

C. *difficile* Current Practice Survey

Please read through each survey question with the following elements in mind—

1. Consistency: Question made sense, logical possible responses.
2. Navigation: Easy to move through survey, any technical difficulties.
3. Text: Easy to read.
4. Other: Comments and/or suggestions for how to improve the question (e.g., there was not an answer that fit my laboratory, too few or too many responses).
 - If you have no comments on the question, please write “no comment” in the “Other” box.
 - If there are more questions fields on the form than you answered, disregard them.
 - Keep track of how many minutes it takes you to complete the survey (not the collection form).

Name: _____

Question	Elements	Specific Observations
2 ¹ . Do you test for <i>C. difficile</i> ? Yes/no		
3. Do you use more than one algorithm depending on your patient population?		
Other		More than 1 algorithm, but not dependent on patient population
4. Which population(s) do you have more than one algorithm? (comment box)		

¹ The first survey question is the “name” field.

5. Which of the following is your primary algorithm? NAAT alone GDH --> EIA GDH --> EIA --> NAAT GDH + EIA --> NAAT GDH --> NAAT EIA --> NAAT	
Other	NAAT done on indeterminate Ag+ ₁ Toxin - or Ag- ₁ Toxin+
6. Which of the following is your secondary algorithm? NAAT alone GDH --> EIA GDH --> EIA --> NAAT GDH + EIA --> NAAT GDH --> NAAT EIA --> NAAT Not Applicable	
7. Do you perform testing for <i>C. difficile</i> on all shifts? Yes/No	
8. Which shifts do you test? -Day -Evening -Third Shift	
9. Do you know what percent of your tests are positive? Yes/no	
Other	No, but data can easily be obtained & calculated from LIS

10. Do you know what percent of your tests are positive? (comment box)	
Other	Could have a multiple choice with several different ranges.
11. Does your facility perform fecal transplants? Yes/no	
Other	When you say "does your facility" -> does that refer to the hospital where the lab is located or all the hospitals that the lab serves? i.e. larger hospital system with a centralized micro lab

How many minutes did it take you to complete the Current Practice survey (not the collection form)? _10 mins, 3 mins, 5 mins, 5 mins, skipped

OVERALL SURVEY EVALUATION	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	1	2	3	4	5
(Place an "X" to indicate your level of agreement for each statement below).					
12. The survey questions are easy to understand.				3	2
13. I was always able to find an appropriate answer to choose.				3	2
14. The answer choices are clearly written.				3	2
15. There were not enough choices of answers.		2	2		1
16. I always found the answer that fit the circumstances in my laboratory.		1		2	2
17. Overall, the length of the survey was... (circle your answer)					
too short	appropriate (5)			too long	

18. What did you like best about the survey (strengths, weaknesses)?

-It was easy to take and got right to the point

-Simple, direct questions

19. Additional thoughts/comments:

Easy to navigate & read