

APPENDIX P – PRACTITIONER SURVEY

PID:

It will take you less than 5 minutes to complete this survey and the information is very important to us.

Please fill in the circle ● of the answer for each question that best describes your role at the dental practice and your thoughts and feelings on conducting the pilot study protocol. If you did not conduct a task item, please select “N/A”. Your participation is voluntary and you do not have to answer any question that you do not want to answer.

	Dentist	Dental Assistant	Dental Hygienist	Receptionist or Administrative Staff
What is your role at the dental practice?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What was your level of comfort with the following study procedures:

	Completely Comfortable	Comfortable	Neutral	Somewhat Uncomfortable	Completely Uncomfortable	N/A
1. Education and training for the protocol.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Recruiting patients for the study.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Consenting patients to the study.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Answering questions about the study.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Having your patients complete the first oral HPV risk factor survey.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Collecting oral rinse specimens.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Storing oral rinse specimens.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Shipping oral rinse specimens.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Coordinating blood draws.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Providing test results to the patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Answering questions about test results.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Scheduling follow-up visits.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Arranging for referral to ENT.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Having your patients complete the longer risk factor survey, which may have included sensitive questions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Please provide additional comments, thoughts or feelings about why you were comfortable or uncomfortable with the study procedures.

	Completely Acceptable	Acceptable	Neutral	Unacceptable	Completely Unacceptable	N/A
16. How much did you find the extra time required for a patient to participate in the study to be acceptable or unacceptable?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Yes	No	I don't know
17. Did study patients ask you about their high-risk HPV test results?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Yes	Maybe	No
18. Our dental practice would be interested in participating in a future oral HPV study similar to this pilot study.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Please provide additional comments, thoughts or feelings related to the pilot study protocol and its procedures in the space below.

THANK YOU!