

IT MATTRs 2 Practice Member Survey

Version Date: February 28, 2018

Please take a few minutes to fill out this survey about opioid use in your practice and community. Thank you for your participation.

Practice Name:

Please rate the following:

1. How serious of a problem is opioid pain medication (Percocet, OxyContin, or Vicodin) abuse among your patients?

Don't Know Not Serious Slightly Serious Somewhat Serious Very Serious

2. How serious of a problem is heroin use among your patients?

Don't Know Not Serious Slightly Serious Somewhat Serious Very Serious

How much do you agree or disagree with the following statements?

3. Prescription opioids can be addictive.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

4. It is easy to purchase prescription pain killers on the street.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

5. Opioid addiction is a chronic disease.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

6. Heroin and prescription pain killers target the same area of the brain.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

7. Many people who become addicted to prescription pain medicine transition to using heroin.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

Please answer the following questions:

8. Of the following, which is the most common cause of death in the United States?

Don't Know Alcohol-related traffic accidents Prescription opioid overdose Homicide

9. Have you or someone you know taken an opioid pain medication (Percocet, OxyContin, or Vicodin) for something other than being in pain?

I have never been prescribed opioids for pain Yes No Prefer not to answer

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10. Do you know someone personally (friend, family member, neighbor, yourself) who has struggled with prescription drug addiction?

- Yes No Prefer not to answer

11. In the past year, have you seen/heard any of the following messages? Check all that apply.

- Parents should talk to their kids about prescription use and abuse.
 It is important to lock up your prescription medications.
 There are safe ways to dispose of leftover or expired medications.
 Prescription medication abuse is a growing problem in Colorado.
 Prescription medication abuse is a growing problem in the US.
 It is not safe to share prescriptions with friends or family.

12. In your practice, how often do you or your prescribers explain the risks of addiction when prescribing opioid pain medication?

- Don't Know Never Rarely Sometimes Often Always

How much do you agree or disagree with the following statements?

13. I feel confident that my practice can effectively manage patients with opioid use disorder.

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

14. I feel confident that my practice can effectively utilize buprenorphine to help treat patients with opioid use disorder.

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

15. I know where to refer patients with opioid use disorder for buprenorphine treatment if my practice does not currently offer buprenorphine treatment.

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

16. Medication assisted treatment is an effective method to help treat opioid use disorder.

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

17. A person will not become physically dependent on long-term opioid pain medication if taken as prescribed by a physician.

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

18. With repeated opioid use, euphoria diminishes and eventually continued use is needed to "just feel normal".

- Don't Know Strongly Disagree Disagree Agree Strongly Agree

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19. Buprenorphine has a long half-life, which means that there is prolonged steady dose to prevent withdrawal symptoms from occurring while taken as directed.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

20. Relapse rates for heroin users treated with buprenorphine are the same with a rapid taper or with a year-long maintenance of medication.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

21. If an individual with opioid-use disorder is not displaying withdrawal symptoms, administering buprenorphine may precipitate withdrawal symptoms.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

22. Non-compliant medication assisted treatment patients should be discharged from the treatment program.

Don't Know Strongly Disagree Disagree Agree Strongly Agree

23. Maintaining buprenorphine during pregnancy is safer for the mother and fetus than using heroin, other opioids, or detoxing (stopping opioids).

Don't Know Strongly Disagree Disagree Agree Strongly Agree

True or False:

24. The patient must be in active withdrawal to begin buprenorphine induction.

Don't Know True False

25. If a patient presenting for buprenorphine induction appears ill, he/she must be sent to the emergency department immediately.

Don't Know True False

Please answer the following questions:

26. What is the primary side effect of buprenorphine?

Don't Know | Vomiting | Diarrhea | Constipation | Frequent Urination | Hallucinations

27. What pharmacologic treatment for opioid use disorder is considered the first line agent for adolescents?

Don't Know Naltrexone Methadone Buprenorphine

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28. Please select the answer you most agree with. The main goal of medication assisted treatment is for patients with opioid use disorder to obtain:

- Complete sobriety | Functional independence | The ability to work and drive while high
 A constant supply of opioids to avoid withdrawal symptoms

29. Using your own definition of “burnout,” please indicate which statement best describes your situation working at this practice. Check the one best answer:

- I enjoy my work. I have no symptoms of burnout.
 Occasionally I am under stress, and I don’t always have as much energy as I once did, but I don’t feel burned out.
 I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.
 The symptoms of burnout that I’m experiencing won’t go away. I think about frustrations at work a lot.
 I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.

Demographics

30. What gender do you identify with?

- Male | Female | Other | Prefer not to answer

31. What is your age?

- 18-24 | 25-34 | 35-44 | 45-54 | 55-64 | 65-74 | 75+ | Prefer not to answer

32. What is the highest level of education you have completed?

- 0-11 years | High school graduate | Some college, no degree | Associate degree | Bachelor degree
 Graduate or professional degree | Prefer not to answer

33. What is your race? Please check all that apply.

- White | Black/African American | Asian | Native Hawaiian or Other Pacific Islander | American Indian or Alaska Native | Other | Prefer not to answer

34. Are you Hispanic or Latino?

- Yes | No | Prefer not to answer

35. What best describes your position in this practice?

- Clinician (MD, DO, PA, NP) | Clinic Manager/Administrator | Front office staff | Medical Assistant |
 Medical Records staff | Nursing staff (RN, LPN, etc.) | Patient Navigator | Pharmacist |
 Behavioral Health Provider | Other: _____ | Prefer not to answer

Thank you for filling out our survey!