Attachment B2-2:

Survey 2 for Medical Students (Post-Survey 1 or 2)

STUDY OF SUBSTANCE ABUSE DOC.COM MODULE PROJECT

March 2011

OMB No: XXXX-XXX Expiration Date: xx/xxxx

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| I. The following questions ask about background information. Please answer the following questions about yourself. For each question, please choose the single best answer unless otherwise indicated. |
|---|
| 9. Future Career Specialty a. Primary Care b. Specialty (Specify) c. Undecided |
| For the remaining questions, please use the provided definitions for the following terms: Substance use disorders: consist of substance dependence and substance abuse disorders. Substance dependence can be characterized as a cluster of cognitive, behavioral, and psychological symptoms indicating that the individual continues use of the substance (e.g., illicit drug, prescription drug, and other toxin) despite significant substance-related problems (e.g., social, occupational). This can result in tolerance, withdrawal, and compulsive drug taking behavior. Substance abuse can be characterized as a maladaptive pattern of substance use manifested by recurrent and significant adverse consequences related to the repeated use of substances. Common synonyms: substance abuse, addiction, drug dependence, drug problem. Dual diagnosis: situation in which a patient suffers from both a mental disorder and a substance use disorder. |
| 10. In medical school to date, how many hours of required formal instruction related to substance use disorders do you estimate that you have had? a. none b. 1-3 c. 4-9 d. 10-25 e. >25 |
| 11. During medical school to date, how many patients with medical problems and substance use disorders or substance use disorders alone have you personally helped to provide medical, psychiatric care, or surgical care? a. none b. 1-3 c. 4-9 d. 10-25 e. >25 |

Public reporting time for this collection is estimated to average 10 minutes, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to NIDA OMB Officer, 6001 Executive Blvd., Bethesda, MD 20893. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is XXXX-XXXX.

A. General Questions (Select the **single best answer** that is closest to your views)

| 1. | How pre | pared do you think yo | | Very | ne followin Somewhat <u>Unprepar</u> | Son | newhat | ents? Very <u>Prepared</u> |
|------|---------------------------|--|-----------|----------------------------|--|--------------|-------------------|----------------------------------|
| | a. To | obacco use | | 1 | 2 | | 3 | 4 |
| | b. A | lcohol abuse | | 1 | 2 | | 3 | 4 |
| | c. Pr | rescription drug abuse | | 1 | 2 | | 3 | 4 |
| | d. Ill | icit drug use | | 1 | 2 | | 3 | 4 |
| 2. | How pre j | pared do you think yo | ou are to | provide: | | | | |
| a. (| Counseling | g and initial treatment | for pati | Very | Some <u>red Unpre</u> | | Somewh Prepare | 5 |
| i. | Tobacco | use 1 | | 2 | ŗ | 3 | 4 | |
| ii. | Alcohol a | buse 1 | | 2 | 3 | 3 | 4 | |
| iii. | Prescripti | on drug abuse | | 1 | 2 | | 3 | 4 |
| iv. | Illicit dru | g use 1 | | 2 | 3 | 3 | 4 | |
| v. | Managem | ent of chronic pain | | 1 | 2 | | 3 | 4 |
| 3. | How imp disorders' | ortant is it for physic | cians to | be skilled a | at screenin | g patien | ts for sub | ostance use |
| | uisorucis | . □ 1 □ 2 □ 3 Not at all Important | 4 | ☐ 5 〔 Somewl Importa | | ' □ 8 | 3 🗆 9 | ☐ 10 Extremely Important |
| 4. | _ | ortant is it for physic | | | at providin | g couns | eling and | l initial treatment |
| | to patient | s with substance use of 1 1 2 3 3 Not at all Important | lisorder: | | | ′ □ 8 | □ 9 | ☐ 10 Extremely Important |
| 5. | How con | fident are you in you ☐ 1 ☐ 2 ☐ 3 Not at all | knowle | | $\Box 6 \Box 7$ | | | □ 10 Extremely |

| | Con | fident | | | Confid | lent | | | | Confident | |
|----------------------|---|--------------------------|-------------------------|----------------|------------------------|-------------|--------------------------------------|------------------|------------------|---------------------------------|-----|
| 6. | | | n your a □ 3 | bility to ☐ 4 | screen 5 Somey Confid | ☐ 6 vhat | ts for su | bstance □ 8 | use dis | orders? 10 Extremely Confident | |
| 7. | How confident with substance | | | bility to | provid | e couns | seling a | nd initio | ıl treatn | nent to patien | its |
| | ☐ 1 Not | | □ 3 | 4 | ☐ 5 Somey Confid | | 7 | □8 | 9 | ☐ 10 Extremely Confident | |
| 8. | How confident your patients was a. Tobacco | ith a subs | _ | | _ | | treatmo | ent will | make a | difference fo | r |
| | ☐ 1 Not | ☐ 2 at all fident | 3 | 4 | ☐ 5 Somey Confid | | 1 7 | □8 | 9 | ☐ 10 Extremely Confident | |
| | ☐ 1 Not Con | ☐ 2 at all fident | □ 3 | 4 | ☐ 5 Somey Confid | | 1 7 | □8 | 9 | ☐ 10 Extremely Confident | |
| | Con | ☐ 2 at all fident | □ 3 | 4 | ☐ 5 Somey Confid | | 7 | □8 | 9 | ☐ 10 Extremely Confident | |
| | Not | ug use ☐ 2 at all fident | 3 | 4 | ☐ 5 Somew | | 7 | □8 | 9 | ☐ 10 Extremely Confident | |
| 9. | Where does you "medicine is a j | _ | | - | | - | <i>cine</i> lie | on the s | pectrun | n between | |
| | □1 □2 100% "a job" | □ 3 | ☐4 More " than "c | job" | 5 🗆 | More | ⊐ 7 e "calling an "job" | □ 8 g" | 1 9 | □10 100% a calling" | |
| <u>B.</u> | Please rate your | current sl | kill leve | | | _ | skilled: 2, 1 | Moderately | skilled: 3, V | √ery skilled: 4) | |
| 1. 2. 3. 4. | Screen for substance "Duagnose "Duagnose "Duagnose" | nce use d diagnosi | lisorder s" patie | rs S | , | | Ź | 1 1 1 1 | 2 2 2 2 | 3 4 3 4 3 4 3 4 | |

| | Treat "Dual diagnosis" patients 1 Refer patients with substance use disorders to other | 2 | 3 | 4 | |
|-----------|--|-------------|--------------|------------|--------------|
| 0. | professionals for treatment | 1 | 2 | 3 | 4 |
| <u>C.</u> | How well do you understand: (Not at all: 1, Somew | vhat: 2, Mo | derately: 3, | Very well: | 4) _ |
| | The workings of 12-step programs Pharmacotherapies for treating and preventing the relapse | 1 | 2 | 3 | 4 |
| | of substance use disorders 1 Various forms of therapeutic intervention | 2 | 3 | 4 | |
| 4. | programs used in substance abuse treatment Relapse prevention | 1 1 | 2 | 3 3 | 4 4 |
| | The following questions address your personal views rega | | | | • |
| | bstance use disorders. Please select one answer that is closes (Strongly disagree | t to you | r views | | ly agree: 4) |
| 1. | These patients over utilize healthcare resources and provide nothing in return | 1 | 2 | 3 | 4 |
| 2. | Physicians who diagnose drug addiction early improve the chance of treatment success | 1 | 2 | 3 | 4 |
| | Drug addiction is a treatable illness | 1 | 2 | 3 | 4 |
| 4. | A drug-dependent person who has relapsed several times probably cannot be successfully treated | 1 | 2 | 3 | 4 |
| 5. | Most drug-dependent persons are unpleasant to work with as patients | 1 | 2 | 3 | 4 |
| 6. | A drug-dependent person cannot be helped until he/she has hit "rock bottom" | 1 | 2 | 3 | 4 |
| 7. | The care of other patients suffers because of time and resource spent on these patients | s 1 | 2 | 3 | 4 |
| 8. | Family involvement is a very important part of the treatment of drug addiction. | 1 | 2 | 3 | 4 |
| 9. | At the core of substance abuse is a failure to exercise self | | | | |
| 10 | control My feelings of disapproval of substance abusers get in the | 1 | 2 | 3 | 4 |
| 11 | way of my ability to empathize with them . I can make a great difference in the lives of my patients who | 1 | 2 | 3 | 4 |
| 12 | abuse drugs . People who abuse drugs have a special ability to manipulate | 1 | 2 | 3 | 4 |
| | physicians . Treatment is effective and worth the effort | 1 | 2 2 | 3 | 4 4 |

IV. Additional Questions

| 1. | Have you ever attended a 12-step meeting as either a participant or | an observer? Yes No | | | | | |
|-----------|--|--|--|--|--|--|--|
| 2. | . If your answer to Question IV.1 is "Yes", were you <i>required</i> to observe a 12-step meeting as part of a medical school course (skip this question if your answer to Question IV.1 is "No")? Yes No | | | | | | |
| 3. | Do you have a history of past or current substance abuse or dependence (alcohol or other drugs [excluding nicotine]) OR do you have a close friend or family member or colleague with such a history? Yes No | | | | | | |
| 4. | Some physicians have <i>negative attitudes</i> toward patients with subs do you think are the <i>sources</i> of those attitudes? (Number <i>each</i> sour "1" <i>signifies the most important source of the negative attitude</i> , "2" <i>source</i> , and so on; use each number only once) | rce below from 1-5 where | | | | | |
| | a. Negative experiences with patients with substance use disorders | (Number from 1-5) | | | | | |
| | b. Substance use by self, family member. or close friend c. Attending physicians with negative attitudes d. Resident physicians with negative attitudes e. Non-physician healthcare professionals (e.g., nurses) with negative attitudes | (Number from 1-5) (Number from 1-5) (Number from 1-5) (Number from 1-5) | | | | | |
| 5. | Some physicians have <i>positive attitudes</i> toward patients with substance do you think are the <i>sources</i> of those attitudes? (Number <i>each</i> sou "1" <i>signifies the most important source of the positive attitude</i> , "2" <i>source</i> , and so on; use each number only once) | rce below from 1-5 where | | | | | |
| | a. Positive experiences with patients with substance use disord b. Substance use by self, family member, or close friend c. Attending physicians with positive attitudes d. Residents physicians with positive attitudes e. Non-physician healthcare professionals, (e.g., nurses) with negative attitudes | ders (Number from 1-5) (Number from 1-5) (Number from 1-5) (Number from 1-5) (Number from 1-5) | | | | | |
| yo rat | Defferson Scale of Physician Empathy* (JSPE) Instructions : Place of Physician Empathy* (JSPE) Instructions: Place of the following statements ting number in the space immediately BEFORE each question. Pleas int scale (a higher number on the scale indicates more agreement). O | by writing the appropriate e use the following 7- | | | | | |
| St | rongly Disagree | Strongly Agree | | | | | |
| | | | | | | | |

| 1. | Physicians' understanding of their patients' feelings and the feelings of their patients' families does not influence medical or surgical treatment. |
|-----|---|
| 2. | Patients feel better when their physicians understand their feelings. |
| 3. | It is difficult for a physician to view things from patients' perspectives. |
| 4. | Understanding body language is as important as verbal communication in physician-patient relationships. |
| 5. | A physician's sense of humor contributes to a better clinical outcome. |
| 6. | Because people are different, it is difficult to see things from patients' perspectives. |
| 7. | Attention to patients' emotions is not important in history taking. |
| 8. | Attentiveness to patients' personal experiences does not influence treatment outcomes. |
| 9. | Physicians should try to stand in their patients' shoes when providing care to them. |
| 10. | Patients value a physician's understanding of their feelings which is therapeutic in its own right. |
| 11. | Patients' illnesses can be cured only by medical or surgical treatment; therefore, physicians' emotional ties with their patients do not have a significant influence in medical or surgical treatment. |
| 12. | Asking patients about what is happening in their personal lives is not helpful in understanding their physical complaints. |
| 13. | Physicians should try to understand what is going on in their patients' minds by paying attention to their nonverbal cues and body language. |
| 14. | I believe that emotion has no place in the treatment of medical illness. |
| 15. | Empathy is a therapeutic skill without which the physician's success is limited. |
| 16. | Physicians' understanding of the emotional status of their patients and their families is one important component of the physician-patient relationship. |
| 17. | Physicians should try to think like their patients in order to render better care. |
| 18. | Physicians should not allow themselves to be influenced by strong personal bonds between their patients and their family members. |
| 19. | I do not enjoy reading non-medical literature or the arts. |

20. ____ I believe that empathy is an important therapeutic factor in medical treatment.

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