTIONS

4XXX

MEDICAL SERVICE CORPS

41A3 (Health Service Admin)

41A4 (Health Service Admin, Staff)

41A4, 4A091*, 4A191*, 4A000

4A3

BIOMEDICAL SCIENCES CORPS

42E3 (Optometry)

42F3 (Podiatrist)

42G3 (Physician Assistant)

42P3 (Psychologist)

42S3 (Social Worker)

43E3 (Staff Biomed)

43E3A (Bioenvironmental Engineer)

43T3 (Biomedical Laboratory)

43T3A (Biomedical Lab Science)

45E3**

45B3**

42G3**, 46N3A, B, C, & H, 44XX, 45XX, 48XX

42S3, 44P4

42P3, 44P3, 42P3A, 42P3B

43E3A, B, D, F, G

43E3B, D, F, G

43T3A, B, C, D, E, F, H

43T3**

MEDICAL CORPS

44A3 (Chief, Hospital/Clinic Services)

44F3 (Family Practice)

44G3 (General Practice Physician)

44K3A (Peds, Adolescent Med)

44M3 (Internist)

44R3 (Diagnostic Radiologist)

44XX, 45XX, 48XX with appropriate training

46N3H, 48F3, 42G3

42G3, 44E3, 44F3, 44M**, 46N3H, 48A**, 48G3

44K**

44M**

44R3**

45A3 (Anesthesiologist)

45B3 (Orthopedic Surgeon)

45E3 (Ophthalmologist)

45G3 (Obstetrician and Gynecologist)

45N3 (Otorhinolaryngologist)

45S3 (Surgeon)

45S3A (Thoracic)

45S3E (Peripheral Vascular Surgeon)

45U3 (Urologist)

45A1 PGY-4, 46M3

45B1 PG-5, 45B**

45E3**

45G3**

45N3**

45S3 PG-5, 45S3A, B, C, D, E, H, J, 45U3, 45G3

45S3C

45S3

45U3**

48F3 (Family Practice Specialist)

48G3 (Acrospace Medicine Physician)

48A3

48A3, 48F3

NURSE CORPS

46A3 (Nursing Administrator)

46F3 (Flight Nurse)

46M3 (Nurse Anesthetist)

46N3 (Clinical Nurse)

46N3A (Women's Health Care NP)

46N3B (Pediatric Nurse Practitioner)

46N3E (Critical Care)

46N3H (Family Nurse Practitioner)

46S3 (Operating Room Nurse)

46XX** (Clinically current)

46F1

45A3, 45A1 PGY-4

46**

45G3

44K3**

46M3 (with ICU experience)

44F3, 48F3, 46N3C, 42G3

46S1, 46G3

DENTAL CORPS

47G3 (Dentist)

47G3A (Comprehensive)

47G3C (General Clinical)

47X3

47G3C, 47G3

47G3A, 47G3

47H3 (Periodontist)	47G3A
47K3 (Pediatric Dentistry)	47G3A
47S3 (Oral and Maxillofacial Surgeon)	45N3

ENLISTED SPECIALTIES

4A0X1 (Medical Admin)	4N0X1, 4Y0X1, 4C0X1, 4A1X1
4C0X1 (Mental Health)	4N0X1
4H0X1 (C-P)	4N0X1 w/ SEI 487, 46M3
4N0X1 (Medical Svs and shreds)	4F0X1, 4NXXX
4N1X1 (Surgery and shreds)	4V0X1A
4P0X1 (Pharmacy)	4N0X1 w/SEI 496, 4F071
4R0X1 (Radiology)	4R0X2, 4Y0X1
4T0X1 (Lab)	4T0X2, 4T0X3
4Y0X1 (Dental)	4Y0X2