(Attachment D) Initial Questionnaire for Learners

1. Please indicate your <u>prior</u> and <u>current</u> levels of knowledge of the process by which Comparative Effectiveness Research (CER) reviews are developed by the Agency for Healthcare Research and Quality's (AHRQ) Effective Health Care (EHC) program:

	No Knowledge		Some Knowledge			High Knowledge		Very High Knowledge		
	1	2	3	4	5	6	7	8	9	10
Before CME activity:	0	0	0	0	0	0	0	0	0	0
After CME activity:	0	0	0	0	0	0	0	0	0	0

2. How would you rate the <u>credibility and rigor</u> of each of the following in comparison to AHRQ CER reviews:

	Superior to CER Reviews	About the Same	Inferior to CER Reviews	[Not Sure]
a. Single Research Studies	0	0	0	0
b. Clinical Guidelines	0	0	0	0
c. Systematic Reviews, Meta Analyses	0	0	0	0

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3.	How do you plan to make use of the evidence-based research and	materials that were
	presented during this CME activity in relation to specific content?	(select all that apply)

- O Use in discussing evidence-based clinical options with patients
- O Use in identifying areas for discussion with patients regarding their values and preferences concerning benefits and harms
- O Use in determining those treatments and interventions that are associated with the highest levels of evidence
- O Use in another way:

O Do not plan to make use of the information; Why not?

- 4. To what extent will the evidence-based research presented during this CME activity enable you to improve the care that you give to your patients?
 - O No improvement expected
 - O Some improvement expected
 - O Significant improvement expected
 - O Uncertain at this time
- 5. Do you see any challenges or barriers that might hinder your application in practice?
- 6. Are there additional tools or applications associated with CER evidence that would be useful to you?

DEMOGRAPHICS

7. What year did you graduate from medical school? _____

- 8. What is your professional category/degree?
 - O MD/DO—in practiceO Nurse Specialist (e.g., CRNA, NP)O MD/DO—Resident/FellowO Nurse (e.g., RN, LVN)O PharmacistO PhD/PsyD/EdD/DrPH
- O PA-C O Allied Health O Other

- 9. If you are a physician, how would you classify yourself?
 - O Primary Care
 - O Specialist
 - O Surgeon
 - O Other: _____

10. If you are a physician, what is your practice setting?

- O Solo
- O Group
- O Hospital-based
- O Clinic-based
- O Other
- 11. If you are a physician, please indicate the population of the area where you conduct the majority of your practice:
 - O 0 5,000
 - O 5,001 10,000
 - O 10,001 25,000
 - O 25,001 50,000
 - O 50,001 100,000
 - O 100,001 250,000
 - O 250,001 500,000
 - O 500,001 1 million
 - O 1 million +

12. If you are a physician, what are your patient population(s)? (select all that apply)

- O Adults
- O Older adults
- O Children/Adolescents
- O Diverse cultural backgrounds
- O Diverse socioeconomic status (SES) conditions