

## 2008 Allied Health Professionals' Survey on Fetal Alcohol Syndrome

**This survey asks for information on your knowledge, attitudes and practices about diagnosis, treatment and prevention of Fetal Alcohol Syndrome (FAS) and other prenatal alcohol-related disorders. Please answer the questions by circling the number of the appropriate response or by filling in the blanks.**

### Allied Health Profession Category (Please Check One)

|   |  |   |  |  |
|---|--|---|--|--|
| <b>Alcohol /drug counselor</b> <input type="checkbox"/> | <b>nurse</b> <input type="checkbox"/>                | <b>pharmacy technician</b> <input type="checkbox"/> | <b>occupational therapist</b> <input type="checkbox"/> | <b>social worker</b> <input type="checkbox"/>                |
| <b>medical technician</b> <input type="checkbox"/>      | <b>nurse practitioner</b> <input type="checkbox"/>   | <b>physical therapist</b> <input type="checkbox"/>  | <b>respiratory therapist</b> <input type="checkbox"/>  | <b>Other</b> <input type="checkbox"/><br><br>Specify<br><br> |
| <b>midwife</b> <input type="checkbox"/>                 | <b>patient care manager</b> <input type="checkbox"/> | <b>physician assistant</b> <input type="checkbox"/> | <b>speech therapist</b> <input type="checkbox"/>       |  |

**1. During a typical work week, what proportion of your time per week do you spend in the following professional activities?**

|    | Activity:                                      | % of Hours: |
|----|--|-------------|
| a. | Direct Patient Care (self-employed)            | _____       |
| b. | Direct Patient Care (other than self-employed) | _____       |
| c. | Administration                                 | _____       |
| d. | Academic Medicine                              | _____       |
| e. | Research                                       | _____       |
| f. | Fellowship Training                            | _____       |
| g. | Other  | _____       |
|    |  | 100%        |

**The following questions are for professionals who provide some DIRECT PATIENT CARE. If you do NOT provide direct patient care, please check this box  and go to Q# 22**

**GENERAL KNOWLEDGE**

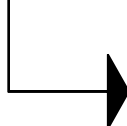
**2. What would you estimate the overall prevalence of Fetal Alcohol Syndrome in the United States to be?**

- 1 in 10    
  1 in 100    
  1 in 1,000    
  1 in 10,000    
  1 in 100,000

**3. Please check which of the two statements below corresponds most closely with your personal viewpoint. Please pick only ONE box.**

Pregnant women or women planning to become pregnant should completely abstain from consuming alcohol.

Occasional consumption of alcohol (one drink per day or less) during pregnancy is not harmful to the mother or fetus


 I believe that occasional alcohol consumption (one drink per day or less) is safe during the following trimesters of pregnancy, (check all that apply):

1<sup>st</sup> trimester    
  2<sup>nd</sup> trimester    
  3<sup>rd</sup> trimester

**4. In your opinion, how many drinks per week can a pregnant woman consume without risk of adverse pregnancy outcomes? (Fill in your answer)**

- 1   
 2   
 3   
 4   
 5   
 6   
 7   
 8   
 9   
 10   
 11   
 12   
 13   
 14+

**5. In your opinion, how many drinks per occasion can a pregnant woman consume without risk of adverse pregnancy outcomes? (Fill in your answer)**

- ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩ ⑪ ⑫ ⑬ ⑭+

**6. Please indicate whether you agree or disagree with the following statements:**

|  | Agree                    | Disagree                 | Don't Know               |
|--|--------------------------|--------------------------|--------------------------|
| FAS occurs at similar rates in all socioeconomic groups of society | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| FAS occurs at similar rates among all cultures and ethnic groups   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**7. Please indicate whether you agree or disagree with the following statements:**

|  | Agree                    | Disagree                 | Don't Know               |
|--|--------------------------|--------------------------|--------------------------|
| Alcohol's effect on fetal development remains unclear  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Prenatal alcohol exposure is a significant risk factor for permanent brain damage                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol withdrawal in a baby at birth is the worst outcome of prenatal alcohol exposure                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Young adults with FAS usually achieve successful independence at the expected time (18 to 21 years)                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Early diagnosis and ongoing surveillance of FAS may lead to implementation of secondary prevention of disabilities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**8. Do you consider any of the following problems to be associated with Fetal Alcohol Syndrome?**

|  | Yes                      | No                       | Don't Know               |
|--|--------------------------|--------------------------|--------------------------|
| Infantile withdrawal symptoms            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Delayed development                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Birth defects/malformations              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Psychiatric (DSM IV) disorders           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lowered IQ/retardation                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Behavioral problems                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Low birth weight                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Long term emotional disorders            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Addictions                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Attention deficit hyperactivity disorder | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**9. Which of the following are included in the facial dysmorphia associated with Fetal Alcohol Syndrome? (Check all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> Large inner canthal distance | <input type="checkbox"/> Short palpebral fissures |
| <input type="checkbox"/> Full lips                    | <input type="checkbox"/> Smooth philtrum          |
| <input type="checkbox"/> Thin upper lip               | <input type="checkbox"/> Flaring nares            |
| <input type="checkbox"/> Don't Know/Unsure            |   |

**10. It is easiest to diagnose FAS at what age?**

- |  |  |
|--|--|
| <input type="checkbox"/> Newborn           | <input type="checkbox"/> Early Childhood |
| <input type="checkbox"/> Adolescence       | <input type="checkbox"/> Adulthood       |
| <input type="checkbox"/> Don't Know/Unsure |  |

**11. Please indicate whether you agree or disagree with the following statement.**

Making a diagnosis of FAS stigmatizes the child and family

| Strongly Agree           | Agree                    | Disagree                 | Strongly Disagree        |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Please consider your own practice over the past 5 years when answering the following questions.**

**DIAGNOSIS & TREATMENT**

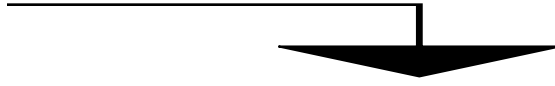
**12. Do you provide advice and education on the consequences of alcohol use during pregnancy to your adolescent female patients? (Check ONE box)**

- Always/almost always
- Sometimes
- Rarely/never

**13. During the past 12 months, how many patients have you... (if none, enter "000")**

**14. Do you make use of published diagnostic criteria for FAS in your practice?**

- Yes
- No



**If yes, which one of the following do you use?**

- Institute of Medicine criteria
- American Academy of Pediatrics criteria
- Seattle 4 digit diagnostic criteria
- Other (please specify)

**15. Many providers do not make the diagnosis of FAS in their practice. Please indicate which of the following factors may contribute to this situation. (Please select all that apply)**

- Lack of time needed to make diagnosis
- Lack of specific training to make the diagnosis
- Belief that making the diagnosis will not make a difference to the individual
- Other (please specify)

**TRAINING/PERCEIVED COMPETENCE/PERCEIVED NEEDS**

**16. Do you recall receiving any formal training in the following FAS competencies and if so, indicate where you received this training: (Check all that apply)**

|  | YES                      |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|  | NO                       | Graduate School          | Internship               | CE (received credit)     | Other                    |
| Ability to recognize the constellation of features associated with FAS and other alcohol-related effects                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Understanding of the basic biomedical mechanisms that result in FAS  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to select valid and reliable assessment instruments to screen for/diagnose FAS and other alcohol-related disorders | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to identify risk factors and interventions for secondary FAS disabilities  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|   |                          |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ability to plan and perform clinically relevant treatment and management plans to assist and aid both the patient with FAS and their families | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| When appropriate, be able to make a referral for further workup in a child with FAS   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Appreciation and ability to use interdisciplinary team evaluations for individuals with FAS   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to assist clients in accessing local FAS-related resources, including family support  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Utilization of techniques for effectively communicating information to individuals with FAS, their family members, and care providers         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demonstration of the ability to provide ethical protections to the patient with FAS regarding confidentiality and autonomy                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to educate pregnant women about the effects of alcohol on their babies  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to screen women for risky or hazardous drinking   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to conduct brief interventions for alcohol abstinence   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**17. If you have received any formal training on FAS in any venue (graduate school, internship, CE), overall, would you say that training was:**

- Poor
- Fair
- Good
- Excellent

**18. In general, how prepared do you feel to (Check one box in each row):**

|  | Very Prepared            | Somewhat Prepared        | Somewhat Unprepared      | Very Unprepared          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Identify children with possible FAS or other alcohol-related disorders                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Diagnose children with FAS and other alcohol-related disorders                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Manage/coordinate the treatment of children with FAS and other alcohol-related disorders | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**19. Please rate how helpful the following kinds of materials or supports would be to you in your clinical practice (Check one box in each row).**

|  | Very Helpful             | Somewhat Helpful         | Not Very Helpful         | Not At All Helpful       |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Concise provider and staff information on prevention, diagnosis, and intervention on FAS and other alcohol-related disorders | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Patient education materials on the impact of alcohol use during pregnancy on children  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Clinical guidelines for best practices for diagnosis of FAS and other alcohol-related disorders                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Registry of specialists available for consultation about FAS and other alcohol-related disorders                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Listing of community-based resources for children with FAS   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Materials for office practice including FAS screening and referral checklists and pocket reminders of diagnostic criteria    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**20. How helpful would the following mechanisms be to you for receiving training on FAS prevention, diagnosis, and intervention? (Check one box in each row)**

|  | Very Helpful             | Somewhat Helpful         | Not Very Helpful         | Not At All Helpful       |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Regional Conferences (CE)                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internet-based learning opportunities      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| On-site training for myself and colleagues | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-study materials (eg, CD-ROM, videos)  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**21. Please indicate whether the following types of FAS-related training and educational materials are available in the community where you practice, and whether these resources are helpful, or would be helpful if they became available. (Check all that apply)**

|  | Available                | Not Available            | Very Helpful             | Somewhat Helpful         | Not Very Helpful         | Not At All Helpful       |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Regional Conferences (CME)                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internet-based learning opportunities      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| On-site training for myself and colleagues | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-study materials (eg, CD-ROM, Videos)  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**BACKGROUND INFORMATION**

**22. What is your gender?**

- Male
- Female

**23. Is your ethnic heritage Hispanic/Latino? (This question is optional but important to the survey.)**

|                              |                         |  |
|------------------------------|-------------------------|--|
| <input type="checkbox"/> Yes | <b>➔ If yes, is it:</b> | <input type="checkbox"/> Mexican American  |
| <input type="checkbox"/> No  |                         | <input type="checkbox"/> Puerto Rican  |
|                              |                         | <input type="checkbox"/> Other Hispanic (please specify) <span style="border-bottom: 1px solid black; display: inline-block; width: 100px;"></span> <span style="font-size: 2em;">↓</span> |
|                              |                         |  |

**24. Are you: (Mark all that apply) (This question is optional but important to the survey.)**

- African-American/Black
- Native Hawaiian/Pacific Islander
- American Indian/Alaskan Native
- White
- Asian



25. What is your age?

|   |   |
|---|---|
|   |   |
| 0 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 |
| 6 | 6 |
| 7 | 7 |
| 8 | 8 |
| 9 | 9 |



26. Years in practice:

|   |   |
|---|---|
|   |   |
| 0 | 0 |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 |
| 6 | 6 |
| 7 | 7 |
| 8 | 8 |
| 9 | 9 |

27. What is your primary employment setting? (Please select only one)

- |   |  |
|---|--|
| <input type="checkbox"/> Solo practice                | <input type="checkbox"/> Community-based health center |
| <input type="checkbox"/> Group practice               | <input type="checkbox"/> Other (please specify) _____  |
| <input type="checkbox"/> Medical School or University |  |
| <input type="checkbox"/> Hospital or clinic           |  |

28. Do you consider your primary employment location to be: Circle ONE response

- |   |                                   |
|---|-----------------------------------|
| <input type="checkbox"/> Urban inner city     | <input type="checkbox"/> Rural    |
| <input type="checkbox"/> Urban not inner city | <input type="checkbox"/> Suburban |

**Thank you. Please return in the enclosed envelope to:**

Some questions from this survey were taken from:

Clarke M, Tough SC. A National Survey Regarding Knowledge and Attitudes of Health Professionals About Fetal Alcohol Syndrome. Health Canada Final Report, January 2003.

Shane T. Diekman, et al. A Survey of Obstetrician-Gynecologists on Their Patient's Alcohol Use During Pregnancy. ACOG. Vol 95, Number 5, May 2000.