



CARDIOLOGIST

USAF SCHOOL OF AEROSPACE MEDICINE

INTERNAL MEDICINE BRANCH (USAFSAM/FECI)

Wright-Patterson AFB, OH

INTRODUCTION: The 711th Human Performance Wing (711 HPW), headquartered at Wright-Patterson Air Force Base in Ohio, is the first human-centric warfare wing to consolidate human performance research, education, and consultation under a single organization. Established under the Air Force Research Laboratory, the 711 HPW is comprised of the Airman Systems Directorate (RH) and the United States Air Force School of Aerospace Medicine (USAFSAM). The Wing delivers unparalleled capability to the Air Force through a combination of world class infrastructure and expertise of its diverse workforce of military, civilian and contractor personnel encompassing 75 occupational specialties including science and engineering, occupational health and safety, medical professions, technicians, educators, and business operations and support.

DESCRIPTION OF SERVICES: The contractor shall meet all requirements per the basic contract and provide professionally and technically qualified individual(s) to perform all tasks in the following paragraphs to fulfill the requirements of this task order. This effort includes tasks and activities to be performed by the contractor in support of USAFSAM Aerospace Medicine Clinical Sciences Division, Internal Medicine Branch (FECI). This is a personal services contract, which is intended to create an employer-employee relationship between the Government and the individual health care providers. The performance of the individual health care providers under this task order is subject to day-to-day supervision and control by healthcare facility personnel comparable to that exercised over military and civil service health care providers engaged in comparable work. Any personal injury claims alleging negligence by the individual health care providers within the scope of the health care providers' performance of this personal services contract shall be processed by DoD as claims alleging negligence by DoD military or civil service health care providers. This personal services contract does not create any employer- employee relationship between the Government and any corporation, partnership, business association or other party or legal entity with which the individual health care providers may be associated.

MANDATORY QUALIFICATIONS: The contractor should be a fully licensed cardiologist and board certified by the American Board of Internal Medicine in Cardiology with at least 10 years of experience.



The contractor shall maintain permanent, full and unrestricted state license to practice medicine, and must meet credentialing/accreditation requirements of the Wright-Patterson AFB Medical Group, AAAHC, JCAHO, MAJCOM HQ, and HQ USAF.

Contractor shall have experience working with and evaluating USAF personnel or other DoD aviation or special duty personnel or minimum five years of aeromedical cardiology experience.

The contractor shall be able to interpret clinical evaluations for aircrew, special duty operators, and other airmen required in support of FECI consultation, teaching and research task requirements. 1.1.2 Highly

DESIRED QUALIFICATION: The contractor shall have experience with writing comprehensive reports for third party use, as well as working on publications for peer review cardiology journals and be able to create articles for publication independently.

TASKS: The contractor shall conduct comprehensive occupational aeromedical cardiac chart reviews on disqualified USAF aircrew with cardiac conditions requiring a waiver to return to operational duties, in support of the cardiology research and as needed to maintain clinical proficiency in aeromedical cardiology. The contractor shall operate as an independent specialist within the Internal Medicine Branch and Aeromedical Consultation Service. The contractor shall participate in clinical conferences and consult with other aeromedical specialists within the division in support of research and as needed to maintain clinical proficiency in aeromedical cardiology.

The contractor shall serve as an expert consultant or advisor as required in aeromedical cardiology matters in the course of maintaining clinical proficiency in aeromedical cardiology.

The contractor shall gather and maintain patient information and records, including social or medical history in relation to coronary artery disease and as needed for evaluations performed to maintain clinical proficiency in aeromedical cardiology.

The contractor shall summarize clinical case evaluations of aircrew, special duty operations, and other individuals in written and verbal format as needed for evaluations performed to maintain clinical proficiency in aeromedical cardiology.

The contractor shall conduct FECI instruction/lectures via PowerPoint presentations to flight surgeons, aerospace physiologists, psychologists, and international flight surgeons in training at USAFSAM on results of FECI case reviews and research related to coronary artery disease as applied to the delivery of aeromedical cardiac consultations.

The contractor shall design plans for scientific and statistical investigations regarding coronary artery disease utilizing data from FECI research data determined to be relevant to teaching and consultative mission tasks and applicability to aerospace medicine and present findings at national and international conferences. All scientific and statistical investigation plans will be coordinated with and approved by FECI professional staff and Contracting Officer Representative (COR) for improving branch teaching and consultation capabilities. The contractor shall collaborate with FECI professional colleagues and other FECI staff and organize review of scientific literature on coronary artery disease and participate in discussion of same with FECI professional staff and contractors, as needed in support of research tasks.

The contractor shall assist FECI professional staff and senior statistician in authoring scientific paper(s), professional presentation(s), and DoD technical report(s) in support of coronary artery disease research tasks.



The number of presentations, reports and papers shall be determined by FECI branch chief and principal investigator based upon the relevance of findings as they become available.

The contractor shall assist in the data analyses, research design, report writing and research collaboration of FECI research projects.

The contractor shall provide and receive technical guidance and advisory recommendations to and from FECI professional staff regarding coronary artery disease research project management, as well as complex case reviews for S&A studies.

The contractor shall work with FECI professional staff to assure coronary artery disease research S&A projects are executing on schedule.

BASE SUPPORT: The contractor shall be provided office/laboratory space, furniture and equipment, routine office/laboratory supplies, computer hardware and software necessary to perform tasks described in this performance work statement. The government will also provide telephone service and access to a fax machine and a copier as required. All software and hardware, passwords/access to military Internet/E-mail and applicable database will be available within the scope of the contract. The contractor shall comply with local, AF and DoD policies.

GENERAL INFORMATION: Work will be accomplished primarily at location on Wright-Patterson AFB. Alternate work locations may be assigned as circumstances dictates by the Contracting Officer Representative.

Although contractor work schedule is flexible, it is expected that the contractor shall participate in team meetings and interact with government personnel, as needed, during regular duty hours (M-F 0730-1630). The Contractor must have a Non-Disclosure Agreement in place with their company, and the company must provide a copy to the Program Manager of this task order. This is necessary in order to mitigate transfer of any confidential, proprietary and/or sensitive information while in this position. Attachment 1 The contractor must complete annual training with their branch/division to include: Latex Allergy Training, HAZCOM (branch specific), Infection Control Training (ICT), Job Safety Training (JST), Fire Extinguisher Training, Operational Risk Management, and all other training deemed necessary by the joint commission for inspection and healthcare facility compliance.

Information Regarding Non-US Citizens Assigned to this effort – (a) Contractor employees requiring access to USAF bases, AFRL facilities, and/or access to U.S. Government Information Technology (IT) networks in connection with the work on this contract must be U.S. citizens. For the purpose of base and network access, possession of a permanent resident card ("Green Card") does not equate to U.S. citizenship. This requirement does not apply to foreign nationals approved by the U.S. Department of Defense or U.S. State Department under international personnel exchange agreements with foreign governments. Any waivers to this requirement must be granted in writing by the Contracting Officer prior to providing access. The above requirements are in addition to any other contract requirements related to obtaining a Common Access Card (CAC). (b) For purposes of paragraph (a) above, if an IT network/system does not require AFRL to endorse a contractor's application in order to gain access, the organization operating the IT network/system is responsible for controlling access to its system. If an IT network/system; AFRL will only endorse the following types of applications; consistent with the requirements above: (1) Contractor employees who are U.S. citizens



performing work under this contract. (2) Contractor employees who are non-U.S. citizens and who have been granted a waiver. Any additional access restrictions established by the IT network/system owner apply. 4.6 Vaccination Requirements for Health Care Workers (HCW)– (a) HCW Health Requirements:

HEALTH REQUIREMENTS: The Contractor shall comply with all health requirements in the contract. Prior to physical performance of services by the HCW, but no earlier than 60 days prior to physical performance of services by the HCW, the Contractor shall provide documentation certifying CDC-recommended health requirements for HCWs such as immunizations, annual vaccinations and medical testing at the time of initial placement and annually thereafter, as required IAW AFI 44-108, Infection Prevention and Control Program. (b) Annual Vaccination Requirements The contractor will be immunized annually with vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control (CDC) for HCWs IAW AFI 44-108, Infection Prevention and Control Program. Some annual vaccinations may be provided by the Government, if available, as determined by the local MTF. If the contractor chooses to be immunized by the Government, the contractor shall sign a waiver releasing the Government from the legal liability IAW local procedures and policies. Alternately, the contractor may obtain vaccinations at another facility, at no cost to the Government, and provide proof of vaccination to the Government.

TRAINING REQUIREMENTS: The contractor shall maintain all required qualifications, licenses, certifications, and training (to include training needed for compliance with healthcare facility clinical quality accreditation standards).

OTHER DIRECT COSTS AND TRAVEL: Contractor will be required to travel when authorized to participate in customer business line related travel, to include meetings and conferences, to fulfill respective mission goals. Such travel will only be as directed and coordinated through the COR two weeks in advance of all contractor travel in order to obtain proper authorizations. The specific travel locations, duration, and number of trips will be upon direction of the Contracting Officer and/or Contracting Officer Representative without modification to the task order, as long as adequate travel funding is available in accordance with the resulting task order. Contractor shall bill the government as reimbursable expense in accordance with the Joint Travel Regulation (JTR) applicable for the appropriate geographical area for non-local travel costs incurred as a result of a request by the government to execute the task requirements. When travel is identified, the contractor shall provide an estimate of all travel costs by location, broken out by item, to the Program Manager and COR for review prior to travel. 6.0 SECURITY:

SECRET: The contractor shall obtain a U.S. security clearance at the minimum level of "Secret" to have access to classified information or require IT-II level access. Interim clearances for newly hired personnel shall be processed as expeditiously as possible since some contractor personnel will be required to utilize the secure internet protocol router network (SIPRNET) and process classified materials; however, this will be on a case-by-case basis. Such clearance must be obtained through the Defense Investigative Services. This is a mandatory requirement set forth in DoDM 5200.02_AFMAN 16-1405, Air Force Personnel Security Program. All documentation required for security certification shall be the responsibility of the contractor. No foreign nationals shall be employed for any requirement issued under this contract without prior approval of the Government.

The contractor shall provide OPSEC protection for all sensitive/critical information and indicators involved in execution of this contract/Task Order, as defined by AFI 10-701 (Operations Security). 711 HPW Critical Information and Indicators are protected under the 711 HPW Operations Security Program and the 711 HPW



Critical Information and Indicators List (CIIL). Contractor employees granted access to critical information and indicators shall be provided initial OPSEC training by the 711 HPW OPSEC Coordinator upon in-processing and prior to being granted access to CIIL items related to the contract/Task Order. The contractor shall also participate in 711 HPW's annual OPSEC training and education programs, which includes periodic updates and refresher training on CIIL items applicable to the contract/Task Order. The 711 HPW OPSEC coordinator shall evaluate the OPSEC posture of AF contract activities and operations. Attachment 1 Page 6 of 8 6.3 All documents, including papers, abstracts and posters shall be cleared by AF prior to public release.

REPORTS AND DATA REPORTING REQUIREMENTS: Contractor Progress, Status and Management Report (PSMR). On a monthly basis, the contractor shall provide a status report The information will be on project status and describe the work accomplished. Technical Report – Study/Services. Final reports are to be submitted upon completion of each project. All reports and data shall be submitted in a non-proprietary, easily transferrable format. All reports, data, findings and literature shall be property of the USAF School of Aerospace Medicine Aerospace Medicine Consultation Division (USAFSAM/FEC). The contractor shall not reuse or distribute project information without the express permission of USAFSAM/FEC and shall retain all USAFSAM/FEC origin markings.

APPLICABLE DOCUMENTS: The contractor shall comply with all applicable operating procedures, standard methods, best management practices, management plans, and existing requirement analysis, laboratory processes and analytical procedures.

Health Insurance Portability and Accountability Act (HIPAA) is mandatory in its entirety.

CONTINUATION OF ESSENTIAL DOD CONTRACTOR SERVICES DURING CRISIS: The performance of these services is considered not mission essential during time of crisis. Should a crisis be declared, the Contracting Officer or his/her representative will verbally advise the Contractor or the revised requirements, followed by written direction.

I have read and fully understand the minimum qualifications and duties and will comply with all requirements under this contract service.

(Print Name)

(Signature)

(Date)