ANTIBIOTIC USE CAMPAIGN—R2 CONCEPT TESTING PRE-DISCUSSION INFORMATION SURVEY (PDIS) - HCP VERSION

Please provide some information about yourself by completing this questionnaire. We will not report any of your responses by name. Thank you.

1.		What is your age?						
2.		Would you describe yourself as Hispanic or Latino?						
		Yes No						
3.		How would you describe your racial background? Please chec	k all that	apply.				
		American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White						
4.		Please identify your HCP role.						
		Nurse practitioner Physician's assistant Family practitioner Emergency department attending physician Urgent care owner-physician Hospitalist (specify specialty) Other (please specify): Don't know		-				
5. pat	ients	Please indicate below from which of the following sources you about appropriate antibiotic use:	u would l	ike to ge	t informatio	n to help	educate y	our
		Medical journals Conferences/Lectures Medical webinars Email Social media (Facebook, Twitter) Websites Professional societies Mobile apps Other (specify): Don't know						
6.		On a typical day, how often do you:						
			Never	Rarely	Sometimes	Usually	Always	
	a. b.	Talk to your patients about antibiotic resistance Talk to your patients about adverse drug events associated with antibiotic use						
	c.	Talk to your patients about appropriate antibiotic use						

Public reporting burden of this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-0572

7.		What resources, if any, do you refer <u>patients</u> to about appropriate antibiotic use?				
		Posters Brochures Palm Cards Videos Mobile Apps Websites (please specify) Other (please describe) Don't know				
8.		What additional types of resources on appropriate antibiotic use would be helpful for <u>patients</u> ?				
		Posters Brochures Palm Cards Doctor-patient discussion guides Videos Mobile Apps Websites (please specify) Other (please describe) Don't know				
9.		What resources, if any, do you personally refer to when prescribing antibiotics?				
		Checklists Information in an electronic health record Pocket reference guide Mobile Apps (please specify) Websites (please specify) Other (please describe) Don't know				
10.	ess	What additional types of resources on appropriate antibiotic prescribing would be helpful for you as a healthcare onal?				
		Checklists Information in an electronic health record Mobile Apps Pocket reference guide Website Other (please describe) Don't know				

 $Thank \ you \ for \ completing \ this \ question naire.$