**SUPPLEMENTARY MATERIALS**

TABLE OF CONTENTS

Internal Medicine/Family Medicine Survey 2

Pediatric Medicine Survey 6

**INTERNAL MEDICINE/FAMILY MEDICINE SURVEY**

Please circle the answer or write in your response where indicated. Write as legibly as possible.

**Demographic and provider characteristics**

|  |  |  |
| --- | --- | --- |
| 1. What is your gender?
 | Male | Female |
| 1. What is your primary department?
 |  Internal Medicine |
|  |  Family Medicine |
|  |  Pediatrics |
|  |  Other |
| If you chose “Other,” please specify  |  |  |
| 1. Are you a medical resident?
 | Yes | No |
| 1. If you are a resident, please answer the next three questions. (If not a resident, skip to question 5.)
 |  |  |
| * 1. Circle the year of your residency
 | 1st 2nd  3rd 4th 5th  |
| * 1. Have you completed a rotation in infectious disease?
 | Yes | No |
| * 1. Have you completed a rotation in critical care medicine?
 | Yes | No |
| 1. If you are not a resident, answer the following question.(Skip to the next section if you are a resident.)
 |  |  |
| * 1. How many years have you practiced medicine (following completion of training/residency/fellowship)?
 | \_\_\_\_\_\_\_\_\_\_years |
|  |  |  |

**Clinical vignettes**

The following section provides a series of brief clinical cases. These are hypothetical cases and do not contain real patient information. For each scenario, we are interested in what empiric antibiotic therapy selection you would make, how you made this decision, and what information sources (if any) guided your choice.

*Case 1*

AB is a 38 year-old previously healthy man who has undergone an appendectomy. Two weeks postoperatively, he comes back to the hospital with a chief complaint of abdominal pain and purulent discharge exuding from his abdominal wound. AB has no appetite and feels thirsty and feverish, often accompanied with intermittent chills. Patient measured his previous temperature as 38.1°C. AB is allergic to β-lactams with a serious anaphylactic reaction upon exposure. Physical Examination: AB presents with tenderness to palpation at the right lower quadrant with inflammation. Abdominal CT is pending. Patient’s surgeon has been contacted but is in surgery until end of the day. Antibiotic therapy should be initiated at the current time.

Questions for Scenario 1

|  |
| --- |
| 1. Please answer questions 6a-c, which all pertain to Case 1:
 |
| * 1. Empiric antibiotic therapy for this patient should include coverage for which organisms?
 |
| * 1. If you needed more information to assist in the selection of the empiric antibiotic regimen, what are the names of specific resources would you use to help you make a decision?
 |
| * 1. If you know which antibiotic(s) you would start, please list the specific antibiotics below. You can indicate the single or multiple antibiotic regimens you would consider.
 |
|  |

*Case 2*

TI is a 49 y.o. male presenting as a new patient to your clinic with a history of idiopathic neurogenic bladder. He was first diagnosed in 1998 with 1000ml in his bladder. He reports that he always had a hard time urinating and emptying his bladder. He has been performing intermittent self-catheterization. He uses an 18F catheter 3-4 times/day. He has recent, flank pain and increased urinary frequency and urgency. Past medical history includes multiple UTIs with previous *Proteus mirabilis* and *Providencia stuartii* infections with unknown antibiotic susceptibility results. Outside PCP has been contacted, but medical records are not yet available. Urine culture is pending.

Questions for Case 2

|  |
| --- |
| 1. If you would prescribe antibiotics for this case, please answer 7a-c. (If not, skip to Question 8 on Page 4)
 |
| 1. Empiric antibiotic therapy for this patient should include coverage for which organisms?
 |
| 1. If you needed more information to assist in the selection of the empiric antibiotic regimen, what resources would you use to help you make a decision?
 |
| * 1. If you know which antibiotic(s) you would start, please list the specific antibiotics below. You can indicate the single or multiple antibiotic regimens you would consider.
 |
|  |

**Use of OHSU Antibiograms**

Antibiograms are reports of the prevalence of antibiotic resistance among common bacterial pathogens. Please answer the following questions about your knowledge of and experience using the annual antibiograms created for OHSU.

|  |  |  |
| --- | --- | --- |
| 1. Are you aware of the annual antibiograms created for OHSU?
 | Yes | No |
| 1. If you know about the antibiograms, please answer the following:
 |  |  |
| * 1. Do you feel comfortable using the antibiogram as a tool to guide your empiric selection of antibiotic therapy?
 | Yes | No |
| If not, why not? |  |  |
| * 1. Do you know how to access the antibiograms?
 | Yes | No |
| * 1. Have you used any of the antibiograms as a resource for prescribing?
 | Yes | No |
| * 1. Do you know about the antibiograms for specific patient populations?
 | Yes | No |
| If so, which one(s) are you familiar with: |  |  |
| * 1. Does relative cost data ever impact your empiric antibiotic choice for inpatients?
 | Yes | No |
| * 1. Does relative cost data ever impact your empiric antibiotic choice for outpatients?
 | Yes | No |
| * 1. Do you know that the annual OHSU antibiograms provide relative cost data for antibiotics?
 | Yes | No |

**PEDIATRICS SURVEY**

Please circle the answer or write in your response where indicated. Write as legibly as possible.

**Demographic and provider characteristics**

|  |  |  |
| --- | --- | --- |
| 1. What is your gender?
 | Male | Female |
| 1. What is your primary department?
 |  Internal Medicine |
|  |  Family Medicine |
|  |  Pediatrics |
|  |  Other |
| If you chose “Other,” please specify  |  |  |
| 1. Are you a medical resident?
 | Yes | No |
| 1. If you are a resident, please answer the next three questions. (If not a resident, skip to question 5.)
 |  |  |
| * 1. Circle the year of your residency
 | 1st 2nd  3rd 4th 5th  |
| * 1. Have you completed a rotation in infectious disease?
 | Yes | No |
| * 1. Have you completed a rotation in critical care medicine?
 | Yes | No |
| 1. If you are not a resident, answer the following question.(Skip to the next section if you are a resident.)
 |  |  |
| * 1. How many years have you practiced medicine (following completion of training/residency/fellowship)?
 | \_\_\_\_\_\_\_\_\_\_years |
|  |  |  |

**Clinical vignettes**

The following section provides a series of brief clinical cases. These are hypothetical cases and do not contain real patient information. For each scenario, we are interested in what empiric antibiotic therapy selection you would make, how you made this decision, and what information sources (if any) guided your choice.

*Case 1*

OP is an 8 year-old female who has undergone an appendectomy. Two weeks post-operatively, she returns to the hospital with a chief complaint of abdominal pain and purulent discharge exuding from her abdominal wound. OP has no appetite and feels thirsty and feverish, often accompanied with intermittent chills. Patient measured her previous temperature as 38.1°C. OP is allergic to β-lactams with a serious anaphylactic reaction upon exposure. Physical Examination: OP presents with tenderness to palpation at the right lower quadrant with inflammation. Abdominal CT is pending. Patient’s surgeon has been contacted but is in surgery until end of the day. Antibiotic therapy should be initiated at the current time.

Questions for Scenario 1

|  |
| --- |
| 1. Please answer questions 6a-c, which all pertain to Case 1:
 |
| * 1. Empiric antibiotic therapy for this patient should include coverage for which organisms?
 |
| * 1. If you needed more information to assist in the selection of the empiric antibiotic regimen, what are the names of specific resources would you use to help you make a decision?
 |
| * 1. If you know which antibiotic(s) you would start this patient on, please list the specific antibiotics below. You can indicate the single or multiple antibiotic regimens you would consider.
 |
|  |

*Case 2*

UT is 14 y.o. male who was admitted to the hospital with chief complaint of having hard time urinating and emptying his bladder. He has family history of idiopathic neurogenic bladder. Upon admission, a foley catheter was inserted. On day 3, the catheter was removed. On day 4, UT suddenly complained of supra-pubic pain and increased urinary frequency and urgency. UT and his family recently moved from XYZ State. Past medical history includes multiple UTIs with previous *Proteus mirabilis* and *Providencia stuartii* infections with unknown antibiotic susceptibility results. Outside PCP has been contacted, but medical records are not yet available. Urine culture is pending.

Questions for Case 2

|  |
| --- |
| 1. If you would prescribe antibiotics for this case (Case 2), please answer 7a-c. (If not, skip to Question 8 on Page 4)
 |
| 1. Empiric antibiotic therapy for this patient should include coverage for which organisms?
 |
| 1. If you needed more information to assist in the selection of the empiric antibiotic regimen, what resources would you use to help you make a decision?
 |
| * 1. If you know which antibiotic(s) you would start this patient on, please list the specific antibiotics below. You can indicate the single or multiple antibiotic regimens you would consider.
 |
|  |

**Use of OHSU Antibiograms**

Antibiograms are reports of the prevalence of antibiotic resistance among common bacterial pathogens. Please answer the following questions about your knowledge of and experience using the annual antibiograms created for OHSU.

|  |  |  |
| --- | --- | --- |
| 1. Are you aware of the annual antibiograms created for OHSU?
 | Yes | No |
| 1. If you know about the antibiograms, please answer the following:
 |  |  |
| * 1. Do you feel comfortable using the antibiogram as a tool to guide your empiric selection of antibiotic therapy?
 | Yes | No |
| If not, why not? |  |  |
| * 1. Do you know how to access the antibiograms?
 | Yes | No |
| * 1. Have you used any of the antibiograms as a resource for prescribing?
 | Yes | No |
| * 1. Do you know about the antibiograms for specific patient populations?
 | Yes | No |
| If so, which one(s) are you familiar with: |  |  |
| * 1. Does relative cost data ever impact your empiric antibiotic choice for inpatients?
 | Yes | No |
| * 1. Does relative cost data ever impact your empiric antibiotic choice for outpatients?
 | Yes | No |
| * 1. Do you know that the annual OHSU antibiograms provide relative cost data for antibiotics?
 | Yes | No |