**PATIENT AND PROVIDER SURVEY MEASURES**

**Examples of Patient Survey Questions and Constructs**

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| Measures | Survey Items |
| Patient Characteristics | Date of birth (age)  Hispanic or Latina origin  Race  Marital status  Highest level of schooling  Type of health insurance  Birth country and year moved to US if foreign-born  Language normally spoken at home |
| Experience with this Clinic | How often visited this clinic for own health care in the past year  This is the clinic used most of the time when need to see a doctor  Number of times had a Pap test at this clinic  Whether visited other clinics in the past year for your health care |
| Care at this Clinic – Attitude Scale | Rate how you feel about the health care that you have received from this clinic:  Good – Bad  Comforted – Worried  Safe – Unsafe  Satisfied – Dissatisfied |
| Pap History | Number of times had a Pap test over lifetime  How often get Pap tests  Ever had Pap test that was not normal. If yes, most recent abnormal Pap.  After last Pap test, when told to come back for next Pap test |
| Pap Knowledge Scale | Do you agree or disagree that the Pap test is used to check for:  Pregnancy  HIV/AIDS  Gonorrhea  Chlamydia  Human Papillomavirus (HPV)  Cervical cancer  Vaginal cancer  Yeast Infections  Vaginal Infections |
| High Risk Behaviors | Age at first vaginal sex  Number of partners had vaginal sex with in your entire life, and last 12 months  Ever have a sexually transmitted infection or STD  Ever have genital warts  Cigarette smoking |
| Ever heard of HPV & information sources | Ever heard of HPV  If yes, whether learned about HPV from a list of 18 possible sources. |
| HPV Knowledge Scale | Opinions about HPV:  There are many types of HPV  HPV causes HIV/AIDS  Antibiotics can cure HPV  You can always tell when someone else has HPV  HPV can cause abnormal Pap tests  Only women get HPV  HPV causes herpes  HPV affects your ability to get pregnant  HPV is a virus  Once you get HPV, you always have it  There are types of HPV that cause genital warts  HPV can be cured  HPV is spread on toilet seats  HPV is a sexually transmitted infection  There are types of HPV that cause cervical cancer  HPV may go away by itself  You can get HPV through poor personal hygiene  Even if you do not see a wart, you can still give HPV to someone else  Using a condom will decrease the chance of giving HPV to someone else  Lots of people have HPV  You can have HPV for a long time without knowing it  You can have more than one type of HPV |
| Previous HPV Test Use | Had HPV test with last Pap test. If yes, HPV test result.  Ever told had HPV infection |
| Previous HPV Test - Attitude Scale | How did you feel after getting the result of your HPV test:  Good – Bad  Worried – Relieved  Happy - Unhappy |
| HPV Testing Today - Attitude Scale | Getting an HPV test the next time you have a Pap would be:  Good – Bad  Useless – Useful  Comforting – Worrying  Wise – Foolish |
| HPV Testing Today -  Beliefs Scale | Getting an HPV test the next time you have a Pap:  Would give you peace of mind  Would tell you whether you need to worry if your Pap is abnormal  Would be an unnecessary extra cost  Is something your doctor thinks you should have  Would give you the best care available |
| Screening interval - Intention | If your health care provider recommends that you have your next Pap test in 3 years, how likely are you to wait that long? |
| Screening interval - Attitude Scale | How do you feel about the idea of waiting to have your next Pap test in 3 years if that is what your health care provider recommends that you do?  Good – Bad  Useless – Useful  Comforting – Worrying  Wise – Foolish |
| Screening interval - Beliefs Scale | Do you think that waiting 3 years for your next Pap test:  Would save you money  Would cause you to worry about getting cervical cancer  Would give you peace of mind  Is something your doctor thinks you should do  Would mean you would not get other health care that you need  Would increase your chance of getting cervical cancer  Would save you time |
| Indirect/direct cost to patient for clinic visit | Time cost: Clinic wait; travel time; employment status; Wage;  Travel cost: Transportation mode and costs  Child care cost: Amount paid when go to clinic  Direct payment of patient to clinic for visit |
| Items added at follow-up surveys to measure Pap History & Screening Interval | |
| Pap History & Screening Interval | When told to come back for next Pap at baseline study contact  Number of Paps since baseline  Most recent Pap was at baseline clinic  Months since most recent Pap  Abnormal Pap result since baseline. If yes, number of months since abnormal.  After baseline, when did you expect to get next Pap. |

**Table 2: Examples of Provider Questions and Constructs**

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| Measures | Survey Items |
| Provider Characteristics | Age; Gender; Ethnicity; Race; Type of clinician; Primary and Secondary clinical specialties; Number of years providing clinical care; Number of primary care outpatient settings where currently practice; Hours spent in direct patient care; Percent of professional time spent the following: primary care, subspecialty care, research, teaching, administration or other. |
| Clinic Practice / Patient Characteristics | Years in practice at this clinic; Hours per week spent on outpatient care at this clinic; Number of patients seen at this clinic in a typical week; Percentage of these patients that are female; Percentage of these female patients by age group; Number of adult female patients seen for routine or well-woman exams in typical week |
| Cervical Cancer Screening Practices | Number of screening Paps personally perform in typical month.  Percent with abnormal or borderline cervical cytology?  Follow-up care for ASC-US  Cervical colposcopy performed at this clinic, by this provider  Cytology methods used: conventional Pap, liquid-based Pap test, other  Factors considered in to use of conventional versus a liquid-based Pap: List of 9 items |
| Importance of Annual Exam Scale | Indicate the extent to which you agree or disagree with the following:  An annual exam is necessary  An annual exam improves detection of subclinical illness  An annual exam improves patient-physician relationships  An annual exam is expected by most patients  An annual exam is covered by many insurance plans  An annual exam is of little or no proven value  An annual exam is recommended by national organizations  An annual exam provides a valuable time to counsel on preventive health behaviors |
| Content of Routine Exams | Examinations and lab tests routinely performed or recommended during health maintenance exams. List of 9 examinations and 7 lab tests. |
| Risk Assessment Approaches | How often you take each approach during an exam:  I rely on cues  I rely primarily on the patient’s Pap test history  I pursue a discussion of risks for all patients in certain demographic groups  I ask specific questions to see if the patient engages in risky behaviors  I ask questions about sexual and behavioral risk  I depend on my professional intuition or judgment  I depend on my knowledge of each patient |
| STD exposure | Number female patients you see with any STD (including HIV) in a typical month |
| HPV Experience | Among patients who are over age 30, how often use HPV DNA testing:  With the Pap test for routine cervical cancer screening  As a follow-up test for an ASC-US Pap test?  Among patients who are under age 30, how often use HPV DNA testing:  With the Pap test for routine cervical cancer screening  As a follow-up test for an ASC-US Pap test?  In last month, number of patients who asked if they could or should be tested for HPV. |
| HPV Testing - Attitude Scale | Conducting HPV testing along with Pap testing for screening in women over age 30 is:  Good – Bad  Difficult – Easy  Beneficial – Harmful |
| HPV Testing -  Belief Scale | Conducting HPV testing along with Pap testing for screening in women over age 30:  Is not needed because my patients have access to colposcopy  Helps me determine appropriate screening intervals  Is not needed because most of my patients have 3+ prior normal Pap tests  Would necessitate a difficult discussion with the patient  Helps me determine a plan for follow-up  Is costly to patients  Takes too much of my time  Does not provide any more useful information  Helps me explain cervical cancer risk to patients  Gives me understanding of a patient’s risk for disease  Is the best way to screen for cervical cancer  Is only needed for high risk patients  Is a test my patients would not want  Would be an extra burden for my office staff |
| HPV Testing - Social Support Scale | Please indicate the extent to which you feel that the following individuals or entities encourage or discourage you to conduct HPV testing along with Pap testing for routine screening in women over age 30:  Your patients  Your colleagues  Your professional organization  National/local health organizations  Professional journals  Administration in your practice |
| Discussion with Patients who are HPV Positive and Pap Normal -  Belief Scale | Discussing with patients the results of a positive HPV test and a normal Pap test would:  Make many patients feel uncomfortable  Reduce the willingness of patients to seek care  Increase the likelihood that patients will return  Distract attention from cervical cancer prevention  Raise patients’ concerns about confidentiality  Raise patients’ concerns about partner fidelity  Make me feel uncomfortable  Take too much time  Assure patients they are getting the best standard of care  Be too complex for most of patients to understand  Encourage patients to talk openly about sexual health with their partners |
| Discussion with Patients who are HPV Positive and Pap Abnormal -  Beliefs Scale | Discussing with patients the results of a positive HPV DNA test and an abnormal Pap test would:  Same options as above. |
| Educate Patient about HPV Scale | When you order an HPV DNA test along with a Pap test, how often do you:  Tell the patient that you are ordering an HPV DNA test?  Explain the purpose of an HPV DNA test in relation to the Pap test?  Explain that the HPV DNA test detects an STI?  Discuss how HPV DNA test results may affect future Pap tests? |
| Screening Interval with 3 Normal Paps – Attitude Scale | Deciding to extend the cervical cancer screening interval to 3 or more years because a woman over age 30 had received 3 normal Pap results the last 5 years would be:  Good – Bad  Difficult – Easy  Beneficial – Harmful |
| Screening Interval with Negative HPV and Normal Pap –  Attitude Scale | Deciding to extend the cervical cancer screening interval to 3 or more years because a woman over age 30 had received a normal Pap result and negative HPV test would be:  Same options as above. |
| Screening Interval with 3 Normal Paps – Belief Scale | Extending the screening interval to 3 or more years between tests for a 30 year old with 3 normal Pap results the past 5 years would:  Result in the patient not visiting annually for other tests  Put me at risk for liability if the patient’s next result is abnormal  Put the patient at increased risk for cervical cancer  Help reduce health care costs  Increase patient concerns about missing cervical cancer  Take too much of my time to explain to the patient  Reduce patient worries about acquiring cervical cancer  Result in higher cervical cancer rates  Cause patients to lose contact with the medical care system  Decrease care provided to the patient |
| Screening Interval with Negative HPV and Normal Pap –  Belief Scale | Extending the screening interval to 3 or more years between tests for a 30 year old with a normal Pap result and a negative HPV test.  Same options as above. |
| Screening Interval with 3 Normal Paps – Social Support | Please indicate the extent to which you feel that the following individuals or entities encourage or discourage you to extend the screening interval to 3 or more years between tests for a 30 year old with 3 normal Pap results the past 5 years.  Your patients  Your colleagues  Your professional organization  National/local health organizations  Professional journals  Administration in your practice |
| Screening Interval with Negative HPV and Normal Pap –  Social Support | Please indicate the extent to which you feel that the following individuals or entities encourage or discourage you to extend the screening interval to 3 or more years between tests for a 30 year old with a normal Pap result and a negative HPV test.  Same options as above. |
| Screening Interval – Decision Making | List of 19 factors the provider might consider in deciding whether or not to extend the cervical cancer screening interval to greater than one year for a woman over age 30? |
| HPV Vaccine | Whether provider currently recommends vaccine; To what age groups; Plan to recommend vaccine; Reasons do not recommend; Plan to change cervical cancer screening and management based on vaccination status; How determine when to start routine screening for vaccinated; How often screen vaccinated women; Use HPV test to manage abnormal Pap results for vaccinated; Patients asking about vaccination; Vaccinating females will lead to the following: (a) fewer numbers of abnormal Paps, (b) fewer referrals, fewer CIN results. |
| Education & Guidelines | Personally follow published guidelines for cervical cancer screening and management. Which guidelines.  Clinic has implemented guidelines for cervical cancer screening and management.  Which guidelines.  Able to access these practice guidelines in an electronic format.  Whether learned about HPV through a list of 10 sources.  Currently provide patients educational materials regarding cervical cancer screening.  Have an individual affiliation with a medical school.  Last time participated in a CME on cervical cancer screening. |