

Supplemental digital content for Ryskina KL, Smith CD, Weissman A, et al. U.S. internal medicine residents' knowledge and practice of high value care: A national survey. Acad Med.

Internal Medicine In-Training Examination® 2012 Residents Questionnaire

The Examination Committee would like your help to improve future examinations and training programs. Please complete this **voluntary** questionnaire after you complete the examination. Although your responses will be stored with your identification number and score, **your answers will be kept confidential** and your individual identity will not be used. Your Program Director will not have access to any of the information that is unique to your program. Some collective information may be published in peer-reviewed journals. If you prefer not to participate in this research, please fill in this oval: ☐

CORRECT



INCORRECT



Please use black or blue **pen**

- 1** In the boxes below, please write your identification number (on your examination card). Under each box fill in the oval that corresponds to the digit in the box.

6						
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- 2** What is your PGY level?

- ☐ PGY-1
☐ PGY-2
☐ PGY-3
☐ PGY-4
☐ Other

- 3** Please rate the amount of time allotted for completing the examination.

Very Insufficient	Somewhat Insufficient	Just Right	Somewhat Excessive	Very Excessive
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 4** How difficult was the examination for you?

Much Too Elementary	Somewhat Too Elementary	Just Right	Somewhat Too Advanced	Much Too Advanced
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- 5** What is your ultimate career plan? (Choose only ONE)

- | | |
|---|---|
| <input type="radio"/> General Internal Medicine | <input type="radio"/> Med/Peds |
| <input type="radio"/> Cardiology | <input type="radio"/> Nephrology |
| <input type="radio"/> Endocrinology | <input type="radio"/> Pulmonology/Critical Care |
| <input type="radio"/> Gastroenterology | <input type="radio"/> Rheumatology |
| <input type="radio"/> Geriatrics | <input type="radio"/> Other subspecialty |
| <input type="radio"/> Hematology/Oncology | <input type="radio"/> Other (not IM) |
| <input type="radio"/> Hospitalist | <input type="radio"/> Undecided subspecialty |
| <input type="radio"/> Infectious Diseases | <input type="radio"/> Undecided career plan |

- 6** Which of these resources have you used or plan to use to prepare for the ABIM certification examination? (Choose all that apply)

- ☐ MKSAP
☐ Board Basics: An Enhancement to MKSAP
☐ ACP Medicine
☐ MedStudy Core Curriculum
☐ MedStudy Board Style Q&As
☐ UpToDate
☐ Registration for an ACP board review course
☐ Registration for a medical school or hospital-sponsored board review course
☐ Registration for some other board review course
☐ Virtual Dx: Interpretive Challenges from ACP

- 7** What do you expect to be doing after completion of your current program? (Choose one)

- ☐ Patient care/clinical practice (in non-training position)
☐ Chief resident
☐ Teaching/research (in non-training position)
☐ Temporarily out of medicine
☐ Other
☐ Undecided/don't know yet
☐ Additional subspecialty training or fellowship

Skip
to
Q 9

- 8** If you are going on for additional training/fellowship, please answer the following questions. Otherwise, skip to Q.9.

A. How confident do you feel TODAY about your ability to obtain a fellowship position in your medical subspecialty of choice?

- ☐ Very confident
☐ Somewhat confident
☐ Neither confident nor unconfident
☐ Somewhat unconfident
☐ Very unconfident

B. Beginning with the 2012 Match for the 2013 appointment year, Match Day will move from June of the applicants' second year of training to December of the third year. What is your reaction to this move? (Choose all that apply)

- ☐ More time to explore career choice
☐ More time to explore fellowship programs
☐ More time to prepare application
☐ Less time for geographical relocation
☐ Less time to make alternative plans if don't match
☐ Other
☐ No reaction

THE

Please continue on the other side.

9 Do you agree or disagree with each of the following statements? (Choose one response for each item)

	Strongly disagree	Somewhat disagree	Neither agree/disagree	Somewhat agree	Strongly agree
Physicians order more tests than needed to protect themselves from malpractice suits.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physicians order more tests because they are uncomfortable with diagnostic uncertainty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physicians order more tests because they are concerned about inadequate patient follow up	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physicians order more tests and treatments to satisfy patient demands.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physicians have insufficient knowledge of the tradeoff between benefits/harms and costs of most tests and procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand the principles of sensitivity, specificity, predictive value, and likelihood ratios.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I apply the principles of sensitivity, specificity, predictive value, and likelihood ratios when selecting and analyzing test results.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know where to find estimated costs of tests and treatments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I incorporate the cost of tests and treatments into clinical decisions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I share estimated costs of tests and treatments with patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I avoid ordering unnecessary tests and treatments for patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I incorporate patients' values and concerns into clinical decisions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know the benefits and harms associated with common tests and treatments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I offer patients alternatives of care, considering benefits, harms and costs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I reduce health care waste within my hospital and/or clinic.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The majority of faculty who work with residents in my program consistently role model cost-conscious care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10 Indicate the degree to which you think each of the following would improve the quality of patient care. (Choose one response for each item)

	Not at all	Somewhat	To a great extent	Uncertain
Discussing alternatives of care with patients, considering benefits, harms and costs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Balancing the clinical benefit of care with the cost and harms when treating patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Customizing the care plan to incorporate patients' values and concerns	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Decreasing unnecessary or harmful tests and treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11 How often do you and your faculty discuss balancing benefits and harms with cost when caring for patients?

- ☐ Never
☐ Few times a year
☐ Few times a month
☐ Few times a week
☐ Every day

12 I have been exposed to the AAIM/ACP High Value Cost Conscious Care curriculum at my institution.

- ☐ Yes
☐ No
☐ Not sure

13 How often are issues of balancing benefits and harms with costs the subject of teaching conferences or rounds?

- ☐ Never
☐ Few times a year
☐ Few times a month
☐ Few times a week
☐ Every day

14 Through which of the following formats, if any, have you received education in providing care that balances the clinical benefits with its cost and harms to improve patient outcomes? (Choose all that apply)

- ☐ Assigned reading
☐ Intern/Resident Report
☐ Grand Rounds
☐ Resident lectures
☐ Journal club
☐ Other teaching formats (e.g., web-based programs)
☐ Haven't received education in this area