**Supplemental Appendix. Survey for SHEA RN re: Diagnostic Stewardship**

**Respondent Characteristics**

1. **What is your primary role at your institution?**
   1. Antibiotic stewardship physician
   2. Hospital epidemiologist
   3. Infectious diseases consultant
   4. Other (please specify )
2. **Do you have a secondary role?**
   1. Antibiotic stewardship physician
   2. Hospital epidemiologist
   3. Infectious diseases consultant
   4. Other (please specify )
3. **Which best describes your hospital?**
   1. Independent, single institution
   2. Part of a multiple hospital system (health system)
4. **Where is your primary clinical microbiology laboratory located?**
   1. On-site
   2. Off-site, centralized/core laboratory at your health system
   3. Off-site, commercial/reference laboratory

**The questions in this survey pertain to multiplex panel tests such as respiratory panels or GI panels that are not used for blood culture identification.** Multiplex panels are defined as rapid molecular diagnostics that perform PCR tests for >5 pathogenic targets simultaneously. Pathogenic targets may include resistance genes or genes related to toxin production. Examples of panels include Biofire, Verigene, ePlex.

**Availability of Testing**

1. **Which multiplex panels does your institution have access to?** (Mark all that apply)

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| --- | --- | --- | --- | --- |
|  | On-site | By send-out | No access | Unsure |
| Respiratory |  |  |  |  |
| Pneumonia |  |  |  |  |
| Gastrointestinal |  |  |  |  |
| Meningitis/encephalitis |  |  |  |  |
| Other (specify\_\_\_\_\_\_\_\_\_\_\_) |  |  |  |  |

**RESPIRATORY PANELS**

{If the response to question #5 indicates that respiratory panels are available on-site or by send-out, questions #6 to #11 should be activated by branching logic.}

1. **Indicate the settings in which respiratory panels are commonly used at your institution.**

□ Emergency room

□ Acute care ward

□ Intensive care unit

□ Clinics and other outpatient areas

□ Other

1. **Indicate the settings in which respiratory panels are most useful at your institution.**

□ Emergency room

□ Acute care ward

□ Intensive care unit

□ Clinics and other outpatient areas

□ Other

1. **What is the typical impact of respiratory panels on diagnosis at your institution?**
   1. They tend to support or expedite accurate diagnosis.
   2. They tend to interfere with or delay accurate diagnosis.
   3. They tend to not influence the diagnostic process one way or the other.
2. **What is the typical impact of respiratory panels on clinical management and patient care at your institution?**
   1. They tend to support more efficient care.
   2. They tend to lead to unnecessary care.
   3. They tend to not influence clinical management.
3. **What is the typical impact of respiratory panels on patient outcomes at your institution?**
   1. They tend to improve patient outcomes.
   2. They tend to worsen patient outcomes.
   3. They tend to not affect patient outcomes.
4. **Please use this free space to explain your responses above (optional). Are there contextual factors that influence whether testing will have an impact?**

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**EXISTING STEWARDSHIP OF RESPIRATORY PANELS**

{If the response to question #5 indicates that respiratory panels are available on-site or by send-out, question #24 should be activated by branching logic.}

1. **Has your institution taken steps to improve use of respiratory panels in acute care?**
   1. Yes
   2. No
   3. Not sure

{If the response to question #24 is “Yes”, activate questions #25 to #28 by branching logic.}

1. **Indicate which interventions your institution has used to improve use of respiratory panels (select all that apply).**

□ Education or training

□ Best practice alert or pop-up in the electronic health record

□ Structured order sets with soft stop barriers to order entry

□ Structured order sets with hard stop barriers to order entry or other restrictions

□ Results report summarized or edited to ease interpretation

□ Results for specific or all pathogens suppressed

□ Results communicated by an intermediary such as ID consultant or ASP

□ Other

1. **Which interventions have been effective and which have not? Why?**

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1. **For which specific patient groups and clinical scenarios has your institution encouraged use of respiratory panels?**

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1. **For which specific patient groups and clinical scenarios has your institution discouraged use of respiratory panels?**

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**PROPOSED DIAGNOSTIC STEWARDSHIP**

{If the response to question #5 indicates that respiratory panels are available on-site or by send-out, question #39 should be activated by branching logic.}

1. **What is the optimal use for respiratory panels? How would you change systems of care delivery to promote optimal use?**

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