**SOPS® Diagnostic Safety Supplemental Items for the SOPS Medical Office Survey**

**Language: English**

* These supplemental items were designed for use with the core [SOPS® Medical Office Survey](https://www.ahrq.gov/sops/surveys/medical-office/index.html).
* **Composite Measures:** The supplemental items are listed by composite measure. A composite measure is a grouping of two or more survey items that assess the same area of culture related to diagnostic safety. The composite measures assessed in these supplemental items are:
  + Time Availability.
  + Testing and Referrals.
  + Provider and Staff Communication Around Diagnosis.
* **Administration Instructions:** To submit data from these supplemental items to the AHRQ [SOPS Medical Office Survey Database](https://www.ahrq.gov/sops/databases/medical-office/index.html), and to enable your site’s data to be compared to the Database, administer the supplemental items in their entirety without modifications or deletions:
  + No changes to any of the survey item text and response options.
  + No reordering of survey items.

**Placement:** Supplemental items should be added to the end of the SOPS Medical Office Survey, after Section G: Overall Ratings, just before the Background Questions section. Be sure to include the introductory text and subheadings. Add the SOPS Medical Office Background Questions after these diagnostic safety items.

For assistance with these supplemental items, please contact the SOPS Help Line at 1-888-324-9749 or [SafetyCultureSurveys@westat.com](mailto:SafetyCultureSurveys@westat.com).



The following items ask about **your medical office’s processes around diagnosis**. The processes start when a patient seeks care for a health problem, and include:

* + Gathering, integrating,and interpreting information about the patient (e.g., clinical history, physical exam, test and imaging results, referrals),
  + Making an initial diagnosis,
  + Discussing the diagnosis with the patient, and
  + Following up with the patient and revising the diagnosis over time, as needed.

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| **Your Medical Office’s Processes Around Diagnosis** |
| **SECTION A: Time Availability** |

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| **How much do you agree or disagree with the following statements?** | **Strongly Disagree** ⯆ | **Disagree** ⯆ | **Neither Agree nor Disagree ⯆** | **Agree** ⯆ | **Strongly Agree** ⯆ | **Does Not Apply or Don’t Know**  ⯆ |
| 1. The amount of time for appointments is long enough to fully evaluate the patient’s presenting problem(s) | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. Providers in this office have enough time to review the relevant information related to the patient’s presenting problem(s) | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. Providers in this office finish their patient notes by the end of their regular workday | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |

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| **SECTION B: Testing and Referrals** |

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| **How much do you agree or disagree with the following statements?** | **Strongly Disagree** ⯆ | **Disagree** ⯆ | **Neither Agree nor Disagree ⯆** | **Agree** ⯆ | **Strongly Agree** ⯆ | **Does Not Apply or Don’t Know**  ⯆ |
| 1. This office is effective at tracking a patient’s test results from labs, imaging, and other diagnostic procedures | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. When this office doesn’t receive a patient’s test results, staff follow up | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. All test results are communicated to patients, even if the test results are normal | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. When this office makes a high priority referral, we try to confirm whether the patient went to the appointment | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |

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| **SECTION C: Provider and Staff Communication Around Diagnosis** |

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| **How much do you agree or disagree with the following statements?** | **Strongly Disagree** ⯆ | **Disagree** ⯆ | **Neither**  **Agree nor Disagree ⯆** | **Agree** ⯆ | **Strongly Agree** ⯆ | **Does Not Apply or Don’t Know**  ⯆ |
| 1. Providers in this office encourage staff to share their concerns about a patient’s health condition. | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. Providers document differential diagnoses when they have **not** ruled out other diagnoses . | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. When a provider thinks another provider in this office/system may have missed a diagnosis, they inform that provider | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. When a missed, wrong, or delayed diagnosis happens in this office, we are informed about it | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |
| 1. Providers in this office talk directly with specialists/radiologists/pathologists when something needs clarification | 🞎1 | 🞎2 | 🞎3 | 🞎4 | 🞎5 | 🞎9 |