

# Healthcare Professional Survey of Prescription Drug Promotion

*Revised based on cognitive testing results*

12/20/12

## INTRODUCTION

Thank you for participating in this survey today. The Department of Health and Human Services is conducting this study to understand health care providers' attitudes regarding issues affecting public health. Your responses, and those of your colleagues nationwide, will provide valuable insight into matters affecting the medical community. This survey will take approximately X minutes to complete and your responses will be kept confidential.

The first few questions are about your time spent in patient care.

### [NO. OF PATIENTS/WEEK]

**Q1. In the past 7 days, about how many patients did you see? If you are not sure, please provide your best guess.**

\_\_\_\_\_

**Q39. In the past 7 days, how many prescriptions did you write? \_\_\_\_\_**

### [PATIENT-INITIATED TOPICS]

**Q2. How frequently do your patients initiate discussions about each of the following topics?**

<b>RANDOMIZE ORDER EXCEPT ITEM C AND D ALWAYS TOGETHER AND ALWAYS IN THAT ORDER</b>	Never	Rarely	Sometimes	Often
a. Over the counter drugs				
b. Herbal remedies or dietary supplements				
c. Prescription drugs				
d. Generic prescription drugs (specifically)				
e. Health and lifestyle changes				

The next set of questions asks specifically about Direct-to-Consumer Advertising of prescription drugs, also known as DTC advertising.

### [FREQUENCY OF DTC CONVERSATIONS]

**Q3. In the past 30 days, approximately how many of your patients have spoken with you about a prescription drug they saw advertised on television, heard about on the radio, or read in newspapers, magazines, or on the Internet?**

\_\_\_\_\_ [Fill in. Range from 0-100]

[ATTITUDES TOWARD PATIENT MENTION OF DTC]

**Q4. Which of the following best represents your reaction when patients mention prescription drugs they have seen advertised?**

- Very negative
- Negative
- Somewhat negative
- Neither negative nor positive
- Somewhat positive
- Positive
- Very positive

**Q4a. What specifically made you choose that answer?**

\_\_\_\_\_

[COUNTERBALANCE Q12 with series of questions from Q5-Q11.]

[PATIENT BEHAVIOR (prescription requests)]

**Q5. When you discuss drugs that patients have seen advertised do they typically...(Check all that apply):**

- Ask questions
- Request a prescription
- Request a sample

**Q6. In the past 30 days, about how many patients have asked for a specific prescription drug by name (including refills)?**

\_\_\_\_\_ [Fill in. Range from 0-1,000]

Of those, how many were refills?

\_\_\_\_\_ [Fill in.]

[If response to Q6 > 0, ask Q7-Q8]

[PROVIDER PRESCRIBING BEHAVIOR]

**Q7. Thinking about these [Insert number of patients from Q6 ] patients that have requested a specific prescription drug by name, in how many cases have you:**

[[PROGRAMMER: Total must sum to number of patients from Q6]]

Prescribed the specific drug requested: \_\_\_\_\_  
Prescribed another drug (including generic): \_\_\_\_\_  
Prescribed no drug: \_\_\_\_\_  
Total \_\_\_\_\_

[PERCEIVED PRESSURE TO PRESCRIBE]

**Q8. To what extent did you feel pressured to prescribe the requested drug in those cases?**

Not at all pressured  
Slightly pressured  
Moderately pressured  
Very pressured  
Extremely pressured

[APPROPRIATENESS OF ADVERTISED DRUGS/PATIENT RECALL]

**Q10. When a patient mentions a prescription drug he or she has seen advertised, how often are the following true?**

[Randomize a-f series. G1 and G2 are always asked together and in current order]	Never	Rarely	Sometimes	Often	Always
a. The drug is indicated for the patient's illness					
b. The drug is a good option for the patient					
c. The patient recalls the name of the drug correctly					
b. d. The patient recalls the drug's indication					
e. The patient recalls the drug's stated benefit					
f. The patient asks to be taken off the advertised medicine					
g1. The patient recalls the drug's side effects and risks					
g2. The patient does not recall the drug's side					

effects and risks, but asks about them					
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[PROVIDER BEHAVIOR]

**Q11. As a result of discussion about advertised prescription drugs, how often have you:**

[Randomize]	Never	Rarely	Sometimes	Often	Always
Directed your patients to a website for that drug (Lipitor.com) or that drug's manufacturer (Merck.com)					
Provided a sample of that drug					
Written a prescription for that drug					
Written a prescription for another drug					
Recommended non-prescription treatment such as OTC medicines					
Recommended dietary supplements					
Recommended health and lifestyle changes					

[HELPFULNESS OF DTC]

**Q12. Please complete this sentence. I believe that DTC advertising is, in general...**

- Very beneficial to my patients
- Beneficial to my patients
- Somewhat beneficial to my patients
- Neither beneficial nor harmful to my patients
- Somewhat harmful to my patients
- Harmful to my patients
- Very harmful to my patients

[EFFECTS OF DTC ON QUALITY OF CARE & INFORMED DECISION MAKING]

**Q13. How often are the following statements true?**

**My patients' exposure to DTC advertising for prescription drugs...**

[Randomize]	Never	Rarely	Sometimes	Often	Always
Makes it easier for me to communicate with my patients	1	2	3	4	5
Helps them to make more informed decisions about prescription medications.	1	2	3	4	5
Allows me to have a conversation with patients that I might not have otherwise had.	1	2	3	4	5
Helps them ask questions about treatments	1	2	3	4	5
Reminds them to ask questions about side effects	1	2	3	4	5
Reminds them to ask questions about product benefits	1	2	3	4	5
Helps them share in decisions about their treatment	1	2	3	4	5

[KNOWLEDGE/AWARENESS/CONFUSION]

**Q14. Next, you'll see some potential effects DTC advertising might have on your patients' knowledge and understanding of prescription drugs.**

**Thinking about the past 12 months, how often do you believe that DTC advertising for prescription drugs:**

[RANDOMIZE]	Never	Rarely	Sometimes	Often	Always
a. Caused your patients to become aware of possible treatments	1	2	3	4	5
b. Confused your patients about the risk-benefit trade-off of prescription drugs	1	2	3	4	5
c. Caused your patients to become knowledgeable about the effectiveness of the drugs	1	2	3	4	5
d. Caused your patients to become knowledgeable about potential drug side effects	1	2	3	4	5
e. Caused your patients to think drugs work better than they actually do	1	2	3	4	5
f. Caused your patients to become more aware about their disease state	1	2	3	4	5
g. Gave patients a better understanding of the risk-benefit trade off of prescription drugs	1	2	3	4	5
h. Caused your patients to think prescription drugs are riskier than they really are	1	2	3	4	5

[COUNTERBALANCE Q15 and Q17]

[ATTITUDES]

**Q15.** Next, you'll see some potential effects DTC advertising might have on your patients' attitudes or concerns about prescription drugs.

Thinking about the past 12 months, how often do you believe that DTC advertising for prescription drugs:

[RANDOMIZE]	Never	Rarely	Sometimes	Often	Always
Caused your patients to be more involved in their health care	1	2	3	4	5
Caused your patients to want advertised prescription drugs rather than other recommended treatments	1	2	3	4	5
Encouraged patients to seek unnecessary treatment for common ailments	1	2	3	4	5
Caused your patients to doubt the value of the drugs they see advertised	1	2	3	4	5

**[PATIENT-PROVIDER RELATIONSHIP]**

**Q16. Next, you'll see some potential effects DTC advertising might have on your conversations or relationships with your patients.**

**Thinking about the past 12 months, to what extent do you believe that DTC advertising for prescription drugs:**

<b>[RANDOMIZE]</b>	Never	Rarely	Sometimes	Often	Always
Increased the likelihood that patients with stigmatized medical conditions (such as major depression) will discuss their illness with you	1	2	3	4	5
Caused tension between you and your patients	1	2	3	4	5
Caused your patients to question or "second guess" your treatment	1	2	3	4	5
Caused you and your patients to have better discussions about their health	1	2	3	4	5

**[PATIENT BEHAVIOR]**

**Q17. Next, you'll see some potential effects DTC advertising might have on your patients' behavior regarding prescription drugs.**

**In the past 12 months, how often has DTC advertising for prescription drugs:**

<b>[RANDOMIZE]</b>	Never	Rarely	Sometimes	Often	Always
Caused your patients to refuse to take prescription drugs because of the side effects	1	2	3	4	5
Improved your patients' ability to use their medicines properly	1	2	3	4	5

[Counterbalance sets (Q18a and Q18b-always together) with Q18 and Q18c—always together)]

**[COUPON BEHAVIOR]**

**Q18a. Have you ever provided a prescription drug coupon to a patient?**

Yes  
 No (skip Q18b)

**Q18b. What type of coupon was it? \_\_\_\_\_**

**Q18. Has a patient ever come to you with a coupon for an advertised prescription drug?**

Yes (skip Q20)  
 No (skip Q18c and Q19)

**Q18c. What type of coupon was it? \_\_\_\_\_**

**[PROVIDER ATTITUDES TOWARD DRUG COUPON]**

**Q19. How did you feel about being asked about a drug that has a coupon?**

Very negative  
 Negative  
 Somewhat negative  
 Neither negative nor positive  
 Somewhat positive  
 Positive  
 Very positive

**Q20. How would you feel about being asked about a drug that has a coupon?**

Very negative  
 Negative  
 Somewhat negative  
 Neither negative nor positive  
 Somewhat positive  
 Positive  
 Very positive

**Q21. Have you ever had a patient who refused to take or stopped taking a drug because of the side effects they saw in advertising?**

Yes  
 No

Cannot remember

[FREQUENCY OF DISCUSSION OF QUANTITATIVE SIDE EFFECT INFO]

**Q22. How often do your patients ask for quantitative information about the side effects of prescription drugs?**

- Never
- Rarely
- Sometimes
- Often
- Always

[AWARENESS OF BAD AD PROGRAM]

**Q23. Have you heard of the Bad Ad program?**

- Yes
- No
- Don't know/Not sure

[ATTITUDES TOWARD BAD AD PROGRAM]

**Q24. FDA's "Bad Ad" Program is an outreach program to educate healthcare providers about the role they can play in helping FDA make sure that prescription drug advertising and promotion is truthful and not misleading. It is designed to help healthcare providers recognize misleading prescription drug promotion and provide them with an easy way to report this activity to the agency (via phone, 855-RX-BADAD, or email, [BadAd@fda.gov](mailto:BadAd@fda.gov)).**

**What do you think about FDA's Bad Ad program?**

- Very useful
- Moderately Useful
- Slightly useful
- Not at all useful

The next several questions ask about promotion of prescription drugs to both consumers and healthcare providers. Marketing to providers might include journal ads, visits by drug representatives and materials provided at medical conferences.

[PAST BEHAVIOR: Reporting]

**Q25. Have you ever reported prescription drug advertising or promotion that you thought was false or misleading to the FDA?**

- Yes
- No
- Don't remember

[INTENTIONS TO REPORT BAD ADS]

**Q26. How likely are you to report prescription drug advertising or promotion that you think is false or misleading to FDA in the future?**

- Very unlikely (ask Q27)
- Unlikely (ask Q27)
- Somewhat unlikely (ask Q27)
- Neither likely nor unlikely (skip to Q28)
- Somewhat likely (skip to Q28)
- Likely (skip to Q28)
- Very likely (skip to Q28)

**[BARRIERS TO REPORTING]**

**Q27. What is it about the BadAd program that makes you unlikely to report false or misleading advertising to FDA?**

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**[SELF-EFFICACY re: RECOGNIZING BAD ADS]**

**Q28. How sure are you that you can recognize misleading advertising or promotion about prescription drugs?**

- Very unsure
- Unsure
- Somewhat unsure
- Neither unsure nor sure
- Somewhat sure
- Sure
- Very sure

**[TRAINING ABOUT DTC]**

**Q29. Did you receive any formal training regarding pharmaceutical marketing during your professional training?**

- Yes
- No (Go to Q30)
- Don't remember (Go to Q30)

**Q29a. What type of formal training did you receive? Please describe the setting and context.**

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**[ATTITUDES TOWARD TRAINING re: DTC]**

**Q30. How useful do you think it would be for new healthcare professionals to receive formal training regarding pharmaceutical marketing for prescription drugs?**

Not at all useful  
 Slightly useful  
 Moderately useful  
 Very useful  
 Extremely useful

[SOCIAL MEDIA MEMBERSHIP/PARTICIPATION]

**Q31.** Do you use online sites to interact with other healthcare professional colleagues?

Yes  
 No ([skip to Q37a](#))

**Q32.** Please list the sites or sites you use.

\_\_\_\_\_

**Q33. How often do you use these sites for the following activities?**

[RANDOMIZE]	Never	Rarely	Sometimes	Often	Always
Posting information	1	2	3	4	5
Responding to others' posts	1	2	3	4	5
Moderating discussions	1	2	3	4	5
Reading posts and information	1	2	3	4	5
Browsing the site	1	2	3	4	5

**Q34. Do you participate in these sites to...**

Seek colleague opinions  Yes  No  
 Provide advice to others  Yes  No  
 Experience camaraderie  Yes  No  
 To post or read about patient issues  Yes  No  
 To post or read about healthcare insurance provider issues  Yes  No  
 To post or read about office management issues  Yes  No  
 To post or read about issues with pharmaceutical representatives  Yes  No  
 Other (please specify \_\_\_\_\_)  Yes  No

[INFORMATION SEEKING SOURCES]

**Q37A. Please select all of the following sources that you use for information about new prescription drugs. [Select all that apply; randomize response options, except for "other" which will be last.]**

- Pharmaceutical representatives
- Pharmaceutical company webpages
- Package insert
- Medical journal articles
- Colleagues
- Medical Apps (e.g., Epocrates)
- Search engines (e.g., Google, Yahoo!)
- Professional conferences

**Q37B. Please select one of the following sources of information about new prescription drugs you use most frequently [Choose one; only show the options that were selected in Q37A.]**

- Pharmaceutical representatives
- Pharmaceutical company webpages
- Package insert
- Medical journal articles
- Colleagues
- Medical Apps (e.g., Epocrates)
- Search engines (e.g., Google, Yahoo!)
- Professional conferences

[DEMOGRAPHICS]

**Q38. Are you part of any of the following health-care arrangements? (Check all that apply)**

- A solo practice
- A single-specialty group practice or partnership
- A multispecialty group practice or partnership
- A health maintenance organization or HMO
- None of the above

**Q40. In what year were you born?**

\_\_\_\_\_

**Q41. In what year did you graduate from [insert appropriate language based on health care provider group: medical school, nurse practitioner school, or PA school]? \_\_\_\_\_**

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**Q41a. Since graduation, how many years have you been a health care provider?**

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**Q42. Where did you attend [insert appropriate language based on healthcare provider group: medical school, nurse practitioner school, or PA school]? (Select all that apply)**

- In the United States
- In a U.S. Territory (e.g. Puerto Rico, Guam, U.S. Virgin Islands)
- Outside the United States or its territories

## Study Screener

### INTRODUCTION

Thank you for agreeing to participate in this study today. Make sure you are comfortable and can read the screen from where you sit. This study will take about 20 minutes to complete. We ask you to please complete the study in one sitting (without taking any breaks) in order to avoid distractions. This study is about direct-to-consumer advertising.

First, please answer the following questions.

S1. Which of the following best describes your profession?

- Medical Doctor/Doctor of Osteopathy [CONTINUE]
- Physician Assistant [CONTINUE]
- Nurse Practitioner [CONTINUE]
- Other [TERMINATE]

S2a. Do you consider yourself a primary care provider or specialist?

- Primary care Provider [CONTINUE TO S2b] [ASSIGN AS PRIMARY CARE]
- Specialist [CONTINUE TO S2c] [ASSIGN AS SPECIALIST]

S2b. Which of the following best describes your practice?

- Family Practice [CONTINUE]
- General Practice [CONTINUE]
- Internal Medicine [CONTINUE]
- OB-GYN [CONTINUE]

S2c. Which of the following categories best describes your primary area of specialization:

- Pediatrics [TERMINATE]
- Allergy or Pulmonology [CONTINUE]
- Psychiatry [CONTINUE]
- Endocrinology [CONTINUE]
- Dermatology [CONTINUE]
- Rheumatology [CONTINUE]
- Cardiology [CONTINUE]
- Otolaryngology [CONTINUE]
- Urology [CONTINUE]
- Neurology [CONTINUE]
- Oncology [CONTINUE]
- Gastroenterology [TERMINATE]
- Podiatry [TERMINATE]
- Pain management [CONTINUE]
- OB-GYN [CONTINUE]
- Other [TERMINATE]

S3. In what state is your practice based? \_\_\_\_\_

[NPS AND PAS only answer S3a and S3b]

S3a. In the state where you work, do you have authority to prescribe medications?

- Yes [CONTINUE]
- No [TERMINATE]

S3b. Please choose the answer that best describes your level of prescribing authority (check all that apply):

- Unrestricted, unlimited [CONTINUE]
- Only in conjunction with a medical doctor [CONTINUE]
- Cannot prescribe controlled substances [CONTINUE]
- Only as part of a Collaborative Drug Therapy Management (CDTM) agreement [CONTINUE]
- Cannot prescribe medication [TERMINATE]

S4. In an average week, what percent of your time is spent on direct patient care, such as seeing patients and reviewing their medical records? If you are not sure, please provide your best guess.

- % [IF LESS THAN 50%, TERMINATE]

S5. Which of the following best describes your primary type of practice:

- Office-based practice [CONTINUE]
- Hospital [TERMINATE]
- Nursing home or hospice care [TERMINATE]
- Veterans Affairs [TERMINATE]
- Research [TERMINATE]
- Other (specify): \_\_\_\_\_ [TERMINATE]

S6. What is your sex?

- MALE [CONTINUE]
- FEMALE [CONTINUE]

S7. Which of these racial groups best describes you?

- WHITE [CONTINUE]
- BLACK/AFRICAN AMERICAN [CONTINUE]
- AMERICAN INDIAN or ALASKAN NATIVE [CONTINUE]
- ASIAN [CONTINUE]
- NATIVE HAWAIIAN or PACIFIC ISLANDER [CONTINUE]
- OTHER [CONTINUE]