	Version 1.2/ Date20	200427	No : [[
В.	Knowledge of Coronavirus disease 2019 (COVID-19)			
1.	As long as medical staffs are alert enough for patients with respiratory symptoms during treatment, medical staff can avoid COVID-19 infection.	True	False	Don't know
2.	As long as the patient provides a health insurance card or identity card, physicians can understand the complete TOCC history.			
3.	At this stage, it has moved into the period of disaster reduction from confinement period and gradually into community spread period. TOCC does not matter anymore.			
4.	If the patient complained of aching and fever without travel history and the clinical diagnosis shows suspected influenza, the patient should avoid taking off the mask for quick screening during the current pandemic situation. It is better to prescribe influenza medication (eg Tamiflu), and require the patient to take the medication home with self-health management as well as monitoring.			
5.	Since the COVID-19 pandemic is spreading rapidly, participating in primary care physicians' smartphone web networks (such as LINE, etc.) is the most immediate way to obtain correct information.			
6.	The key factor in successful blocking "community- hospital- community" transmission mode is "maintaining hospital(including clinics) secures and medical staff safeties."			
7.	If my specialty is not related to respiratory diseases nor fever, I just need to refer the patients who were suspected of COVID-19 to the hospital.			
8.	If infected with SARS-COV-2, the most sensitive detection is through sample of the lower respiratory tract secretions.			
9.	The surgical mask consists of three layers of material: the outer layer is splash-proof; the middle layer has a filtering effect; the inner layer absorbs moisture.			
10.	If the N95 face mask can be well adhered to the face, it can still block more than 95% of the 0.3µm dust particles that are the most difficult to filter.			
11.	Generally, children and adolescents have milder symptoms of COVID-19 than adults, and are less likely to spread the virus.			
12.	Liver function was tested abnormally in half of the mild COVID 19 cases.			
13.	If IgG antibody of SARS-CoV-2 virus is detected in the blood of a pneumonia patient, it means a confirmed diagnosis of COVID-19 and should be isolated immediately.			
14.	COVID-19 is a coronavirus resembling to SARS.			
15.	The main lethal cases of COVID-19 is young children with poor immunity.			
16.	80% of COVID-19 infections are mild.			
17.	It is important to be alert while visiting patients, whether it is an adult or a child. If the patient has respiratory symptoms, the physicians should pay more attention to the COVID-19.			
18.	At this stage, it has moved into the period of disaster reduction from confinement period and gradually into community spread period. The increasing number of imported cases highlights the importance of travel and			

	0200427	No :			
contact history of TOCC.					
19. When all medical staff wears protective measures and washed visiting the patients, the clinic environment is regularly dising so important whether the patient wears a mask.					
20. Once symptoms like fever, sore throat or general weakness ar primary clinic, and the patient returned to Taiwan from Franthey should be referred to the medical center for COVID-19	nce a week ago,				

					Version	1.2/ Dat	e20200	427 No	:]-	
C. Attitude to provide care for COVID-19											
		Ag	greeme	nt		Importaant					
	Strongly disagree	Disagree	Neither	Agree	Strongly agree	Not important at all	Not important	Fair	Important	Very important	
1. Threats of providing care for suspect COVID-19 patients:											
(1) Worried about being infected											
(2) Worried about infecting family members											
(3) Worried about not being competent to participate in pandemic prevention											
(4) Worried about insufficient protective equipment											
(5) Worried about being disliked by neighboring residents											
(6) Most of the symptoms of physical discomfort of confirmed (or suspected) patients are difficult to control											
(7) Worried about influencing the care for other patients											
2. Benefits of providing care for su	spect C	OVID.	-19 pat	ients:							
(1) Help our country to improve the prevention of pandemic											
(2) Competent of taking care of consulting patients											
(3) Make the community more secure											
(4) Make the pandemic being better controlled in Taiwan											
(5) Achieve the value of being a physician											
(6) Family members can also receive timely care											
(7) Let medical staff have a sense of accomplishment and be more positive in their work											

3. Barriers of providing care for suspect COVID-19 patients:

				,	Version	1.2/ Da	te20200	427 No	:	-
(1) The inconvenience of wearing protective equipment										
(2) The risk of getting infection when caring patients										
(3) Family dislike the care of suspect patients										
(4) Caring suspect patients will decrease the number of patients in my outpatient clinic										
(5) Participating in pandemic prevention work requires high costs										
6) Worried that the knowledge is insufficient to support pandemic prevention work										
(7) Have a deeper sense of powerlessness or helplessness in life										
1. Overall, when I consider providing care to suspect COVID-19 patients $(0-10)$										
(1) Benefits: point										
(2) Barriers: point										