PATIENT AND PROVIDER SURVEY MEASURES

Examples of Patient Survey Questions and Constructs

Measures	Survey Items	
	Date of birth (age)	
Patient Characteristics	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	
	How often visited this clinic for own health care in the past year	
Experience with this	This is the clinic used most of the time when need to see a doctor	
Clinic	Number of times had a Pap test at this clinic	
	Whether visited other clinics in the past year for your health care	
	Rate how you feel about the health care that you have received from this clinic:	
Care at this Clinic –	Good – Bad	
Attitude Scale	Comforted – Worried	
Attitude Scale	Safe – Unsafe	
	Satisfied – Dissatisfied	
	Number of times had a Pap test over lifetime	
Dap History	How often get Pap tests	
Pap History	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	
	Do you agree or disagree that the Pap test is used to check for:	
	Pregnancy	
	HIV/AIDS	
	Gonorrhea	
Pap Knowledge Scale	Chlamydia	
I up Knowieuge Seare	Human Papillomavirus (HPV)	
	Cervical cancer	
	Vaginal cancer	
	Yeast Infections	
	Vaginal Infections	
	Age at first vaginal sex	
	Number of partners had vaginal sex with in your entire life, and last 12 months	
High Risk Behaviors	Ever have a sexually transmitted infection or STD	
	Ever have genital warts	
	Cigarette smoking	
Ever heard of HPV &	Ever heard of HPV	
information sources	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	Had HPV test with last Pap test. If yes, HPV test result.
Use	Ever told had HPV infection
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Previous HPV Test -	How did you feel after getting the result of your HPV test: Good – Bad
Attitude Scale	
Attitude Scale	Worried – Relieved
	Happy - Unhappy
	Getting an HPV test the next time you have a Pap would be:
HPV Testing Today -	Good – Bad
Attitude Scale	Useless – Useful
	Comforting – Worrying
	Wise – Foolish
	Getting an HPV test the next time you have a Pap:
	Would give you peace of mind
HPV Testing Today -	Would tell you whether you need to worry if your Pap is abnormal
Beliefs Scale	Would be an unnecessary extra cost
	Is something your doctor thinks you should have
	Would give you the best care available
Screening interval -	If your health care provider recommends that you have your next Pap test in 3
Intention	years, how likely are you to wait that long?
	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?
Screening interval -	Good – Bad
Attitude Scale	Useless – Useful
	Comforting – Worrying
	Wise – Foolish
	Do you think that waiting 3 years for your next Pap test:
Screening interval - Beliefs Scale	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	Time cost: Clinic wait; travel time; employment status; Wage;
patient for clinic visit	Travel cost: Transportation mode and costs

	Child care cost: Amount paid when go to clinic Direct payment of patient to clinic for visit
Items add	ed at follow-up surveys to measure Pap History & Screening Interval
	When told to come back for next Pap at baseline study contact
	Number of Paps since baseline
Pap History &	Most recent Pap was at baseline clinic
Screening Interval	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 -	Conducting HPV testing along with Pap testing for screening in women over age 30:		

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Belief Scale	 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 <u>3 normal Pap results the last 5 years</u> would be: Good – Bad Difficult – Easy Beneficial – Harmful	
Screening Interval	Deciding to extend the cervical cancer screening interval to 3 or more years because a	

with Negative HPV	woman over age 30 had received <u>a normal Pap result and negative HPV test</u> would be:		
and Normal Pap –	wollan över age 50 had received <u>a normal r ap result and negative rn v test</u> would be.		
Attitude Scale	Same options as above.		
	Extending the screening interval to 3 or more years between tests for a 30 year old with		
	<u>3 normal Pap results the past 5 years</u> 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		
Corresping Interval	Put the patient at increased risk for cervical cancer		
Screening Interval	Help reduce health care costs		
with 3 Normal Paps – Belief Scale	Increase patient concerns about missing cervical cancer		
– Bellel Scale	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	Extending the screening interval to 3 or more years between tests for a 30 year old with		
with Negative HPV	a <u>normal Pap result and a negative HPV test</u> .		
and Normal Pap –			
Belief Scale	Same options as above.		
	Please indicate the extent to which you feel that the following individuals or entities		
Screening Interval	encourage or discourage you to extend the screening interval to 3 or more years		
	between tests for a 30 year old with <u>3 normal Pap results the past 5 years</u> .		
with 3 Normal Paps	Your patients		
 Social Support 	Your colleagues		
	Your professional organization		
	National/local health organizations		
	Professional journals Administration in your practice		
	Please indicate the extent to which you feel that the following individuals or entities		
Screening Interval	encourage or discourage you to extend the screening interval to 3 or more years		
with Negative HPV	between tests for a 30 year old with <u>a normal Pap result and a negative HPV test</u> .		
and Normal Pap –	between tests for a so year ord with <u>a normal r ap result and a negative rif v test</u> r		
Social Support	Same options as above.		
Screening Interval –	List of 19 factors the provider might consider in deciding whether or not to extend the		
Decision Making	cervical cancer screening interval to greater than one year for a woman over age 30?		
0	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		
HPV Vaccine	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.		
	Personally follow published guidelines for cervical cancer screening and management.		
Education & Guidelines	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.		

Attachment F1. Variables collected