We are conducting a research study to measure residents' awareness of factors that can influence patient satisfaction. Residents, like you, are important providers of medical care in academic institutions, and as such have an impact on patient satisfaction. Given the important role you play in patient care, we want to learn what you believe affects the satisfaction of your patients with the care you provide. For pediatric patients, the survey refers to parent satisfaction only.

## Part I: Tell us about you.

1. What year are you in residency?	4. What gender are you?		
D PGY-1	Male		
D PGY-2	Female		
D PGY-3			
D PGY-4			
Other (specify)	5. Are you of Hispanic or Latino origin?		
2. Type of residency program	□ Yes		
Internal Medicine	□ No		
Pediatrics			
Internal Medicine-Pediatrics	6. What is your race? (Mark all that apply)		
Preliminary Program			
Transitional Program	Black or African American		
□ Surgery	□ White		
Obstetrics and Gynecology	Asian		
Other (specify)	Other (specify)		
3. What is your age range?	7. Do you have additional graduate degrees?		
Under 25	🗆 No		
□ 25-29			
□ 30-34			
□ 35 and over	Other (specify)		

## Part II: Understanding Drivers of Patient Satisfaction

Think about the factors listed below that may influence the satisfaction of patients with the care you provide. How important or unimportant do you consider each of the following influences on the satisfaction of your patients with your care?

1. Ranking of medical school that physician attended	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
2. Poor health status of patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
3. Physician explaining tests, treatments, diagnosis	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
4. Board certification status of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
5. Responsiveness of ancillary staff to patient's needs	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
6. Level of education of patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
7. Thoroughness and competence of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
8. Nurses willingness to listen to patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
9. Physician rank in medical school	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
10. Explanations provided by nurses	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
11. Courtesy and respect from nurses	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
12. USMLE score of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
13. Income level of patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
14. Age of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
15. Courtesy and respect from physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
16. Listening skills of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
17. Age of patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
18. Gender of patient	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
19. Gender of physician	Not at all Important	Slightly Important	Important	Very Important	Extremely Important
20. Discussions about treatment provided by nurse	Not at all Important	Slightly Important	Important	Very Important	Extremely Important

## Part III: Personal Experiences

Which of the following experiences have added to your understanding of what affects patients' satisfaction with the care you provide? If you have not personally had any of the experiences below, please select N/A (not applicable).

21. Your own hospitaliz	ation
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	🗆 N/A	🗌 No impact	Slight Impact	Moderate Impact	Large Impact			
22.	Hospitalization of	of a family meml	per or friend					
	🗆 N/A	No impact	Slight Impact	Moderate Impact	Large Impact			
23.	Observation of y	our peer's intera	iction with patien	ts (i.e. other interns or resi	dents)			
	□ N/A	🗌 No impact	Slight Impact	Moderate Impact	Large Impact			
24. Observation of supervisor's interactions with patients (i.e. attending)								
	□ N/A	🗌 No impact	Slight Impact	Moderate Impact	Large Impact			
25. Feedback from faculty evaluations								
	□ N/A	No impact	Slight Impact	Moderate Impact	Large Impact			
26.	Feedback from r	nursing evaluatio	ons					
	□ N/A	No impact	Slight Impact	Moderate Impact	Large Impact			
27.	Feedback from	patient evaluatic	ins					
	□ N/A	🗌 No impact	□ Slight Impact	Moderate Impact	Large Impact			
Part IV: Education about Patient Satisfaction								
28.	How many times	s have you had a	n educational sess	sion that discussed patient	satisfaction during medical school?			
	□ 0		2 🗌 3	□ 4 □ 5 or more				
29.	How many times	s have you had a	n educational sess	sion that discussed patient	satisfaction during residency?			
	□ 0	□ 1 □	2 🗌 3	□ 4 □ 5 or more				
<ul> <li>30. If you have attended an educational session on patient satisfaction, check all that apply.</li> <li>Resident lecture (i.e. noon conference, grand rounds, sub-specialty conference, etc.)</li> <li>Medical student lecture</li> <li>Workshop on patient safety at a local or national meeting</li> <li>Hospital orientation</li> <li>I have never attended a lecture on patient satisfaction</li> </ul>								
31. Please answer the following: I feel confident that my patients are satisfied with the care I provide.								

## Thank you for taking the time to complete this survey. Your opinion matters!!