Attachment D1 - Healthcare Provider Survey

This survey is intended for health care providers accessed through: 1) professional organizations; 2) health plans or HMOs; and 3) health care payers/insurers.

Note: Skip patterns will be programmed into the online form, making a streamlined survey for respondents.

Objectives – Types of information to be collected include:

1. Identify general descriptive characteristics of respondents (e.g., type of practitioner, medical specialty, practice setting).
2. Understand respondents' awareness of the EGAPP project and products (e.g., evidence reports, EGAPP Working Group recommendations).
3. Determine if the respondent has read any specific EGAPP products (e.g., published or web-posted evidence reports, published recommendations).
4. Get feedback on whether specific products address their needs.
5. Identify any perceived impact on the respondents' clinical practice (e.g., decision to offer testing).

Form Approved
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Evaluation of Genomic Applications in Practice and Prevention (EGAPP) Survey

Introduction to the EGAPP Survey

Evaluation of Genomic Applications in Practice and Prevention (EGAPP) is an initiative launched in 2004 by the National Office of Public Health Genomics (NOPHG) at the Centers for Disease Control and Prevention (CDC). The efforts of EGAPP are focused around an independent, non-federal, multidisciplinary EGAPP Working Group. The goal of EGAPP is to establish a systematic, evidence-based process to assess the effectiveness of selected genetic tests that are in transition from research to clinical and public health practice.

Products of the EGAPP project include evidence reports on selected genetic tests and published EGAPP Working Group recommendations on the appropriate use of the tests based on the evidence collected. Some evidence reports sponsored by the EGAPP project are conducted and released by Agency for Healthcare Research and Quality (AHRQ) Evidence-based Practice Centers.

To evaluate the value and impact of the EGAPP products, an independent consultant has been contracted to survey key stakeholder groups, including healthcare providers, healthcare payers and purchasers, certain policy organizations, targeted consumer groups, and website visitors. Response to these surveys is very important to inform the EGAPP Working Group and CDC about the best methods and approaches for future review of the effectiveness of emerging genetic tests, and about the potential impact of accurate and timely information on genetic tests on current healthcare practices.

Your feedback will provide important information about the relevance of EGAPP products to your practice. The questions relate only to EGAPP-supported evidence reports and EGAPP Working Group Recommendations. Thank you for your time and assistance.

Please note: While taking the survey, please do not use your browser's back and/or forward buttons; please only use the next and previous buttons within the survey. Thank you.

1. What is your role as a healthcare provider?
   ___ Physician
   ___ Laboratory Director
   ___ Physician Assistant
   ___ Genetic Counselor
   ___ Nurse Practitioner
   ___ Nurse
   ___ Other (please specify): _____
   ___ I am no longer in practice →

SUBMIT

2. What is your primary specialty?
   ___ Family Medicine
   ___ Internal Medicine
   ___ Obstetrics/Gynecology
   ___ Oncology
   ___ Pathology
   ___ Psychiatry
   ___ Clinical Genetics
   ___ Other (please specify): _____

3. Which best describes the setting in which you practice? (Please check only one)
   ___ Hospital
   ___ Group practice
   ___ Solo practice
   ___ HMO
   ___ Academic medical center
   ___ Independent laboratory
   ___ Other (please specify): _____

4. In what country do you practice?
   ___ United States
   ___ Other (please specify): _____ →Exit survey with note **SUBMIT**

5. What is your sex?
   ___ Male
   ___ Female

6a. What is your ethnicity?

   ___ Hispanic or Latino
   ___ Not Hispanic or Latino

6b. What is your race (Select one or more)?
   ___ American Indian or Alaska Native
   ___ Asian
   ___ Black or African American
   ___ Native Hawaiian or Other Pacific Islander
   ___ White

7. How many years of professional experience do you have?
___ 0 - 4 years
___ 5 - 9 years
___ 10 - 14 years
___ 15 -19 years
___ 20 or more years

8. Prior to this survey, had you read or heard about EGAPP?
___ yes
___ no →Skip to question 10a (first survey distribution) or 11a (second survey distribution)
___ unsure →Skip to question 10a (first survey distribution) or 11a (second survey distribution)

9. Where have you read or heard about EGAPP activities? (Please check all that apply)
_____ I read about EGAPP on the CDC or *www.egappreviews.org* website.
_____ I heard about EGAPP through a professional journal/newsletter.
_____ A colleague told me about EGAPP
_____ I learned about EGAPP at a meeting.
_____ Other (please describe) _____

If you checked the "I heard about EGAPP through a professional journal/newsletter" response above, please specify that journal/newsletter title here: _____

If you checked the "I learned about EGAPP at a meeting" response above, please specify that meeting here: _____

If this is the second survey distribution, respondents will be skipped to question 11a.

Following is a set of questions about a genetic test for which EGAPP has completed an evidence review and a recommendation. The test is described briefly before the questions.

> ***Cytochrome P450 (CYP450) genotyping is a genetic test proposed for use in patients treated for depression with selective serotonin reuptake inhibitors (SSRIs) to help in selection of drug and dosage.***

10a. Are you aware of the CYP450 genetic test?
___ yes
___ no →Skip to question 13
___ unsure →Skip to question 13

10b. From what source(s) have you heard about the CYP450 genetic test? (check all that apply)
___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article
___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP Working Group recommendation on CYP450 testing

10c. Have you read the EGAPP-sponsored evidence report on CYP450 testing, or a published summary of the evidence report?

____ yes ____ no ____unsure

If no or unsure, respondent skips to item 10f

10d. How understandable did you find the evidence report/published summary to be?

___very understandable ____somewhat understandable ___not understandable

10e. Will the evidence on CYP450 testing influence your decision about whether to offer the test to your patients with depression treated with SSRIs?

___ yes ___ no ___ unsure

If yes, please explain: _____

10f. Have you read the EGAPP Working Group recommendation about the use of CYP450 testing in patients with depression treated with SSRIs?

___ yes ___ no ___unsure

If no or unsure, respondent skips to item 10j

10g. How understandable did you find the EGAPP recommendation to be?

___very understandable ____somewhat understandable ___not understandable

10h. Will the EGAPP recommendation on the use of CYP450 testing influence your decision about whether to offer the test to your patients with depression treated with SSRIs?

___ yes ___ no ___ unsure

If yes, please explain: _____

10i. Which will be more useful to you in your practice? (Please check one)

___evidence report/published summary ___EGAPP recommendation ___Not applicable

10j. Are you currently offering CYP450 testing to your patients with depression treated with SSRIs?

___ yes ___ in some cases ___ no ___ unsure

10k. Please provide any comments about the evidence report/published summary or EGAPP recommendations on the use of CYP450 testing that you feel would improve the information for health care providers.

Comment box here

If this is the first survey distribution, respondents will be skipped to question 13.

Testing for Hereditary Non-Polyposis Colorectal Cancer (HNPCC or Lynch Syndrome) in newly diagnosed colorectal cancer patients and their families may be may be offered to a selected subset of high risk patients to detect a heritable form of colorectal cancer.

11a . Are you aware of genetic testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes
___ no →Skip to question 12a
___ unsure →Skip to question 12a

11b. From what source(s) have you heard about genetic testing for HNPCC (Lynch Syndrome)? (Please check all that apply)

___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article
___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP recommendation on HNPCC (Lynch Syndrome) testing

11c. Have you read the EGAPP-sponsored evidence report on genetic testing for HNPCC (Lynch Syndrome), or a published summary of the evidence report?

_____ yes _____ no _____unsure

If no or unsure, respondent skips to item 11f

11d. How understandable did you find the evidence report/published summary to be?

___very understandable _____ somewhat understandable ___ not understandable

11e. Will this information on genetic testing for HNPCC (Lynch Syndrome) influence your decision on whether to offer genetic testing for HNPCC (Lynch Syndrome) to patients with newly diagnosed colorectal cancer?

___ yes ___ no ___ unsure

If yes, please explain: _____

11f. Have you read the EGAPP Working Group recommendation about the use of genetic testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes ___ no ___unsure

If no or unsure, respondent skips to item 11j

11g. How understandable did you find the EGAPP recommendation to be?

___very understandable _____ somewhat understandable ___ not understandable

11h. Will this recommendation on the use of genetic testing for HNPCC (Lynch Syndrome) influence your decision on whether to offer genetic testing for HNPCC (Lynch Syndrome) to patients with newly diagnosed colorectal cancer?

___ yes ___ no ___ unsure

If yes, please explain: _____

11i. Which will be more useful to you in your practice? (Please check one.)

___evidence report/published summary ___ EGAPP recommendation ____ not applicable

11j. Are you currently using genetic testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes ___ in some cases ___ no ___ unsure

11k. Please provide any comments about the EGAPP sponsored evidence report/published summary or EGAPP recommendation on genetic testing for HNPCC (Lynch Syndrome) that you feel would improve the information for providers.

Comment box here

UGT1A1 testing is a pharmacogenetic test for colorectal cancer patients treated with irinotecan.

12a. Are you aware of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?

___ yes
___ no →Skip to question 13
___ unsure →Skip to question 13

12b. From what source(s) have you heard about genetic testing for UGT1A1? (Please check all that apply)

___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article
___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP recommendation on UGT1A1 testing

12c. Have you read the EGAPP-sponsored evidence report on genetic testing for UGT1A1, or a published summary of the evidence report?

____ yes ____ no ____unsure

If no or unsure, respondent skips to item 12f

12d. How understandable did you find the evidence report/published summary to be?
___very understandable ____ somewhat understandable ___ not understandable

12e. Will this information on genetic testing for UGT1A1 influence your decision on whether to offer genetic testing for UGT1A1 to colorectal cancer patients treated with irinotecan?
___ yes ___ no ___ unsure

If yes, please explain: _____

12f. Have you read the EGAPP Working Group recommendation about the use of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?
___ yes ___ no ___unsure
If no or unsure, respondent skips to item 12j

12g. How understandable did you find the EGAPP recommendation to be?
___very understandable ____ somewhat understandable ___ not understandable

12h. Will this recommendation on the use of genetic testing for UGT1A1 influence your decision on whether to offer genetic testing for UGT1A1 to colorectal cancer patients treated with irinotecan?
___ yes ___ no ___ unsure

If yes, please explain: _____

12i. Which will be more useful to you in your practice? (Please check one.)
___evidence report/published summary ___ EGAPP recommendation
____ not applicable

12j. Are you currently using genetic testing for UGT1A1 for colorectal cancer patients treated with irinotecan?
___ yes ___ in some cases ___ no ___ unsure

12k. Please provide any comments about the EGAPP sponsored evidence report/published summary or EGAPP recommendation on genetic testing for UGT1A1 that you feel would improve the information for providers.

Comment box here

13. Have you read any EGAPP sponsored evidence reports/published summaries or EGAPP recommendations other than the one/those mentioned in this survey?
___ yes ___ no ___unsure

Respondent directed to 14 if no or unsure to:
10a *and* 13 (first survey distribution)
11a *and* 12a *and* 13 (second survey distribution)

Respondent directed to question 15 if yes to 13 (first and second survey distribution)

14. If an evidence-based report on a specific test and a recommendation from a credible expert panel were available, please indicate your response to the statements below based on the scale given:

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Evidence-based information/guidelines on genetic tests are useful in my practice to:

	Not Useful	Somewhat Useful	Useful	Very Useful
a) understand what uses of the test are supported by evidence.	○	○	○	○
b) identify the population or individuals for whom the test may be appropriate.	○	○	○	○
c) provide expectations for laboratory performance and the estimated clinical validity of the test.				
d) know what actions or interventions may be suggested based on test results.				
e) understand what is known about the balance of benefits and harms related to use of the test.				
f) appreciate the ethical, legal, and social implications related to testing.				

Respondents completing 14 are skipped to 18

Question 15 will only be asked of those respondents who have read at least one EGAPP-sponsored evidence review/summary or recommendations.

15. Based on your experience with EGAPP sponsored evidence reports and/or Working Group recommendations, please indicate your response to the statements below based on the scale given:

Evidence-based information/guidelines on genetic tests are useful in my practice to:

	Not Useful	Somewhat Useful	Useful	Very Useful
a) understand what uses of the test are supported by evidence.	○	○	○	○
b) identify the population or individuals for whom the test may be appropriate.	○	○	○	○
c) provide expectations for laboratory performance and the estimated clinical validity of the test.				
d) know what actions or interventions may be suggested based on test results.				

e) understand what is known about the balance of benefits and harms related to use of the test.

f) appreciate the ethical, legal, and social implications related to testing.

16. Have you visited the EGAPP website: www.egappreviews.org?
___ yes
___ no →Skip to question 18

17. How useful did you find the EGAPP website?
___very useful ____ somewhat useful ___ not useful

18. If you have other comments you would like to make please do so in the box below.

COMMENT BOX HERE

This is the end of the survey, thank you for your feedback. Click the "Submit" button below to submit your responses.--------→ SUBMIT