Preconception Counseling for Women with Diabetes Mellitus

Section 1. Your Clinical Role and Experience
The questions in this section will give us a better understanding of your clinical role and experience. Please fill in the following information or click on the most appropriate choice.

Page 1 - Question 1 - Yes or No
Are you a Certified Diabetes Educator (CDE)?

☐ Yes
☐ No

Page 1 - Question 2 - Choice - Multiple Answers (Bullets)
Are you employed by, or work for, a diabetes education program that is certified or approved by any of the following organizations? (Please check all that apply).

☐ American Diabetes Association
☐ Utah Diabetes Prevention and Control Program
☐ American Association of Diabetes Educators
☐ My program is not currently certified
☐ Not applicable
☐ Other, please specify

Page 1 - Question 3 - Choice - Multiple Answers (Bullets)
Which of the following best describes your profession? (Check all that apply)

☐ Diabetes Educator
☐ Dietitian
☐ Nurse Practitioner
☐ Pharmacist
☐ Physician
☐ Physician Assistant
☐ Physical Therapist
☐ Registered Nurse
☐ Social Worker
☐ Other, please specify
If you answered "Physician" in Question 3, what is your specialty? Otherwise, please skip to Question 5.

- Endocrinology
- Family Practice
- Internal Medicine
- Obstetrics/Gynecology
- Ophthalmology or Optometry
- Pediatrics
- Other, please specify

What is your highest level of education?

- Associates
- Bachelors
- Masters
- Doctorate
- PharmD
- Medical Doctor
- Doctor of Osteopathy
- Other, please specify

How long have you been providing diabetes education services?

- Less than 5 years
- 5-9 years
- 10-14 years
- 15 years or more
- Not applicable; I do not provide diabetes education
- Other, please specify

What is your age?

- Less than 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75 or over
Section 2. Your Clinical Setting
The next set of questions will help us understand the clinical setting in which you work, and the number of women you typically see in your practice.

What is the zip code for your place of work?

Which of the following describes the place or places where you work? (Check all that apply).

- Private Practice
- Family Practice
- Hospital-based Clinic (Inpatient)
- Hospital-based Clinic (Outpatient)
- OB/GYN Clinic
- Community Health Center
- Internal Medicine
- Endocrinology Clinic
- Pediatric Clinic
- Pharmacy
- Diabetes Clinic
- Other, please specify

The next four questions (Questions 10-13) ask about your clinical environment. If you do not work in a clinic and/or do not see patients with diabetes or gestational diabetes, please skip to Question 14.

In a typical week, what is the total number of patients you see in your clinic who have diabetes mellitus?

In a typical week, what is the number of women you see with diabetes mellitus who are of reproductive age (i.e., aged 13-49)?

In a typical week, how many women do you see with diabetes mellitus who are between the ages of 13 and 17?

In a typical week, how many women do you see who have gestational diabetes?
Section 3. Preconception Counseling
This is the last section. Please answer these questions with the following definition in mind:
Preconception counseling for women with diabetes is defined as education provided to women emphasizing the
importance of making healthy lifestyle choices and obtaining good blood sugar control prior to conception.

In your work, do you provide preconception counseling for women of reproductive age (13-49) who have diabetes? (If you
answer "Yes" to this question, please continue. Otherwise, please skip to Question 18).

- Yes. Continue to next question.
- No. Skip to Question 18.
- Not applicable. Skip to Question 18.

Among women you treat, who are of reproductive age and have diabetes, what is the percentage for which you provide
preconception counseling?

- Less than 25%
- 25-49%
- 50-74%
- 75-99%
- I provide preconception counseling to all women I treat who have diabetes and are of reproductive age
- Not applicable

On average, when you provide preconception counseling, how long do you spend talking about it during the patient's
visit?

- Less than 2 minutes
- Between 3-5 minutes
- Between 6-9 minutes
- 10 minutes or more
- Not applicable
- Other, please specify

How frequently do you provide preconception counseling to women with diabetes who are of reproductive age?

- Never
- At a patient's initial visit only
- At every visit
- Every 6 months
- Annually
- Every 2 years
- Only when a woman requests it
- Not applicable
- Other, please specify
In your clinical practice, how difficult would you say it is to provide preconception counseling?

- Very difficult
- Moderately difficult
- A little difficult
- Not difficult at all
- Not applicable

In your practice, which of the following factors makes it challenging for you to provide preconception counseling to women with diabetes? Please check all that apply.

- It is not part of your job description
- Patients often refuse this information
- It conflicts with religious beliefs of the patient
- It doesn't cross your mind
- A doctor's order is needed to provide this type of counseling
- You don't have enough time
- It conflicts with your personal beliefs regarding contraception
- There is no mechanism in place to prompt or remind you
- There are no educational materials available
- You do not have enough training in this area
- Preconception counseling is not reimbursed
- You feel uncomfortable or embarrassed discussing it
- It is not encouraged by upper management
- Parental consent is necessary to counsel a minor (less than 18)
- It is not part of diabetes guidelines or practice recommendations
- Most of your patients are young and not of reproductive age
- Most of your patients are older and not of reproductive age
- Not applicable
- Other, please specify

What would make it easier for you to provide preconception counseling to women with diabetes in your practice? Please feel free to comment openly.

If you do provide preconception counseling, what materials (e.g., videos, DVDs, websites, contacts, printed materials) do you use when counseling a woman regarding preconception care?
You have completed this questionnaire. Thank you for your time. Your willingness to help us understand this important topic is greatly appreciated.

If you would like to receive the results regarding the outcome of this study, please e-mail dwinmill1@msn.com and type "PCC " in the subject line. The results will be made available to you upon completion. Also, if you would like to receive the patient handout to be developed in conjunction with this study, you may request this information by sending an e-mail dwinmill1@msn.com and type "PT HANDOUT" in the subject line. Again, Thank You!!!