

If you do not treat pregnant women please check this box  and return the survey blank.

### Practice Patterns related to Opioid Use during Pregnancy and Lactation

#### Prenatal & Postpartum Care

1. To what extent is any routine screening of the following among pregnant patients in your practice a priority?

	Not a priority	Moderate priority	High priority
a. Prescription opioid use	①	②	③
b. Non-medical use of prescription opioids (i.e. using opioids for reasons other than prescribed)	①	②	③
c. Non-medical use of other prescription medications (benzodiazepines, barbiturates, etc.)	①	②	③
d. Illicit substance use (heroin, cocaine, hallucinogens, etc.)	①	②	③
e. Marijuana use	①	②	③
f. Tobacco use	①	②	③
g. Alcohol use	①	②	③
h. Depression	①	②	③

2. How does your practice obtain information about pregnant patients' substance use (including illicit use and non-medical use of prescription opioids)? (✓ *all that apply*)

- ① A physician asks the patient      ② Other staff asks the patient  
 ③ Patient fills out a questionnaire      ④ Biologic test  
 ⑤ Other: \_\_\_\_\_  
 ⑥ I do not screen my pregnant patients for substance use → SKIP to question 5

3. In your practice, how often do you screen for substance use among pregnant patients

- ① Never      ② Rarely      ③ Sometimes      ④ Usually      ⑤ Always  
 ⑥ My practice does not screen for substance use

4. If your practice uses a questionnaire to assess substance use, please check the one most frequently used:

- ① My practice does not use a standard screener  
 ② 4P's Plus© Screen for Substance Use in Pregnancy  
 ③ 5Ps Prenatal Substance Abuse Screen  
 ④ Substance Use Risk Profile –Pregnancy (SURP-P)  
 ⑤ CRAFFT screener for Adolescent and young adult substance abuse  
 ⑥ Wayne Indirect Drug Use Screener (WIDUS)  
 ⑦ National Institute on Drug Abuse (NIDA) Quickscreen  
 ⑧ Other (please specify): \_\_\_\_\_

**The following questions are on your practices, beliefs and attitudes on opioid use disorders.**

5. Do you typically refer patients who have opioid use disorder in pregnancy to other prenatal care providers or manage their care yourself?

- ① Refer to another provider                      ② Manage the patient myself  
③ Co-manage the patient with another provider

6. To whom do you typically refer pregnant patients who have opioid use disorders?

	Never	Rarely	Sometimes	Usually	Always	N/A
a. Maternal fetal medicine	①	②	③	④	⑤	⑥
b. Addiction specialist	①	②	③	④	⑤	⑥
c. Psychiatry	①	②	③	④	⑤	⑥
d. Family therapist	①	②	③	④	⑤	⑥
e. A treatment program or facility within my institution	①	②	③	④	⑤	⑥
f. A treatment program or facility outside of my institution	①	②	③	④	⑤	⑥
g. A nutritional education program	①	②	③	④	⑤	⑥
h. Other (please specify): _____	①	②	③	④	⑤	⑥

7. For patients you refer to opioid-assisted therapy (OAT), also referred to as medication assisted recovery or medication-assisted therapy (MAT), do you communicate with an addiction specialist/treatment facility staff regarding the patients' status?

- ① Never      ② Rarely      ③ Sometimes      ④ Usually      ⑤ Always      ⑥ N/A

8. How do you manage pregnant patients who have opioid use disorders (illicit use or non-medical use of prescription opioids)?

	Never	Rarely	Sometimes	Usually	Always
a. Advise opioid cessation	①	②	③	④	⑤
b. Advise inpatient, monitored withdrawal	①	②	③	④	⑤
c. Advise methadone maintenance	①	②	③	④	⑤
d. Advise buprenorphine maintenance (i.e. subutex)	①	②	③	④	⑤
e. Advise buprenorphine and naxolone maintenance (i.e. suboxone)	①	②	③	④	⑤
f. Conduct brief intervention/motivational interviewing/cognitive behavioral therapy	①	②	③	④	⑤
g. Screen for alcohol or tobacco use	①	②	③	④	⑤
h. Screen for depression	①	②	③	④	⑤
i. Screen for anxiety or use of benzodiazepines	①	②	③	④	⑤
j. Screen for intimate partner violence	①	②	③	④	⑤
k. Inform about fetal effects (e.g., Neonatal Abstinence Syndrome)	①	②	③	④	⑤
l. Do nothing	①	②	③	④	⑤
m. Other (please specify): _____	①	②	③	④	⑤

9. Do you communicate any information about your patients with opioid use disorders during pregnancy to:

	Never	Rarely	Sometimes	Usual y	Always
a. Hospital pediatric team prior to delivery	①	②	③	④	⑤
b. The newborn's pediatrician after delivery	①	②	③	④	⑤
c. Lactation Consultant	①	②	③	④	⑤
d. Social work	①	②	③	④	⑤
e. Child Protective Services	①	②	③	④	⑤
f. The police	①	②	③	④	⑤

10. Is reporting of opioid use disorders during pregnancy or at delivery mandatory in your State?

- ① Yes      ② No      ③ I do not know

11. How do you manage postpartum patients who have opioid use disorders (illicit use or non-medical use of prescription opioids)?

	Never	Rarely	Sometimes	Usual y	Always
a. Advise opioid cessation	①	②	③	④	⑤
b. Advise inpatient, monitored withdrawal	①	②	③	④	⑤
c. Advise methadone maintenance	①	②	③	④	⑤
d. Advise buprenorphine maintenance (i.e. subutex)	①	②	③	④	⑤
e. Advise buprenorphine and naxolone maintenance (i.e. suboxone)	①	②	③	④	⑤
f. Recommend breastfeeding if on opioid-assisted therapy	①	②	③	④	⑤
g. Counsel on effective contraceptive methods (long acting reversible contraceptives, oral contraceptives, etc.)	①	②	③	④	⑤
h. Refer to a treatment program or facility	①	②	③	④	⑤
i. Refer to addiction specialist	①	②	③	④	⑤
j. Refer to psychiatry	①	②	③	④	⑤
k. Screen for alcohol and tobacco use	①	②	③	④	⑤
l. Screen for depression	①	②	③	④	⑤
m. Screen for anxiety or use of benzodiazepines	①	②	③	④	⑤
n. Screen for intimate partner violence	①	②	③	④	⑤
o. Do nothing	①	②	③	④	⑤
p. Other (please specify): _____	①	②	③	④	⑤

12. To what extent is prescribing effective contraceptive methods (e.g. long acting reversible contraceptives, oral contraceptives, etc.) for patients who have opioid use disorder during pregnancy before hospital discharge a priority for you?

- ① Not a priority      ② Moderate Priority      ③ High Priority      ④ I do not prescribe  
contraceptives before hospital  
discharge

**Provider Beliefs and Attitudes**

13. Approximate to the best of your ability the percentage of your pregnant patients who have opioid use disorders? \_\_\_\_\_%

14. To what extent do you agree or disagree with the following statements?

	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>
a. Patients with opioid use disorders should completely quit during pregnancy.	①	②	③
b. Patients with opioid use disorders to cut down on the amount used per day during pregnancy.	①	②	③
c. Women on opioid-assisted therapy should be encouraged to breastfeed.	①	②	③

15. Do you feel confident that you can appropriately treat your pregnant patients who are using the following substances?

	<b>Not Confident</b>	<b>Somewhat Confident</b>	<b>Confident</b>	<b>Very Confident</b>
a. Opioids	①	②	③	④
b. Marijuana	①	②	③	④
c. Tobacco	①	②	③	④
d. Alcohol	①	②	③	④

16. To what extent are the following potential barriers to screening and treating pregnant and postpartum patients for opioid use disorder?

	<b>Not a Barrier</b>	<b>Minor Barrier</b>	<b>Major Barrier</b>
a. Time limitations during patient visits	①	②	③
b. Concern about patient confidentiality issues	①	②	③
c. Patient sensitivity to this topic (e.g., fear of offending patients)	①	②	③
d. Patient denial or resistance	①	②	③
e. Doubt about the efficacy of brief intervention	①	②	③
f. Limited training or experience in screening for opioids	①	②	③
g. Limited training or experience in treating opioid use disorder	①	②	③
h. Lack of facilities/resources for treatment of opioid use disorder once identified	①	②	③
i. Lack of or inadequate financial reimbursement for opioid screening, assessment, and counseling	①	②	③
j. Patient inability to pay for treatment	①	②	③
k. State reporting laws and repercussions for patients	①	②	③
l. Not sure what screener to use	①	②	③

m. Other (please specify): \_\_\_\_\_ ① ② ③

17. Please indicate how much you agree or disagree with each statement:

	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Neutral</b>	<b>Agree</b>	<b>Strongly Agree</b>
a. It is my responsibility to screen all pregnant patients for substance use.	①	②	③	④	⑤
b. It is my responsibility to be aware of local resources available for patients with substance use disorders.	①	②	③	④	⑤
c. It is my responsibility to make sure patients enter treatment after I refer them.	①	②	③	④	⑤
d. When there is a legal or medical obligation for testing patients for substance use, it is my responsibility to notify patients of this testing.	①	②	③	④	⑤

18. Does the Affordable Care Act include a provision that requires that pregnant patients on Medicaid receive coverage for comprehensive substance use services, including both counseling and pharmacotherapy? ① Yes ② No ③ Don't Know

19. In general, how prepared do you feel to do the following in your clinical practice:

	<b>Very Unprepared</b>	<b>Somewhat Unprepared</b>	<b>Somewhat Prepared</b>	<b>Very Prepared</b>
a. Screen pregnant patients for opioid use disorder	①	②	③	④
b. Conduct brief interventions with pregnant patients who use opioids	①	②	③	④
c. Educate pregnant patients about the effects of opioids on their fetus/baby	①	②	③	④
d. Utilize resources to refer patients who need a opioids cessation program	①	②	③	④
e. Prescribe opioid-assisted therapy for pregnant patients	①	②	③	④
f. Screen postpartum patients for opioid use disorder	①	②	③	④
g. Educate breastfeeding patients about the effects of opioids on their infant	①	②	③	④
h. Prescribe opioid-assisted therapy for non-pregnant patients	①	②	③	④

20. In which cases do you prescribe naloxone? (✓ all that apply)

- ① To all pregnant patients who are prescribed long-term opioids
- ② To all pregnant patients who have opioid use disorder

- ③ To all pregnant patients who are at risk of experiencing or witnessing an overdose
- ④ I never prescribe naloxone to pregnant patients
- ⑤ I don't know what naloxone is

21. What resources do you need to improve treatment of opioid use disorder in your clinical practice?  
(✓ *all that apply*)

- ① Patient information regarding adverse reproductive outcomes associated with opioids
- ② Patient information regarding infectious disease associated with use by injection
- ③ Referral resources and treatment facilities for pregnant and postpartum patients with opioid use disorder
- ④ Access to phone consultation line to ask questions regarding opioid use disorders in pregnant patients
- ⑤ Information regarding relapse prevention for patients who seek treatment for addiction in pregnancy
- ⑥ Specific standardized screening questionnaire for substance use during pregnancy
- ⑦ Training and advice on brief interventions/motivational interviewing
- ⑧ Reimbursement by insurance for screening and assessment
- ⑨ Other, please specify: \_\_\_\_\_

**Demographics**

22. Gender: ① Female                    ② Male                    23. Years of practice post-residency: \_\_\_\_\_

24. What racial/ethnic group do you most identify with? (✓ *all that apply*)

- ① American Indian or Alaska Native                    ② Asian                    ③ Black or African American
- ④ Hispanic or Latino                    ⑤ Native Hawaiian/ Other Pacific Islander                    ⑥ White

25. Are you certified as an addiction specialist? ① Yes    ② No

26. Are you board certified in MFM? ① Yes                    ② No

27. In what state is your practice located? \_\_\_\_\_

28. Which best describes your current practice? (*select one*)

- ① Solo private practice                    ② Ob/Gyn partnership/group                    ③ Multi-specialty group
- ④ Hospital or clinic                    ⑤ University full-time faculty & practice
- ⑥ HMO/Staff model                    ⑦ Other (please specify): \_\_\_\_\_

29. Which of the following best describes your practice location? (*select one*)

- ① Urban – inner city                    ② Urban – non-inner city                    ③ Suburban
- ④ Mid-sized town (10,000-50,000)                    ⑤ Rural                    ⑥ Military

30. What is the approximate racial/ethnic distribution of your active patient population (*Give a percentage for each; total must equal 100%*)

American Indian or Alaska Native: \_\_\_\_\_%                    Asian: \_\_\_\_\_%  
Black or African American: \_\_\_\_\_%                    Hispanic or Latino: \_\_\_\_\_%  
Native Hawaiian or Other Pacific Islander: \_\_\_\_\_%                    White: \_\_\_\_\_%

31. Please estimate the percentage of your patients who are:

Medicaid insured: \_\_\_\_\_%      Privately insured: \_\_\_\_\_%      Uninsured: \_\_\_\_\_%

32. Approximately how many new pregnant patients do you see in a month? \_\_\_\_\_