Form Approved
OMB No.
Expiration Date:

Attachment 6b

Provider Questionnaire (Knowledge, Attitudes, Beliefs)

<<Post-Intervention>>

Chronic Fatigue Syndrome
Health Care Provider Questionnaire

1. Type of degree/certificate:
MD DO NP RN PA OT PT Masters (Specify):_____ Other (Specify):_____

2. Type of specialty (if applicable):_____

3. Type of setting you practice in:
Hospital Private Practice Group Practice Academic Community Other:_____

4. On average, how many patients do you usually see in a week? _____

5. How many new patients do you usually see in a 1 month period? _____

7. How many of those new patients usually become on-going patients in your practice? _____

8. Have you ever given a diagnosis of chronic fatigue syndrome (CFS)?
YES NO NOT APPLICABLE

9. Which of the following are necessary to make a diagnosis of CFS? (please circle TRUE or FALSE):

a.	Fatigue lasting less than 6 months	TRUE	FALSE
b.	Fatigue that significantly impact daily activities or work	TRUE	FALSE
c.	Meeting 4 or more of the 8 CFS symptom criteria	TRUE	FALSE
d.	Unique symptoms not seen in other illnesses	TRUE	FALSE
e.	A neurological and psychological evaluation	TRUE	FALSE
f.	Exclusionary laboratory tests	TRUE	FALSE

10. In your opinion, which of the following are signs or symptoms of chronic fatigue syndrome? Please circle YES or NO.

a.	Post-exertional malaise.	YES	NO
b.	Unrefreshing sleep.	YES	NO
c.	Impaired memory or concentration	YES	NO
d.	Muscle pain	YES	NO
e.	Diarrhea	YES	NO
f.	Multi-joint pain, without joint swelling or redness.	YES	NO
g.	Headache	YES	NO
h.	Tender cervical or axillary lymph nodes.	YES	NO
i.	Sore throat	YES	NO

-OVER-

Please describe your agreement with the following statements by circling a number between 1 (strongly disagree) and 7 (strongly agree).

11. Compared to other illnesses, CFS is more challenging to diagnose.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

12. If patients meet the clinical definition of chronic fatigue syndrome, they benefit from receiving a diagnosis.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

13. CFS can affect both sexes, multiple racial and ethnic groups, and varied ages, from adolescent to the elderly.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

14. Significant evidence exists for a biological basis in CFS, even though a definitive cause has not yet been found.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

15. The symptoms of CFS are variable in both type and severity.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

16. Chronic fatigue symptoms tend to worsen with physical or mental activity.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

17. One common CFS symptom is non-restorative sleep, which requires pharmacological intervention.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

18. CFS patients experience different types of pain and should be treated individually after appropriate diagnosis.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

19. Cognitive behavioral therapy (an individualized form of counseling) may help to improve CFS symptoms and patients' well-being.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

294. Graded exercise therapy is recommended as part of a management plan for CFS because it teaches people to start exercising at low levels and to increase activity slowly.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree

30. Compared to other illnesses, CFS is more difficult to treat and manage.

Strongly Disagree 1 2 3 4 5 6 7 Strongly Agree