

**U.S. Office of Personnel Management
Office of Merit Systems Oversight and Effectiveness
Classification Appeals and FLSA Programs**

**Chicago Oversight Division
230 South Dearborn Street, DPN 30-6
Chicago, Illinois 60604**

**Classification Appeal Decision
Under section 5112 of title 5, United States Code**

Appellant: [appellant]

Representative: [representative]

Agency classification: Medical Instrument Technician
GS-649-8

Organization: Department of Veterans Affairs
Medical Center
Clinical Support Service Imaging
[city and state]

OPM decision: Medical Instrument Technician
GS-649-8

OPM decision number: C-0649-08-02

/s/

Douglas K. Schauer
Classification Appeals Officer

April 26, 2001

Date

As provided in section 511.612 of title 5, Code of Federal Regulations, this decision constitutes a certificate that is mandatory and binding on all administrative, certifying, payroll, disbursing, and accounting officials of the government. The agency is responsible for reviewing its classification decisions for identical, similar, or related positions to ensure consistency with this decision. There is no right of further appeal. This decision is subject to discretionary review only under conditions and time limits specified in the *Introduction to the Position Classification Standards*, appendix 4, section G (address provided in appendix 4, section H).

Decision sent to:

Appellant:

[appellant's name
address and
city and state]

[name and address
of appellant's
representative]

Agency:

[servicing
personnel
office]

Ms. Ventris Gibson
Deputy Assistant Secretary for Human
Resources Management
Department of Veterans Affairs
Washington, DC 20420

Introduction

The Chicago Oversight Division of the Office of Personnel Management (OPM) accepted a classification appeal from [appellant] on March 8, 2000. [appellant] is a Medical Instrument Technician, GS-649-8, assigned to the Imaging unit of the Clinical Support Section, clinical Support Service, Department of Veterans Affairs Medical Center (VAMC), [city and state]. The appellant contests his agency's classification of his position, and believes the position should be classified as Medical Instrument Technician, GS-649-9. We have accepted and decided the appeal under section 5112 of title 5, United States Code.

General issues

[appellant] believes his position merits a higher grade in part because he works without the direct supervision of an on-site Radiologist or a Vascular Surgeon, both of whom are located at the [city and state] VAMC and linked to the [state] facility via a telecommunications system. The appellant maintains that the lack of professional medical assistance places a greater burden on him to produce quality examinations to provide accurate diagnoses. He also believes that the requirements of his position require greater knowledge of all ultrasound modalities which, he believes, exceeds the top grade level for the GS-649 standard.

By law, the OPM must classify positions solely by comparing their current duties and responsibilities to OPM standards and guidelines (5 U.S.C. 5106, 5107, and 5112). All relevant classification guidance has been utilized to evaluate the appellant's statements and arrive at a proper classification.

Position information

The appellant is one of about seven employees within Clinical Support Service, Clinical Support Section, Imaging unit. The other positions in the unit consist of four Diagnostic Radiological Technicians, one Nuclear Medicine Technician, and one Lead Diagnostic Radiological Technician. The section chief, is a GS-10 Supervisory Registered Respiratory Therapist. The appellant states that although he is located in the Imaging unit, the Chief of the Clinical Support Section, who is located in [city], supervises him. He states that supervision provided by the Imaging Section chief is administrative in nature and that he does not discuss work situations or problems with the Imaging Section chief.

The major duties of the appellant's position include the full range of ultrasound and echocardiograph procedures including those performed in the abdominal, vascular and cardiac areas of the body. The appellant performs the actual procedures/studies in the Imaging section, bedside in the various wards, the intensive care unit, and in operating rooms. He provides information via hard copy and telecommunications to doctors at the VAMC in [city], [state], who utilize his work to make medical diagnoses.

Series and title determination

The appellant's duties are consistent with those described in the GS-0649, Medical Instrument

Technician occupational series. The series definition describes positions the duties of which are to perform diagnostic or medical treatment duties using medical instruments and equipment. Positions classified in this series also require a practical knowledge of human anatomy and physiology. The appellant has pursued and received a certification as a Registered Diagnostic Medical Sonographer to better perform his work, and within his specialty is considered a professional. For purposes of position classification, however, a position is considered professional when the work performed requires a baccalaureate degree from an accredited college or university. Regardless, we are required to classify the position rather than the individual, and [the appellant's] work does not require the professional level of education as defined by OPM standards.

The prescribed title for non-supervisory positions in the GS-0649 series, grade GS-04 and above is, Medical Instrument Technician. Parenthetical titles are used to further identify the specialty of the duties performed. The parenthetical title of the position is used at the agency's discretion.

Grade determination

The OPM Medical Instrument Technician, GS-649 standard, dated October 1990, is in Factor Evaluation System (FES) format. This system identifies nine different grading factors. Each factor has described for it varying levels of complexity or difficulty with each factor level assigned a different point value corresponding to that level of difficulty or complexity. The total of all points is compared to a grade conversion chart in the standard to arrive at the proper grade for the position. Under FES, work must be fully equivalent to the factor level described in the standard to warrant credit at that level's point value. If work is not fully equivalent to the overall intent of a particular level described in the standard, a lower level and point value must be assigned, unless the deficiency is balanced by an equally important aspect of the work that meets a higher level.

Under FES, positions which significantly exceed the highest factor level or fail to meet the lowest factor level described in a classification standard must be evaluated by reference to the Primary Standard, contained in Appendix 3 of the Introduction to the Position Classification Standards. It is used in this instance to evaluate whether the work performed by the appellant exceeds that described in the controlling position classification standard, GS-649, so as to be creditable at a higher level.

Factor 1, Knowledge Required by the Position

This factor assesses the nature and extent of information or facts that employees must understand to do acceptable work (e.g., steps, procedures, practices, rules, policies, theories, principles, and concepts) and the nature and extent of the skills needed to apply those knowledges.

The appellant believes that he exceeds the highest level shown in the standard, Level 1-5, because he is the sole person responsible for all modalities of ultrasound in this medical center. He has no physicians (cardiologist or vascular) on site to confer with.

The appellant is credited with Level 1-5 where the technician applies knowledge of the

instruments and complex procedures to perform special complicated examinations and treatments for which there are no standard instructions or procedures. Further, skill is needed to apply these knowledges in order to perform relatively new diagnostic or treatment procedures involving very fine distinctions or many delicate and exacting steps. This is consistent with the appellant's description of the cardiac and vascular ultrasound work that he performs. While the appellant is responsible for performing a variety of ultrasound examinations without benefit of a physician in close proximity to provide advice, the actual procedures performed by the appellant are consistent with the knowledges exercised at Level 1-5. The appellant indicated that he does not call the physician(s) who are physically located 200 miles away with questions regarding the procedures he is performing. However in cases where issues regarding a particular case require the consultation with a physician, the physicians are available by telephone and the appellant could contact them if needed. There is a cardiologist on duty at [city] for the appellant to confer with as needed, and while he has not had occasion to use this resource, it is available. The appellant stated that the cardiologist receives the tapes of the echocardiograms he has performed at the end of each day. The appellant said that he has not had to meet with the cardiologist to discuss a test that he has performed. Results from most tests, such as those conducted on the abdomen and some vascular tests are transmitted through telemedicine imaging to the radiologist in [city]. The radiologist interprets test results and treatment regimen is initiated. Vascular test results are sent to the vascular surgeon in [city] twice each week by van courier.

The position was compared to Level 1-6 in the Primary FES standard for applicability. Level 1-6 requires knowledge of the principles, concepts and methodology of a professional or administrative occupation (such as would be acquired through a pertinent baccalaureate education program or its equivalent in experience, training, or independent study). We feel that while the appellant's work is complex, it is accurately described at Level 1-5 in the GS-649 classification standard. To meet Level 1-6, for example, the work would typically involve research utilizing new equipment or novel approaches as part of a team of physician specialists and medical technicians. While the appellant's education and training may lend itself to such work, there is none performed at the [the appellant's] facility. It does not meet the level of difficulty or complexity intended for Level 1-6. We evaluate this factor at Level 1-5 and credit 750 points.

Factor 2, Supervisory Controls

This factor covers the nature and extent of direct and indirect controls exercised by the supervisor, the employee's responsibility, and the review of completed work. Controls are exercised by the supervisor in the way assignments are made, instructions are given to the employee, priorities and deadlines are set, and objectives and boundaries are defined. Responsibility of the employee depends upon the extent to which the employee is expected to develop the sequence and timing of various aspects of the work, to modify or recommend modification of instructions, and to participate in establishing priorities and defining objectives. The degree of review of completed work depends upon the nature and extent of the review, e.g., close and detailed review of each phase of the assignment, detailed review of the finished assignment, spotcheck of finished work for accuracy, or review only for adherence to policy.

The appellant states that since he has no technical supervisor at the [location] VAMC, he exceeds

Level 2-3 in the standard. The appellant works under the administrative supervision of the section chief. The position description states that he performs his work independently, with considerable reliance placed on the sonographer's experience and knowledge of complex diagnostic procedures and accepted practices.

The appellant's work exceeds Level 2-2 where the technician performs routine examinations following precedents and where deviations to regular examination procedures are referred to supervisor for decision or help. His position fully meets Level 2-3. He performs his work with great technical independence, receiving assignments from the supervisor in terms of goals, priorities and deadlines. He rarely consults the supervisor for technical advice and independently makes recommendations about procedures or changes to procedures in some situations. This matches Level 2-3 in the standard where physicians accept the technician's knowledge of complex procedures. Similarly, as stated at this level he plans and carries out procedures, handles problems and deviations in the work assignment in line with previous training and accepted practices. As the only ultrasound technician at the medical center, the appellant relies on his training and experience to perform his day to day duties. The appellant states that he modifies procedures or positioning of patient as needed in order to successfully complete the examination.

There is some similarity in the way the appellant's work is reviewed to that described at Level 2-4 in the Primary FES standard. His completed work is reviewed from the standpoint of effectiveness in meeting requirements or expected results. However, the other elements of Level 2-4 are not met. He does not receive his work assignments as the result of a collaborative effort between him and his supervisor. Nor does he plan and accomplish his work with the independence indicated at Level 2-4. We evaluate this factor at Level 2-3 and credit 275 points.

Factor 3, Guidelines

This factor covers the nature of guidelines and the judgment needed to apply them. The appellant states that during any given procedure he must make decisions and judgements based solely on his knowledge and background with no input from any other medical person; he makes all ultrasound decisions.

At Level 3-2, well established procedures for doing the work are available. Guidelines are numerous and cover such things as operation and maintenance of the equipment and administrative aspects of the job. At this level the technician uses some judgment in identifying and selecting the most appropriate guideline, making minor deviations to adapt guidelines to specific cases, and determining which of several established alternatives to use to check and correct a problem. Guidelines at Level 3-3 are described as available but not completely applicable to the work. At this level, the guidelines do not cover every situation, for example, use of alternative techniques and judgement is required to adapt procedures for individual situations. This description is consistent with the work performed by the appellant. During the telephone interview the appellant explained that he would revamp a procedure to fit the need. If something occurs that he has not encountered before, he will modify the procedure, document what was done and why.

There is no indication that the appellant's guidelines meet Level 3-4. As shown in the Primary FES standard, this level is applicable when guidelines for performing the work are scarce or of limited use. Level 3-4 employees must use initiative and resourcefulness in deviating from traditional methods or researching trends and patterns to develop new methods, criteria, or proposed new policies. We evaluate this factor at Level 3-3 and credit 275 points.

Factor 4, Complexity

This factor covers the nature, number, variety, and intricacy of tasks, steps, processes, or methods in the work performed; the difficulty in identifying what needs to be done; and the difficulty and originality involved in performing the work.

The appellant serves as the sole ultrasound technician for the [location] VAMC. He performs a variety of procedures to include, vascular, cardiac and abdominal procedures. In the last fiscal year, the appellant performed procedures on 2,543 patients. When asked which type of case is performed most frequently the appellant stated that procedures are performed in each of these areas on a daily basis. Cardiac and vascular cases were described as the most difficult because of the small vessels involved. Procedures are modified if needed by the appellant, based on the factors of a particular case. The appellant performs routine tests in the ultrasound section, he performs prostate biopsies on a weekly basis in the operating room, and he performs Transesophageal Echocardiograms (TEEs) in surgery as needed. The appellant performs Dobutamine Stress tests in the intensive care unit approximately two times per month. The performance of these tests and the results aid the physician in the diagnosis and treatment of patients.

The appellant's work meets Level 4-3 where a technician performs different specialized diagnostic procedures, methods and techniques. Consistent with this level deciding what needs to be done is affected by many variables such as the procedure to be administered, the condition of the patient, the location of the desired test, etc. The appellant selects from among a variety of choices of action based upon his education and training, the required results of the test, and the condition of the patient.

The appellant's position does not meet Level 4-4. At this higher level, technicians' work includes a wide variety of duties involving diverse and complex technical problems (such as testing, refining, and implementing new procedures and developing procedural instructions) to insure proper performance of procedures. Decisions involve complicating factors which hinder the use of standard procedures and normal alternatives (such as changing technology, inadequate information about the use and capabilities of new instruments, etc.). The work performed by the technician requires variations of technical factors to accommodate the patient's condition, extending standard test methods, changing conventional methods to produce acceptable results, developing new or revised procedures using standard techniques, or refining existing procedures. The appellant's work does have similarities to the last sentence described above. However, a position must meet all aspects of a particular factor level to be credited at that level, and his work does not meet the other aspects of Level 4-4. Level 4-3 is credited with 150 points.

Factor 5, Scope and Effect

The appellant's position meets the highest level described in the standard. Virtually identical with Level 5-3, his work involves performance of a variety of specialized diagnostic and treatment procedures. He provides diagnostic services for regular and special examinations during normal and critical care situations. His work has a significant impact on the well being of the patient. The appellant does not dispute the assignment of Level 5-3 to his position. Level 5-3 equates to 150 points.

Factor 6, Personal Contacts

and

Factor 7, Purpose of Contacts

The appellant did not disagree with the agency's assignment of Level 2.b. for these factors, the highest level in the standard, and we concur. Level 2.b. equates to 75 points.

Factor 8, Physical Demands

The appellant's position often requires considerable exertion such as when setting up equipment and moving and positioning patients. This equates to Level 8-2 where work involves regular and recurring physical exertion such as frequent bending, reaching and stretching to set up and take apart equipment, lifting and positioning patients, and carrying, pushing, or pulling moderately heavy objects. Level 8-2 is credited with 20 points.

Factor 9, Work Environment

Identical to that described at Level 9-2, the nature of the appellant's work exposes him to infectious and contagious diseases that may require him to take precautions such as the wearing of protective clothing or devices. This is a match to Level 9-2 and is credited with 20 points.

Factor Level Point Summary

Factor	Level	Points
1	1-5	750
2	2-3	275
3	3-3	275
4	4-3	150
5	5-3	150
6	6-2	25
7	7-2	50
8	8-2	20
9	9-2	20
	Total:	1715

A total of 1715 points falls within the range for a GS-8, 1605 to 1850, according to the Grade Conversion Table in the GS-649 standard.

Decision

The appellant's position is properly classified as Medical Instrument Technician GS-649-8. A parenthetical specialty may be added at the discretion of the agency.