



# Peds Endocrinology Survey

## General Instructions:

Please read the instructions for each section and answer all the questions in sequential order. Please do not go back and change any answers once you have completed a section.

All data will be de-identified and recorded anonymously. With that in mind, please be as honest and accurate as possible with your responses.

After you have completed the survey, place the completed survey in the stamped return envelope and mail it back to us. Please make every effort to return the survey to us by the deadline of 9/10/07.

## Section A. CLINIC SETTINGS

*Instructions: Please read each item and fill the bubble (like this ●). Use a black ink or soft-leaded pencil.*

1. Your clinic is located in a city/town with a population of?	500K+ <input type="radio"/>	200K-499K <input type="radio"/>	75K-199K <input type="radio"/>	20K-74K <input type="radio"/>	<20,000 <input type="radio"/>
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2. How would you describe your practice?	<input type="radio"/> Academic	<input type="radio"/> Private
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3. How big is your practice?	An individual practice <input type="radio"/>	A small group practice (5 or fewer physicians) <input type="radio"/>	A large group practice (6 or more physicians) <input type="radio"/>
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4. Check all the personnel in your clinic that assist you in providing care for your patients with diabetes: ( <b>check all that applies</b> )		
<input type="radio"/> Physicians	<input type="radio"/> Nurse Practitioner	<input type="radio"/> Physical therapist/Exercise physiologist
<input type="radio"/> Child life specialist	<input type="radio"/> Physician Assistant	<input type="radio"/> Certified Diabetes Educator
<input type="radio"/> Nutritionist / Dietitian	<input type="radio"/> Social worker	<input type="radio"/> Psychologist/other mental health professional
		<input type="radio"/> Other _____

## Section B. PATIENT POPULATION

**Instruction:** please bubble in one circle per question

1. On average, what is the total number of patients you see in clinic per week?	<5 <input type="radio"/>	5-10 <input type="radio"/>	11-20 <input type="radio"/>	21-50 <input type="radio"/>	51-80 <input type="radio"/>	>80 <input type="radio"/>
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2. On average, how many young patients(0-21) with diabetes do you see per week?	No diabetes patients <input type="radio"/>	<5 <input type="radio"/>	5-10 <input type="radio"/>	11-20 <input type="radio"/>	21-30 <input type="radio"/>	31-40 <input type="radio"/>	>40 <input type="radio"/>
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3. On average, how many young patients(0-21) with type 2 diabetes(T2DM) do you see per week?	<3 <input type="radio"/>	3-5 <input type="radio"/>	6-10 <input type="radio"/>	11-15 <input type="radio"/>	16-20 <input type="radio"/>	21-25 <input type="radio"/>	>25 <input type="radio"/>
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(Please go in order, and complete each section before moving on)



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4. What percentage of your young patients(0-21) has the following insurance plans?

Type of insurance	<25%	26-50%	51-75%	>75%
a) Medicare and/or Medicaid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Private Insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What percentage of your young patients(0-21) with T2DM are?

Race/Ethnicity	<10%	11-25%	26-50%	51-75%	>75%
a) White	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) African American	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Asian	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Hispanic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. What percentage of your young patients(0-21) with T2DM are of the following age group?

Age in years	<10%	10-20%	21-30%	31-40%	41-50%	51-60%	>60%
a) ≤5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
a) 6-11	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) 12-17	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) 18-21	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. In your clinic, how often will the following tests be used for follow up care for a typical T2DM child?

Tests	Not used	q ≤3 mo	q6 mo	q1 yr	q2 yrs	q3-4 yrs	q5 yrs
a) HbA1c	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
a) Blood Pressure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Fasting lipid panel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Retinal exam	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Foot exam	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Liver function tests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Microalbumin test	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(Please go in order, and complete each section before moving on)



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## Section C. CASE VIGNETTE

**Instructions:** For the following vignettes, pick the most likely action that you would do in your clinic, and fill in one circle per question

### Case 1

You are seeing a 15 yr old boy for follow up care for T2DM. He has had T2DM for 2 years and has good glycemic control (A1C 6.5%). He stands 5 feet 8 inches tall (63%tile), and weighs 170 lbs with a BMI of 26 (94%tile). A fasting lipid panel shows total cholesterol level of 180, triglyceride of 100, HDL of 50, and LDL of 110 mg/dl with his blood pressure at 115/65 mmHg (50%tile). His urine albumin to creatinine ratio is 3µg/mg, and he has been on a program of diet and exercise for the past six months.

1A) What would you do for his cholesterol management?

- ☐ Continue to promote lifestyle change and recheck lipid every 3-6 months
- ☐ Refer to dietitian and/or physical therapist for more intensive lifestyle intervention
- ☐ Start lipid lowering medication at this time
- ☐ Refer to a lipid specialist
- ☐ Other \_\_\_\_\_

1B) Suppose the same patient has a LDL cholesterol level of 140 mg/dl. Do you generally:

- ☐ Continue to promote lifestyle change and recheck lipid every 3-6 months
- ☐ Refer to dietitian and/or physical therapist for more intensive intervention
- ☐ Start lipid lowering medication at this time
- ☐ Intensify his lipid lowering medication
- ☐ Refer to a lipid specialist
- ☐ Other \_\_\_\_\_

1C) Suppose the same patient has a LDL cholesterol level of 170 mg/dl. Do you generally:

- ☐ Continue to promote lifestyle change and recheck lipid every 3-6 months
- ☐ Refer to dietitian and/or physical therapist for more intensive intervention
- ☐ Start lipid lowering medication at this time
- ☐ Intensify his lipid lowering medication
- ☐ Refer to a lipid specialist
- ☐ Other \_\_\_\_\_

1D) Would you manage this patient differently if the patient is a female?

☐ Yes

☐ No

If yes, explain how you would treat this patient \_\_\_\_\_

(Please go in order, and complete each section before moving on)



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1E) Presuming that you are seeing a 15 yr old female patient with an elevated cholesterol level that requires initiation of statin therapy, what would you do?

- ☐ Do not give statin
- ☐ Give statin
- ☐ Give statin, and refer patient to her primary care physician to discuss pregnancy risks
- ☐ Give statin, discuss risks of taking statin if patient becomes pregnant
- ☐ Give statin, recommend the use of birth control
- ☐ Give statin, prescribe the use of birth control

### Case 2

You are seeing a 14 yr old boy for routine follow up care for T2DM. He has had diabetes for 2 years, with adequate glycemic control (A1C of 6.9%). He stands 5 feet 5 inches tall (50%tile) and weights 156 lbs with a BMI of 26 (95%tile). His blood pressure is 128/82 mmHg (95%tile), with a urine albumin to creatinine ratio of 3µg/mg. Despite dietary advice, he is relatively sedentary and has continued to gain weight. He is presently taking metformin 1000 mg twice daily.

2A) For his blood pressure control, which of the following would you do?

- ☐ Continue present management; follow up blood pressure in 3-6 months
- ☐ Encourage intensification of lifestyle change, repeat blood pressure in 3 months
- ☐ Refer to dietician, exercise physiologist for intensification of lifestyle change, repeat BP in 3 months
- ☐ Start blood pressure lowering medication
- ☐ Other \_\_\_\_\_

2B) The young boy returns in 6 months for re-evaluation. His glycemic control remains adequate and his weight has been stable. His blood pressure is now 140/85 mm Hg (99%tile). Which of the following would you do?

- ☐ Continue present management; follow up blood pressure in 3-6 months
- ☐ Encourage intensification of lifestyle change, repeat blood pressure in 3 months
- ☐ Refer to dietician, exercise physiologist for intensification of lifestyle change, repeat BP in 3 months
- ☐ Start blood pressure lowering medication
- ☐ Intensify blood pressure lowering medication
- ☐ Other \_\_\_\_\_

2C) Would you manage this patient differently if the patient is a female?

☐ Yes

☐ No

If yes, explain how you would treat this patient \_\_\_\_\_

(Please go in order, and complete each section before moving on)



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### Case 3

You are seeing a 17 yr old boy with a 5 year history of T2DM which has generally been poorly controlled with a A1C of 8.9% in clinic today. He stands 5 feet 9 inches tall (50%tile) and weights 210 lbs with a BMI of 31 (99%tile). His blood pressure is 140/89 mmHg (99%tile) today with normal cardiac and lung exams. His urine albumin to creatinine ratio is 50µg/mg and on reviewing his records, you noted that his albumin to creatinine ratio one year ago was 44µg/mg. Non-dilated fundoscopic exam found no signs of retinopathy and he has acanthosis nigricans on his neck. He is on lantus 15 units once daily in the evening, and metformin 1000 mg twice daily. He is mostly sedentary and does not smoke.

3A) For his blood pressure control, which of the following would you do?

- ☐ Continue present management; follow up blood pressure in 3-6 months
- ☐ Encourage intensification of lifestyle change, repeat blood pressure in 3 months
- ☐ Refer to dietician, exercise physiologist for intensification of lifestyle change, repeat BP in 3 months
- ☐ Start blood pressure lowering medication
- ☐ Other \_\_\_\_\_

3B) Would you manage this patient differently if the patient is a female?

☐ Yes

☐ No

If yes, explain how you would treat this patient \_\_\_\_\_

3C) Presuming that you are seeing a 17 yrs old female patient with elevated blood pressure that requires initiation of an ACE inhibitor, what would you do?

- ☐ Do not give ACE inhibitor
- ☐ Give ACE inhibitor
- ☐ Give ACE inhibitor, and refer patient to her primary care physician to discuss pregnancy risks
- ☐ Give ACE inhibitor, discuss risks of taking ACE inhibitor if patient becomes pregnant
- ☐ Give ACE inhibitor, recommend the use of birth control
- ☐ Give ACE inhibitor, prescribe the use of birth control

3D) In general, if you have a patient with persistent blood pressure at the 95th %tile for her respective height and age, at what age would you start giving this child blood pressure lowering medications?

- ☐ <8
- ☐ 8-10
- ☐ 11-13
- ☐ 14-16
- ☐ 17-19
- ☐ >19 yrs
- ☐ will not give medication

(Please go in order, and complete each section before moving on)



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## Section D. MEDICATIONS

**Instruction:** please bubble in all that applies to each question

1. Which of the following medications do you use as a <b>FIRST</b> line drug to treat hyperglycemia in your practice for young patients with T2DM? ( <i><b>bubble in all that applies</b></i> )		
<input type="radio"/> a-Glucosidase inhibitors(acarbose, miglitol)	<input type="radio"/> Biguanides(metformin)	<input type="radio"/> DPP-4 inhibitors(sitagliptin)
<input type="radio"/> GLP1 agonists(exenatide)	<input type="radio"/> Inhaled insulin	<input type="radio"/> Insulin
<input type="radio"/> Meglitinides(nateglinide, repaglinide)	<input type="radio"/> Sulfonylureas(glipizide, glimepiride)	<input type="radio"/> Thiazolidinedione(rosiglitazone, pioglitazone)
		<input type="radio"/> Other _____

2. Which of the following medications do you use as a <b>SECOND</b> line drug to treat hyperglycemia in your practice for young patients with T2DM? ( <i><b>bubble in all that applies</b></i> )		
<input type="radio"/> a-Glucosidase inhibitors(acarbose, miglitol)	<input type="radio"/> Biguanides(metformin)	<input type="radio"/> DPP-4 inhibitors(sitagliptin)
<input type="radio"/> GLP1 agonists(exenatide)	<input type="radio"/> Inhaled insulin	<input type="radio"/> Insulin
<input type="radio"/> Meglitinides(nateglinide, repaglinide)	<input type="radio"/> Sulfonylureas(glipizide, glimepiride)	<input type="radio"/> Thiazolidinedione(rosiglitazone, pioglitazone)
		<input type="radio"/> Other _____

3. Which of the following medications do you use to treat <b>hyperlipidemia</b> in your practice for young patients with T2DM? ( <i><b>bubble in all that applies</b></i> )		
<input type="radio"/> Statins	<input type="radio"/> Bile acid binding resin	<input type="radio"/> Niacin
<input type="radio"/> Fish oil	<input type="radio"/> Ezetimibe	<input type="radio"/> Fibric acid derivatives(gemfibrozil)
		<input type="radio"/> Other _____

4. Which of the following medications do you use to treat <b>hypertension</b> in your practice for young patients with T2DM? ( <i><b>bubble in all that applies</b></i> )		
<input type="radio"/> ACE inhibitor	<input type="radio"/> ARB	<input type="radio"/> Diuretic
<input type="radio"/> Beta blocker	<input type="radio"/> Calcium channel blockers	<input type="radio"/> Other _____

## Section E. ATTITUDES AND OPINIONS

1. What do you think are the biggest barriers to <b>MANAGING lipids</b> in young patients with T2DM? ( <i>Please check the 3 most important barriers in your opinion</i> )	
<input type="radio"/> lack of familiarity with subject matter	<input type="radio"/> difficulty assessing fasting lipids because patients often come in afternoon
<input type="radio"/> insufficient scientific evidence about best management practice at this time	<input type="radio"/> insufficient clinic resources to address this problem
<input type="radio"/> cost/insurance reimbursement issues	<input type="radio"/> this should be done by a local doctor and not a pediatric endocrinologist
<input type="radio"/> concerns about compliance of patients	<input type="radio"/> difficulty to get patients to make lifestyle changes
<input type="radio"/> concerns about pregnancy risks	<input type="radio"/> other _____

(Please go in order, and complete each section before moving on)



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2. Are you familiar with ADA recommendations on hyperlipidemia management for adolescents with T2DM?	<input type="radio"/> No (skip to Q3)	<input type="radio"/> Yes
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2a. If yes, how often do you follow these guidelines?	all the time (>75%) <input type="radio"/>	most of the time (50-75%) <input type="radio"/>	sometimes (25-49%) <input type="radio"/>	rarely (<25%) <input type="radio"/>
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3. ADA guidelines for management of hyperlipidemia in adolescents with T2DM are:					
	strongly disagree	disagree	neutral	agree	strongly agree
a) not evidence based enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) too aggressive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) not aggressive enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) not practical for use in clinic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. What do you think are the biggest barriers to MANAGING <b>hypertension</b> in young patients with T2DM? (Please check the <b>3</b> most important barriers in your opinion)	
<input type="radio"/> lack of familiarity with subject matter	<input type="radio"/> concerns about pregnancy risks
<input type="radio"/> insufficient scientific evidence about best management practice at this time	<input type="radio"/> insufficient clinic resources to address this problem
<input type="radio"/> cost/insurance reimbursement issues	<input type="radio"/> this should be done by a local doctor and not a pediatric endocrinologist
<input type="radio"/> concerns about compliance of patients	<input type="radio"/> difficulty to get patients to make lifestyle changes
	<input type="radio"/> other _____

5. Are you familiar with ADA recommendations on <b>hypertension</b> management for adolescents with T2DM?	<input type="radio"/> No (skip to Q6)	<input type="radio"/> Yes
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5a. If yes, how often do you follow these guidelines?	all the time (>75%) <input type="radio"/>	most of the time (50-75%) <input type="radio"/>	sometimes (25-49%) <input type="radio"/>	rarely (<25%) <input type="radio"/>
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6. ADA guidelines for management of <b>hypertension</b> in adolescents with T2DM are:					
	strongly disagree	disagree	neutral	agree	strongly agree
a) not evidence based enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) too aggressive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) not aggressive enough	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) not practical for use in clinic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

(Please go in order, and complete each section before moving on)



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## Section F. Chronic Care Management

**General Instructions:** For the table in the next two pages, please answer each component from the perspective of your clinic that supports care for chronic illness.

Answer each component regarding how your organization is doing with respect to the management of T2DM in children. For each row, PLEASE FILL IN THE BUBBLE that best describes the level of care (from 0 to 11) that currently exists in your clinic. The higher point values indicate that the actions described in that box are more fully implemented.

Components	Little support	Basic support	Good support	Full support
<b>Informing Patients about Guidelines</b> 	...is not done.	...happens on request or through system publications.	...is done through specific patient education materials for each guideline.	...includes specific materials developed for patients which describe their role in achieving guideline adherence.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>Information Systems/Registries</b>	...do not include patient self-management goals.	...include results of patient assessments (e.g., functional status rating; readiness to engage in self-management activities), but no goals.	...include results of patient assessments, as well as self-management goals that are developed using input from the practice team/provider and patient.	...include results of patient assessments, as well as self-management goals that are developed using input from the practice team and patient; and prompt reminders to the patient and/or provider about follow-up and periodic re-evaluation of goals.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>Community Programs</b>	...do not provide feedback to the health care system/clinic about patients' progress in their programs.	...provide sporadic feedback at joint meetings between the community and health care system about patients' progress in their programs.	...provide regular feedback to the health care system/clinic using formal mechanisms (e.g., Internet progress report) about patients' progress.	...provide regular feedback to the health care system about patients' progress that requires input from patients that is then used to modify programs to better meet the needs of patients.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>

(Please go in order, and complete each section before moving on)





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Components	Little support	Basic support	Good support	Full support
<b>Organizational Planning for chronic diabetes care</b>	...does not involve a population-based approach.	...uses data from information systems to plan care.	...uses data from information systems to proactively plan population-based care, including the development of self-management programs and partnerships with community resources.	...uses systematic data and input from practice teams to proactively plan population-based care, including the development of self-management programs and community partnerships, that include a built-in evaluation plan to determine success over time.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>Routine follow-up for appointments, patient assessments and goal planning</b>	...is not ensured.	is sporadically done, usually for appointments only.	is ensured by assigning responsibilities to specific staff (e.g., nurse case manager).	is ensured by assigning responsibilities to specific staff (e.g., nurse case manager) who uses the registry and other prompts to coordinate with patients and the entire practice team.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>
<b>Guidelines for chronic diabetes care</b>	...are not shared with patients.	...are given to patients who express a specific interest in self-management of their condition.	...are provided for all patients to help them develop effective self-management or behavior modification programs, and identify when they should see a provider.	...are reviewed by the practice team with the patient to devise a self-management or behavior modification program consistent with the guidelines that takes into account patient's goals and readiness to change.
<b>Score</b> (fill in one bubble per row)	0      1      2 <input type="radio"/> <input type="radio"/> <input type="radio"/>	3      4      5 <input type="radio"/> <input type="radio"/> <input type="radio"/>	6      7      8 <input type="radio"/> <input type="radio"/> <input type="radio"/>	9      10      11 <input type="radio"/> <input type="radio"/> <input type="radio"/>

(Please go in order, and complete each section before moving on)



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## Section G. DEMOGRAPHICS

1. What is your gender?	<input type="radio"/> Female	<input type="radio"/> Male
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2. What is your age?	<input type="radio"/> 26-35	<input type="radio"/> 36-45	<input type="radio"/> 46-55	<input type="radio"/> 56-65	<input type="radio"/> 65+
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3. What is your race?	
<input type="radio"/> White	<input type="radio"/> American Indian/Alaskan Native
<input type="radio"/> Black or African American	<input type="radio"/> Native Hawaiian or other Pacific Islander
<input type="radio"/> Asian	<input type="radio"/> Other

4. Do you consider yourself to be of Hispanic or Latino origin?	<input type="radio"/> Yes	<input type="radio"/> No
5. Did you complete medical school in the US?	<input type="radio"/> Yes	<input type="radio"/> No

6. Please indicate your board certifications: <b>(check all that applies)</b>		
General Pediatrics	<input type="radio"/> certified	<input type="radio"/> board eligible
Pediatric Endocrinology	<input type="radio"/> certified	<input type="radio"/> board eligible
Internal Medicine	<input type="radio"/> certified	<input type="radio"/> board eligible
Adult Endocrinology	<input type="radio"/> certified	<input type="radio"/> board eligible
Other specialty (please indicate): _____		

7. How many years have you been practicing medicine post-fellowship?				
<input type="radio"/> <5	<input type="radio"/> 5-9	<input type="radio"/> 10-14	<input type="radio"/> 15-19	<input type="radio"/> 19+ yrs

8. At work, how do you spend the majority of your time?	
<input type="radio"/> researcher	<input type="radio"/> administrator
<input type="radio"/> clinician educator	<input type="radio"/> retiree/emeritus
<input type="radio"/> clinician	<input type="radio"/> fellowship training
<input type="radio"/> Other _____	

(Please go in order, and complete each section before moving on)



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**Please feel free to write anything you would like to share with us!!**

**FOR OFFICIAL USE ONLY:**