Post-Test Physician's/Nurses Survey

For: Physicians and Nurses, Immediately after Training

			_		
		L:£:	:	Num	l
•	nan	TITIC	חחודב	m	יחםרי

Date:

FOR THE FOLLOWING STATEMENTS, PLEASE INDICATE WHETHER YOU AGREE OR DISAGREE

Please circle one number for each statement.

Please circle one number for each statement.										
1	= strongly disagree		_	—						
2	= disagree									
3	= not sure									
4	4= agree									
5	= strongly agree									
DI 1= 2= 3 4=	OR THE FOLLOWING STATEMENTS, PLEASE INDICATE WHETHER YOU AGREE OR SAGREE Please circle one number for each statement. = strongly disagree = disagree = not sure = agree = strongly agree									
1.	Lesbians and bisexual women may avoid healthcare because they don't trust the practitioner to be culturally competent.	1	2	3	4	5				
2.	Overweight and obese women often delay or avoid healthcare if they feel their health care provider holds a bias against women who are large.	1	2	3	4	5				
3.	Most lesbian/bisexual women would appreciate intake forms that ask patients If they are heterosexual/lesbian/bisexual/transgender.	1	2	3	4	5				
4.	I don't believe I should ask my patients about their sexual Identity.	1	2	3	4	5				
	Lesbian and bisexual women are more likely than other women to overuse alcohol.	1	2	3	4	5				
6.	Most overweight/obese patients are not motivated to achieve a healthy weight	1	2	3	4	5				
7.	Physicians/nurses should always instruct their overweight/obese patients to lose weight.	1	2	3	4	5				
8.	Asking if a patient is motivated to lose weight is an important component to helping patient to lose weight in order to improve her health	g a 1	2	3	4	5				
9.	Patients who are advised by their physician how to modify their behavior to lose weight are more likely to lose weight than those who do not get this advice.	1	2	3	4	5				

10. Setting long-term goals is helpful in encouraging a patient to lose weight.

How could the workshop be improved?

1 2 3 4 5

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-xxxx . The time required to complete this information collection is estimated to average 4 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington, D.C. 20201. Attention: PRA Reports Clearance Officer