Blanchard MH, Ramsey PS, Gala RB, Gyamfi-Bannerman C, Srinivas SK, Hernandez-Rey AE. Impact of the Medical Liability Crisis on Postresidency Training and Practice Decisions in Obstetrics-Gynecology. J Grad Med Educ. 2012;4(2):190-195.

Assessment of Obstetrics & Gynecology Residents Liability/Practice Decisions Survey

1. What is your gender? (mark circle) O Female O Male 2. What is your current age? (mark circle) O 25 – 29 yrs old O 30 – 34 yrs old O 40 - 44 yrs old O 35 – 39 yrs old O 45 - 49 yrs old O 50 – 54 vrs old 3. What is your marital status? (mark circle) O Single O Single with significant other O Separated/Divorced O Married 4. If married, is your spouse a(n): O Physician, non-OB/Gyn O Physician, OB/Gyn O Other health professional (e.g., RN, CRNA, PT/OT, etc.) O Other professional (e.g., lawyer, teacher, etc.) O Other 5. Where is your current training program located? (mark circle) O AL O AK O AZ O AR O CA O CO O CT O DE O GA ΟHI O IA O ID OIL O IN O KS O KY O MA O MD O ME O MI O MN O MO O MS O MT O ND O NE O NH O NY O NJ O NM O NY O OH O SC O SD O OR O PA O RI O TN O TX O UT O VT O WA O WI O WV O WY O District of Columbia O Armed Forces Nature/ location of the hospital setting where you are currently in training? (mark 6. circle) O University Program-urban area O University Program-rural area O Community Program-urban area O Community Program-rural area O Military Program O Other: _____

7. Are you currently planning to pursue post-residency training? (mark circle)

- O Yes
- O No
- O Not sure

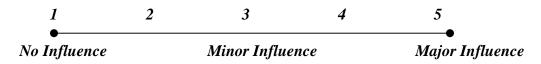
O FL

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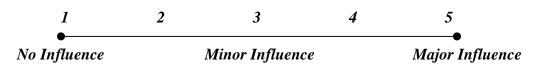
O OK

O VA

8. Was <u>medical liability</u> an issue when deciding to pursue training in *Obstetrics & Gynecology*? (circle number)



9. Was medical liability an issue when deciding on type of post-residency practice? (circle number)



10. In which of the following practice settings do you plan to practice in after completion of your training? (mark circle)

- O University Program urban area
- O University Program rural area
- O Private Practice in community-based teaching hospital urban area
- O Private Practice in community-based teaching hospital rural area
- O Private Practice in community-based hospital Urban area
- O Private Practice in community-based hospital Rural area
- O Private Practice Clinic based Urban area
- O Private Practice Clinic based Rural area
- O Military Practice
- 11. Please rate the importance each of the following factors will have on your choice of post-training practice: (circle number)
 - a) A particular institution:

1 1	2	3	4	5	
No Influence		Minor Influence	Major Influence		
b) A region of the country	y:				
1	2	3	4	5	
• No Influence	Minor Influence	• Major Influence			
c) Income potential:					
c) Income potential: 1	2	3	4	5	

d) Proximity	to a me	tropolitan a	area:						
, J	1	2		3	4	4	5		
No I	• Influenc	e	Mino	or Influence	е	Majo	-● r Influence		
e) Rural setti	ing: 1	2		3	4	2	5		
No In	nfluence	2	Mino	or Influenc	e	Majo	- r Influence		
f) The status	of the n	nedical liab	oility crisis	in that part	icular state	:			
,	1	2	2	3	4		5		
No In	nfluence	2	Minor Influence			Major Influence			
g) The cost of	f liabilit	y insurance	e in a partic	cular state:					
	1	2		3	4	5	5		
No Influence			Mino	Minor Influence			Major Influence		
h) The option	to be a	salaried en	nployee an	d have you	r malpractio	ce insuranc	e paid:		
	1	2		3	4		5		
No Influence		Minor Influence							
No Inj	fluence		Mino	r Influence	?	Majo	-• r Influence		
<i>No Inj</i> i) The opportun		ork with m		-		Majo	-• r Influence		
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12.

13. Based on *medical liability concerns*, are there any states which you <u>are not</u> considering for a post-residency job in OB/GYN? (mark all that apply)

considering for a post residency job in OD/O II() (main an inat apply)									
O AL	O AK	O AZ	O AR	O CA	O CO	O CT	O DE	O FL	
O GA	ΟHI	O IA	O ID	O IL	O IN	O KS	O KY	O LA	
O MA	O MD	O ME	O MI	O MN	O MO	O MS	O MT	O NC	
O ND	O NE	O NH	O NY	O NJ	O NM	O NY	O OH	O OK	
O OR	O PA	O RI	O SC	O SD	O TN	O TX	O UT	O VA	
O VT	O WA	O WI	O WV	O WY					

O District of Columbia

O Armed Forces

14. Have you previously been warned or advised not to practice in your current location? (mark circle)

O Yes

O No

14b. If you answered yes, which of the following reasons were stated? (mark circle)

- O Medical liability concerns
- O Saturated physician market
- O Reimbursement concerns
- O Other: _____
- **15.** Are you planning on limiting the type and scope of your practice due to the current medico-legal liability environment? (mark circle)
 - O Yes
 - O No
 - O Undecided

15b. If you answered yes, how will you limit your practice? (mark circle)

- O Low risk Obstetrics and Gynecology
- O Gynecology only
- O Office Gynecology only
- O Will be entering sub-specialty training
- 16. Have you ever been named in a medico-legal lawsuit related to the practice of OB/GYN? (mark circle)
 - O Yes
 - O No
 - O Named, but dropped

16b. If you answered yes to question 16, then please explain outcome. (mark circle)

- O Case was decided by jury verdict
- O The case was settled before a verdict was reached
- O The case is still ongoing

- 17. During your residency training, have you received any formal training regarding medical liability risk management [Avoidance of a lawsuit]? (mark circle) O Yes
 - O No
 - O Not sure
- 18. During your residency training, have you received any formal education regarding "next steps" once you have been named in a lawsuit? (mark circle)
 - O Yes
 - O No
 - O Not sure