Form Approved

OMB Control No.: 0920-0572 Expiration date: 08/31/2021

Public reporting burden of this collection of information is estimated to average 20 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

Informed Consent

Before beginning the survey, there are a few things you should know.

On behalf of the Centers for Disease Control and Prevention (CDC), the research firm ICF is conducting an online survey with adults from the community to gather feedback on educational materials related to antibiotic use. These materials were developed in partnership with the CDC, and we hope to use what we learn from these survey results to improve these materials and/or how and where we promote them to raise awareness within your community. We expect this survey to take about 20 minutes. You will only be asked to complete this survey once.

We want to learn from you, so we encourage you to answer honestly. There are no right or wrong answers. If you agree to participate in the survey, here are some points to know:

Rights Regarding Participation: Your participation in this survey is completely voluntary. You may choose to leave the survey and/or not answer a question at any time for any reason. Refusal to participate will involve no penalty or loss of benefits.

Privacy: We will take every precaution to protect your identity and ensure your privacy. We will keep your name and answers to these survey questions private. Your name and contact information will be kept separate from any survey responses. We will never use your name in any reports.

Benefits: Your participation in the survey will not result in any direct benefits to you. However, your input will help us to develop and improve educational materials about sepsis for people like you.

Risks: There is no known risk to you for your participation in the survey.

Incentive: In appreciation of you	r time and participation,	the recruiter v	will give you a	a token of
appreciation valued at \$	for participating in toda	y's survey.		

Contact Information: If you have any questions about this survey or the campaign, please contact the research director, Kristen Cincotta, PhD, at 404-320-4433.

1. Do you agree to participate in the survey?
Yes
No

Termination	
Thank you for your time. Click here to exit this survey.	

Screener

The results of this survey will help the Centers for Disease Control and Prevention (CDC) refine its ongoing campaign to improve antibiotic use by helping CDC staff understand the public's response to the campaign and its key messages. You will be asked to complete different versions of the survey depending on whether you have seen or heard certain messages from the CDC about antibiotic use.

2. May we ask you some questions to see if you are	a good match to take this survey?
Yes	
○ No	
3. Are you a healthcare provider?	
Yes	
○ No	
4. What type of healthcare provider are you?	
Physician (MD or DO)	Licensed Practical Nurse (LPN)
Physician Assistant (PA)	Registered Nurse (RN)
Nurse Practitioner (NP)	None of the above
5. Do you work in an outpatient setting?	
Yes	
○ No	
6. In what type of outpatient setting do you work?	
Primary care practice/facility	Emergency department
Urgent care facility	None of the above
Retail health clinic	
7. On average, how many hours a week do you provi	de patient care in an outpatient setting?
0-10 hours	
11-20 hours	
21-30 hours	
30 or more hours	

	. In what zip code do you work?	
_		
9	. On average, how often do you prescribe antibiotics?	
	Never	
	1-3 times a month	
	Once a week	
	Multiple times every week	

Towning tion, Inclinible	
Termination: Ineligible	
Thank you for your willingness to participate and answer our questions. Unformeet the criteria to continue with the survey. If you have any questions about any questions about this survey, please contact the research director, Krister 321-3211 orKristen.Cincotta@icf.com. Thank you for your time.	your participation and/or

Eligible Thank you for answering the questions. We have determined that you are a good match for this survey. If you have any questionsabout your participation and/or any questions about this survey, please contact the research director, Kristen Cincotta, Ph.D., at (404) 321-3211 orKristen.Cincotta@icf.com Thank you for answering the questions. We have determined that you are a good match for this survey. If you have any questionsabout your participation and/or any questions about this survey, please contact the research director, Kristen Cincotta, Ph.D., at (404) 321-3211 orKristen.Cincotta@icf.com.

Exposure to Campaign (All)			
Now we would like to ask you not have seen or heard about	_		tic use that you may or may
10. Please indicate below w past 12 months.	hether you have see	n or heard any of following ca	ampaign names or slogans in the
past 12 months.	Yes	No	Don't know/cannot recall
A. Get Ahead of Antibiotics	0	0	0
B. Flip the Script		\bigcirc	
C. Be Antibiotics Aware			
D. Get Smart About Antibiotics			
E. Don't Mis-take Antibiotics	\circ	\circ	\circ
Yes No Don't know/cannot recall			

Frequency and Channel of Exposure (Expose

You indicated that you had seen or heard the campaign name, *Be Antibiotics Aware*, or seen the campaign logo in the past 12 months.

12. In the past 12 months, approximately how often did you see CDC's Be Antibiotics Aware campaign messages, campaign name, or logo in PRINTED MEDIA?

nessages, campaigr						Don't
	1-2 times a day	Once a week	1-3 times a month	Less than once a month	Never	know/cannot recall
Poster						
Fact Sheet						
Brochure						
Graphic	\bigcirc		\bigcirc		\bigcirc	
Newspaper/magazine advertisement	\bigcirc	\circ		0		0
Flyer						
Other Printed Media (please specify)	\circ	\bigcirc	\bigcirc	0	\bigcirc	
		ately how often	did you saa (CDC's Re Antibiot	ics Awara c	ampaign
3. In the past 12 mc	onths, approxima			CDC's Be Antibiot Less than once a month	ics Aware ca Never	ampaign Don't know/cannot recall
3. In the past 12 mc	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot
3. In the past 12 monessages, campaigr	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot
.3. In the past 12 mo	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot
3. In the past 12 monessages, campaign Facebook Instagram	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot
3. In the past 12 monessages, campaign Facebook Instagram Twitter	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot
Instagram Twitter LinkedIn	onths, approxima n name, or logo o	on SOCIAL ME	DIA?	Less than once		Don't know/cannot

	1-2 times a day	Once a week	1-3 times a month	Less than once a month	Never	know/ca reca
Health websites /resources	0	\circ	\circ	\circ	\bigcirc	C
Website advertisements				\bigcirc	\bigcirc	\circ
Online news articles						C
Streaming TV/video services (e.g., Hulu, Netflix, [Amazon] Prime Video)	\bigcirc	\circ	\bigcirc		\circ	C
Blogs						C
Advertisements on mobile phone (including mobile apps)	\bigcirc	\bigcirc	\bigcirc	\circ	\bigcirc	C
Search engines (e.g., Google)	\circ		\bigcirc	\circ	\bigcirc	C
Other websites (please specify) Other Websites (please sp	pecify)		0			C
specify) Other Websites (please sp	nths, approxima			CDC's Be Antibiot	ics Aware c	ampaign
specify) Other Websites (please sp	nths, approxima name, or logo i	in TV AND RAD		CDC's Be Antibiot Less than once a month	ics Aware c	ampaign Don't ki cannot i
specify) Other Websites (please sp	nths, approxima	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please sp 15. In the past 12 mo messages, campaign Television (cable,	nths, approxima name, or logo i	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please sp 15. In the past 12 mo messages, campaign Television (cable, satellite, or antenna)	nths, approxima name, or logo i	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please specify) 15. In the past 12 momessages, campaign Television (cable, satellite, or antenna) Broadcast radio Other TV or Radio	nths, approximation name, or logo in 1-2 times a day	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please sp 15. In the past 12 mo messages, campaign Television (cable, satellite, or antenna) Broadcast radio Other TV or Radio media (please specify)	nths, approximation name, or logo in 1-2 times a day	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please sp 15. In the past 12 mo messages, campaign Television (cable, satellite, or antenna) Broadcast radio Other TV or Radio media (please specify)	nths, approximation name, or logo in 1-2 times a day	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k
specify) Other Websites (please sp 15. In the past 12 mo messages, campaign Television (cable, satellite, or antenna) Broadcast radio Other TV or Radio media (please specify)	nths, approximation name, or logo in 1-2 times a day	in TV AND RAD	DIO MEDIA? 1-3 times a	Less than once		Don't k

Billboards	1-2 times a day	Once a week	1-3 times a month	Less than once a month	Never	Don't kno cannot red
Biiiboaras						
Bus, train, or subway stations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
On buses or taxi cabs						
Advertisement in a mall			\bigcirc			\bigcirc
Advertisement in a grocery store	\bigcirc	0			\circ	
Advertisement in a store pharmacy (e.g., CVS, Walgreens, Walmart)	\bigcirc		\bigcirc	\circ	\bigcirc	\bigcirc
Other public locations (please specify)	0	\bigcirc	\bigcirc	\circ	\circ	0
Other public locations (plea	ase specify)					
Yes, I saw CDC's Be a sharing it.	Antibiotics Aware (naterials at my workpl ast 12 months, but I w	-	
	ls from another an	Campaign at my wo	orkplace in the pa	ast 12 months, but I was	as not respons	
sharing it. No, but I saw material	Is from another and any materials about the materials about workplace? (see material(s) design material(s) design ent waiting areas internal email/new	Campaign at my we tibiotic use campaid antibiotic use at now you see CDC' elect all that apped to educate patie ed to improve antibuseletter	orkplace in the pagn at my workplace in the pagn at my workplace in the second	ast 12 months, but I was ast 12 months, but I was ast 12 months. See Aware campaigneriate antibiotic use by healthcare provide	ras not respons onths. gn message	sible for placing

Diaka and Danafita of Antibiation, Attitudes and Daliafa (Figure 2 a)	
Risks and Benefits of Antibiotics: Attitudes and Beliefs (Exposed)	
Next, we are going to ask you some questions to learn more about your perspective on antibiotic prescribing. Research shows that healthcare provider face challenges to antibiotic prescribing. Your responses on this survey will help CDC understand how to better support healthcare providers' antibiotic prescribing. Please give us your honest responses. There are no right or wrong answers	
any of these questions.	

tudes and Beliefs: I					
L9. Please indicate the strongly agree.			Neither agree nor		
Antibiotic resistance is a serious public health issue.	Strongly disagree	Disagree	disagree	Agree	Strongly agr
Antibiotic resistance can have serious consequences for my patients.	0	\circ	0	0	0
Side effects caused by antibiotics could be very serious for my patients.	0	0	0	0	0

20. Please indicate th strongly agree.	e extent to which yo	ou agree with th	e following stateme	ents, from stron	gly disagree to
0, 0	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly ag
If my patients are prescribed antibiotics when they're not needed, they could experience minor side effects, like a rash.		0	0		0
If my patients are prescribed antibiotics, even whether needed or not, they could experience very serious health problems, such as C. diff infection.					

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly a
Prescribing antibiotics only when needed is the best care for my patients.	0	0	0	0	0
Prescribing antibiotics only when needed helps protect my patients from unnecessary side effects.	0	0	0	0	0
Prescribing antibiotics only when needed helps combat antibiotic resistance.	0	0	0	0	0

22. In the past 12 months	s, please indica	ate how often you	did the following w	hen prescribing	antibiotics.
	Never	Rarely	Sometimes	Often	Always
Patient satisfaction factors into my decisions to prescribe antibiotics.	0	0	0	0	0
I prescribe antibiotics according to clinical guidelines.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
I take antibiotic resistance into consideration when prescribing antibiotics to my patients.	0	0	0	0	0
I consider antibiotic adverse events, like C. diff infection, when prescribing antibiotics to my patients.					

Attitudes and Beliefs: Perceived Barriers
23. What barriers do you commonly experience to prescribing antibiotics according to clinical guidelines? (Select all that apply) Current clinical guidance doesn't always apply to my patients. I am not as familiar as I would like to be with current clinical guidance for prescribing antibiotics. My patients will be dissatisfied with their visit if I do not prescribe antibiotics and they believe they need them for their liniess. My patients demand antibiotics, even if I don't think an antibiotic is needed to treat their illness. My patients are unaware of or unconcerned about potential side effects of antibiotics, such as rash, nausea, or C. diff infection.
23. What barriers do you commonly experience to prescribing antibiotics according to clinical guidelines? (Select all that apply) Current clinical guidance doesn't always apply to my patients. I am not as familiar as I would like to be with current clinical guidance for prescribing antibiotics. I have not encountered any barriers to prescribing antibiotics based on clinical guidelines. My patients will be dissatisfied with their visit if I do not prescribe antibiotics and they believe they need them for their illness. My patients demand antibiotics, even if I don't think an antibiotic is needed to treat their illness. My patients are unaware of or unconcerned about potential side effects of antibiotics, such as rash, nausea, or C. diff

Discussing Antibiotics with Patients: Attitudes, Beliefs and Behaviors (Exposed)

24. Please indicate the extent to which you agree with the following statements, from strongly disagree to strongly agree.

	Strongly disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
It's important for me to discuss with my patients that antibiotics can cause side effects that can range from minor issues, like a rash, to very adverse events, such as C. diff infection.		0	0	0	
It's important for me to discuss with my patients that antibiotic use can lead to antibiotic resistance.		0		\circ	
It's important for me to help my patients understand ways they can feel better, such as taking over the counter (OTC) medications that can help relieve symptoms, when an antibiotic isn't needed to treat their illness				0	
It's important for me to educate patients about when antibiotics are and aren't needed for their illness.					

Discussing Antibiotics with Patients: Perceived Benefits of Conversations

25. Please indicate the extent to which you agree with the following statements, from strongly disagree to strongly agree.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I believe that educating my patients about appropriate antibiotic use can protect them from unnecessary side effects.		0			
I believe that educating my patients about appropriate antibiotic use can help reduce unnecessary antibiotic use, thus helping to combat antibiotic resistance.					
I believe that educating my patients about which infections antibiotics do and do not treat helps them understand my decision on whether or not to prescribe an antibiotic for their illness.		0			

Be	havio

26. When prescribing antibiotics, please indicate how frequently you discuss the following with your patients.

	Never	Rarely	Sometimes	Often	Always
When antibiotics are and aren't needed for their illness.		0	0	\circ	
Other ways to feel better, such as taking OTC medications that can help relieve symptoms, when a patient has an infection that does not need an antibiotic.				0	
Common side effects, such as rash, diarrhea, and nausea, when prescribing antibiotics.	0		0	0	0
Possible severe side effects, such as C. diff infection or allergic reactions.	\bigcirc		\circ	\bigcirc	\bigcirc
Antibiotic use can lead to antibiotic resistance.	\circ	0	0	0	0

ж с	What are the barriers you commonly encounter when educating your patients on the topics of appropri ibiotic use, and antibiotic resistance? Select all that apply.
	I am not familiar enough with these topics.
	I do not feel confident educating my patients on these topics.
	I do not think my patients will understand these topics.
	I do not think it is important for my patients to understand these topics.
	I do not think my patients will be interested in or receptive to learning about these topics.
	I do not have time to educate my patients on these topics.
	Other, please explain:
	I have not encountered any barriers to educating my patients on these topics.
	Don't know/cannot recall
	Prefer not to answer

Yes	opriate antibiotic use?		
No No			

Demographic Characteristics (All) Thank you. Now we would like to know more about you. 29. How long have you worked in your current role/position? Less than one year 10 or more years 1-5 years Prefer not to answer 6-9 years 30. What is your sex? Male Female Prefer not to answer Don't know 31. How would you describe your racial background? Select all that apply. White American Indian or Alaska Native Black or African American Other, please specify: _ Prefer not to answer Asian Native Hawaiian or Other Pacific Islander 32. Are you Hispanic or Latino? Yes No Prefer not to answer

Thank you for taking the time to participate in this important survey!