

Other Useful Data Collection Tools/Forms

UNIVERSITY OF CALIFORNIA, SAN DIEGO Attitudes Survey for Attendings/Fellows

Field/subspecialty _____ / _____

Assistant Associate Professor Clinical Instructor Fellow

On a scale of 1–10, rate how much do you agree with the following statements (1 — could not disagree more strongly, 5 — agree with completely). Feel free to make any comments following the statements.

1. Good blood sugar control is important for all hospitalized patients.

1 2 3 4 5

2. A glucose value of 150–200 is acceptable when:

The patient is post-op.

1 2 3 4 5

The patient is on steroids.

1 2 3 4 5

The patient is on TPN.

1 2 3 4 5

The patient is in the ICU.

1 2 3 4 5

The patient is on a sliding scale.

1 2 3 4 5

3. I feel confident in my ability to control blood sugars adequately in my hospitalized patients.

1 2 3 4 5

4. Aggressive blood glucose control in hospitalized patients results in unacceptably high rates of hypoglycemia.

1 2 3 4 5

5. Most diabetic patients can be well controlled on a regular insulin sliding scale.

1 2 3 4 5

6. I avoid aggressive blood glucose control to avoid precipitating hypoglycemia.

1 2 3 4 5

7. I consult an internist or endocrinologist to assist me with management of my hospitalized diabetic patients.

1 2 3 4 5

8. I rely on my residents to manage glucose control and ask me or consulting services for help as needed.

1 2 3 4 5

9. My residents will tell me if they are having trouble managing glucose levels.

1 2 3 4 5

10. I am up to date on the latest guidelines for glucose control.

1 2 3 4 5

11. I would like more training or information about how to manage hyperglycemia in hospitalized patients.

1 2 3 4 5

12. There are systematic barriers that prohibit me from achieving appropriate glucose control.

1 2 3 4 5

UNIVERSITY OF CALIFORNIA, SAN DIEGO Attitudes Survey for Residents

Resident Survey

Medicine	OB/GYN	FP	Anesthesia	Surgery _____
PGY 1	2	3	4	5
	6	7		

On a scale of 1–10, rate how much you agree with the following statements (1 — could not disagree more strongly, 5 — agree with completely). Feel free to make any comments following the statements.

1. Good blood sugar control is important for all hospitalized patients.

1	2	3	4	5
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2. A glucose value of 150–200 is acceptable when:
 - The patient is post-op.

1	2	3	4	5
---	---	---	---	---
 - The patient is on steroids.

1	2	3	4	5
---	---	---	---	---
 - The patient is on TPN.

1	2	3	4	5
---	---	---	---	---
 - The patient is in the ICU.

1	2	3	4	5
---	---	---	---	---
 - The patient is on a sliding scale.

1	2	3	4	5
---	---	---	---	---

3. I feel confident in my ability to control blood sugars adequately in my hospitalized patients.

1	2	3	4	5
---	---	---	---	---

4. Aggressive blood glucose control results in unacceptably high rates of hypoglycemia.

1	2	3	4	5
---	---	---	---	---

5. Most diabetic patients can be well controlled on a regular insulin sliding scale.

1	2	3	4	5
---	---	---	---	---

6. I avoid aggressive blood glucose control to avoid precipitating hypoglycemia.

1	2	3	4	5
---	---	---	---	---

7. My attendings or chief residents provide sufficient guidance for me to control blood sugars in my hospitalized patients.

1	2	3	4	5
---	---	---	---	---

8. I would like more training or information about how to manage hyperglycemia in hospitalized patients.

1	2	3	4	5
---	---	---	---	---

9. My attendings routinely ask about glucose control on rounds.

1	2	3	4	5
---	---	---	---	---

10. I routinely report to my attending about glucose control.

1	2	3	4	5
---	---	---	---	---

11. I am up to date on the latest guidelines for glucose control.

1	2	3	4	5
---	---	---	---	---

12. There are systematic barriers that prohibit me from achieving appropriate glucose control.

1	2	3	4	5
---	---	---	---	---

PHYSICIAN SATISFACTION/EVALUATION TOOL

For the Standardized Subcutaneous Insulin Order Set and Guidelines

(similar to the subcutaneous order set presented in the [Layer Interventions, Advance Reliability section](#))

Survey is modified with permission from Georgia Hospital Association Research and Education Foundation Partnership for Health & Accountability Diabetes Special Interest Group

Thank you for taking the time to complete this survey. Your input will help us as we evaluate the use of the standardized insulin order set and guidelines. Please select the choice that best describes your thoughts.

1. I am aware of the ACE clinical guideline recommendations for treating the diabetic patient.
 Yes No
 2. Keeping my patient's blood sugar levels between 80 and 110 in the ICU decreases length of stay, ventilator days, and ICU costs.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
 3. I understand the subcutaneous insulin order set and guidelines.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
 4. I found the dosing chart easy to use.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
 5. Using the standardized insulin order set and guidelines made it easier for me to achieve tight glycemic control in my patients.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
 6. I found that using the insulin order set and guidelines saved me time.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
 7. I understand the literature regarding the importance and benefits of tight glycemic control for my patient.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
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NURSING SATISFACTION/EVALUATION TOOL

For the Standardized Subcutaneous Insulin Order Set and Guidelines

(similar to the subcutaneous order set presented in the [Layer Interventions, Advance Reliability section](#))

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Thank you for taking the time to complete this survey. Your input will help us as we evaluate the use of the standardized insulin order set and guidelines. Please select the choice that best describes your thoughts.

1. I am able to understand the standardized insulin order set and guidelines.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
2. I am able to implement and carry out all components of the insulin order set and guidelines.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
3. Using the insulin order set and guidelines, I made less phone calls to the physician.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
4. I found that using the standardized order set leads to improved glucose monitoring.
 Strongly disagree Somewhat disagree Undecided Somewhat agree Strongly agree
5. Using the insulin order set/guidelines, do you think the patient received better quality of care in terms of tight glycemic control?
 Yes No

If yes, this is evidenced by: _____

6. Do you believe that tight glycemic control is justified and/or beneficial?
 Yes No

Explain: _____

7. Do you have experience in tight glycemic control? Explain:

8. How did using the standardized insulin order set and guidelines impact your workload on the floor?

Explain: _____

Comments: _____

PATIENT SATISFACTION/EVALUATION TOOL

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(Interview questions for nurse to ask patient prior to discharge)

Please do not use as a handout. Use as an interviewing guide to assess the patient's knowledge and thoughts.

1. How long have you had diabetes?
2. Do you know what hemoglobin A1c is?
3. Is the information you received in the hospital different than the information you received previously?
 Yes No
4. Reason for admission: blood sugar related not blood sugar related

Identifying questions concerning activities prior to admission:

5. Have you attended outpatient diabetes education in the past 3 years?
 Yes No
6. If so, when? _____ where? _____
7. In the year prior to this admission, were you under the care of a physician for diabetes?
 Yes No
8. If so, who? _____
9. What was your highest blood sugar reading the month prior to this admission?
10. What was your lowest blood sugar reading the month prior to this admission?

Perception of care concerning activities during admission:

1. Do you feel your blood sugars were under control during this hospital stay?
 Yes No
(Check chart for range _____)
2. During your stay, did you feel the staff was knowledgeable regarding your diabetes care?
 Yes No
3. During your stay, were you offered information about diabetes? Yes No
4. During your stay, did you receive information on nutrition? Yes No
5. Was outpatient diabetes education made available to you? Yes No
6. For this visit, what is your perception of your overall care at our facility?
EXCELLENT VERY GOOD GOOD FAIR POOR
7. For this visit, what is your perception of your overall diabetes care?
EXCELLENT VERY GOOD GOOD FAIR POOR
8. During this hospital stay, what concerns, if any, did you have regarding your diabetes care?