

You need to print this form and bring it with you to Merit Badge College.

Highlighted areas are to be completed outside of class.

1. Discuss with your counselor the influence that **EIGHT** of the following people had on the history of medicine:
- |   |   |  |
|---|---|--|
| <input type="checkbox"/> a. Hippocrates             | <input type="checkbox"/> h. Joseph Lister           | <input type="checkbox"/> o. Alexander Fleming    |
| <input type="checkbox"/> b. William Harvey          | <input type="checkbox"/> i. Robert Koch             | <input type="checkbox"/> p. Charles Richard Drew |
| <input type="checkbox"/> c. Antoine van Leeuwenhoek | <input type="checkbox"/> j. Daniel Hale Williams    | <input type="checkbox"/> q. Helen Taussig        |
| <input type="checkbox"/> d. Edward Jenner           | <input type="checkbox"/> k. Wilhelm Conrad Roentgen | <input type="checkbox"/> r. James Watson &       |
| <input type="checkbox"/> e. Florence Nightingale    | <input type="checkbox"/> l. Marie and Pierre Curie  | <input type="checkbox"/> r. Francis Crick        |
| <input type="checkbox"/> f. Louis Pasteur           | <input type="checkbox"/> m. Walter Reed             | <input type="checkbox"/> s. Jonas Salk           |
| <input type="checkbox"/> g. Gregor Mendel           | <input type="checkbox"/> n. Karl Landsteiner        |  |

Note: Dr. Taussig's name is misspelled as "Raussig" in the Boy Scout Requirements booklet and the merit badge pamphlet.

2. Explain the Hippocratic Oath to your counselor, and compare the original version to a more modern one.
- Explain the Hippocratic Oath:
  - Compare the original version to a more modern one:
  - Discuss to whom those subscribing to the original version of the oath owe the greatest allegiance:
3.  Discuss the health-care provider-patient relationship with your counselor, and the importance of such a relationship in the delivery of quality care to the patient.
- Describe the role of confidentiality in this relationship.
4. Do the following:
- a. Describe the roles the following people play in the delivery of health care in your state.  
(Note: Not all may exist in your state.)
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1. Allopathic & Osteopathic Physician  | <input type="checkbox"/> 7. Nurse-midwife          | <input type="checkbox"/> 13. Physician's assistant   |
| <input type="checkbox"/> 2. Chiropractor                        | <input type="checkbox"/> 8. Nurse practitioner     | <input type="checkbox"/> 14. Podiatrist              |
| <input type="checkbox"/> 3. Emergency medical technician        | <input type="checkbox"/> 9. Occupational therapist | <input type="checkbox"/> 15. Psychologist            |
| <input type="checkbox"/> 4. Licensed practical/vocational nurse | <input type="checkbox"/> 10. Optometrist           | <input type="checkbox"/> 16. Radiologic technologist |
| <input type="checkbox"/> 5. Medical assistant                   | <input type="checkbox"/> 11. Pharmacist            | <input type="checkbox"/> 17. Registered nurse        |
| <input type="checkbox"/> 6. Medical laboratory technologist     | <input type="checkbox"/> 12. Physical therapist    | <input type="checkbox"/> 18. Respiratory therapist   |
- b. Describe the educational and licensing requirements for five of those in 4a practicing health care in your state.
- 1     2     3     4     5
5.  a. Tell what is meant by the term "primary care" with regard to a medical specialty.
- Briefly describe the types of work done by physicians in the following "core" specialties:
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 1. Internal medicine* | <input type="checkbox"/> 2. Family practice* | <input type="checkbox"/> 3. Obstetrics/gynecology* |
| <input type="checkbox"/> 4. Pediatrics*        | <input type="checkbox"/> 5. Psychiatry       | <input type="checkbox"/> 6. Surgery                |
- b. Describe the additional educational requirements for these specialties.
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 1. Internal medicine* | <input type="checkbox"/> 2. Family practice* | <input type="checkbox"/> 3. Obstetrics/gynecology* |
| <input type="checkbox"/> 4. Pediatrics*        | <input type="checkbox"/> 5. Psychiatry       | <input type="checkbox"/> 6. Surgery                |
6.  a. Briefly describe the types of work performed by physicians in FIVE of the following specialties or sub-specialties
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 1. Allergy/immunology     | <input type="checkbox"/> 11. Hematology/oncology | <input type="checkbox"/> 21. Pathology                                       |
| <input type="checkbox"/> 2. Anesthesiology         | <input type="checkbox"/> 12. Hospitalist         | <input type="checkbox"/> 22. Physical Medicine & Rehabilitation              |
| <input type="checkbox"/> 3. Cardiology             | <input type="checkbox"/> 13. Neuro surgery       | <input type="checkbox"/> 23. Plastic, reconstructive & maxillofacial surgery |
| <input type="checkbox"/> 4. Colo-rectal surgery    | <input type="checkbox"/> 14. Nephrology          | <input type="checkbox"/> 24. Preventative Medicine                           |
| <input type="checkbox"/> 5. Critical Care Medicine | <input type="checkbox"/> 15. Neuro surgery       | <input type="checkbox"/> 25. Pulmonology                                     |
| <input type="checkbox"/> 6. Dermatology            | <input type="checkbox"/> 16. Neurology           | <input type="checkbox"/> 26. Radiology                                       |

- 7. Emergency Medicine
- 8. Endocrinology
- 9. Gastroenterology
- 10. Geriatric Medicine
- 17. Nuclear Medicine
- 18. Ophthalmology
- 19. Orthopedic Surgery
- 20. Otolaryngology/head & Neck Surgery
- 27. Rheumatology
- 28. Thoracic/cardiothoracic surgery
- 29. Urology
- 30. Vascular surgery

b. Describe the additional educational requirements for the five specialties or subspecialties you chose in 6a.

1.  2.  3.  4.  5.

7.  a. Visit a physician's office,\*\* preferably one who delivers "primary care." (This may be that of your counselor). Discuss the components of a medical history and physical examination (an official BSA health form may be used to guide this discussion), and become familiar with the instruments used.

- Medical history       Physical examination       Instruments used

b. Describe the characteristics of a good diagnostic test to screen for disease (e.g. routine blood pressure measurement).

- Explain briefly why diagnostic tests are not perfect.

c. Show how to take a blood pressure reading and a pulse reading.

8. Do the following:

a. Discuss the roles medical societies, employers, the insurance industry, and the government play in influencing the practice of medicine in the United States.

- Medical societies       Employers       Insurance industry       Government

b. Briefly tell how your state monitors the quality of health care within its borders, and how it provides care to those who do not have health insurance.

- How your state monitors the quality of health care:  
 How it provides care to those who do not have health insurance:

9.  Compare and discuss with your counselor at least two types of health care delivery systems used throughout the world.

10. Serve as a volunteer at a health-related event or facility in your community (e.g. blood drive, "health fair", blood pressure screening, etc.) approved by your counselor.

\* "Primary care" specialties

\*\* If this cannot be arranged, demonstrate to your counselor that you understand the components of a medical history and physical, and discuss the instruments involved.

\_\_\_\_\_  
Scout Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Troop Number

\_\_\_\_\_  
Counselor Signature

\_\_\_\_\_  
Unit Leader Signature

\_\_\_\_\_  
Date Completed

**Counselor:** Initial next to the box located to the left of the requirement completed in class. Sign the space that states Counselor Signature.

**Scout:** Complete the spaces above for Scout Name, Address and Troop Number. Complete all highlighted areas outside of class.

**This form replaces the traditional "Blue Card"**