

### Case 5:

- A 71 year-old man with hypertension, treated with an ace inhibitor, and benign prostatic hyperplasia.
- He quit tobacco 30 years ago.
- Blood pressure is 136/80, pulse 70.
- Total cholesterol is 178 mg/dL, triglycerides 190 mg/dL, HDL 44 mg/dL, and LDL 96 mg/dL (after trial of diet and exercise).

1. I am likely to prescribe a statin.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

2. If you did start a statin in this patient, what would be your LDL target (market the answer that is closest)?

1	2	3	4	5
<70 mg/dL	<100 mg/dL	<130 mg/dL	<160 mg/dL	N/A

3. Without using a risk calculator, what is your best single estimate (nearest % point) of this patient's 10-year cardiovascular risk?

Approximately a \_\_\_\_\_% 10-year risk of a cardiovascular event

### Contact Information

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### Part C: Decision Support

The following questions pertain to treatment decisions regarding primary prevention of coronary artery disease  
Please circle your response below each statement

1. I calculate 10-year cardiovascular risk for my patients to assist with treatment planning.

1	2	3	4	5
Never	Almost Never	Sometimes	Almost always	Always

2. The following factors would motivate me to use (or continue to use) information about 10-year cardiovascular risk in my treatment planning:

Please rank the following from 1-4 in order of 1 (most important) to 4 (least important)

\_\_\_\_\_ Better, high-quality clinical trial evidence about the risks and benefits of using this information

\_\_\_\_\_ Treatment guidelines from my specialty society

\_\_\_\_\_ A computerized decision support tool guiding me how to use this information

\_\_\_\_\_ More education from my peers or local medical society about the risks and benefits of using this information

3. I would allow a trained nurse or other trained member of my clinical support staff to address the issue of primary prevention for coronary artery disease with my patients through the use of a standard protocol that I approve.

1	2	3	4	5
Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree

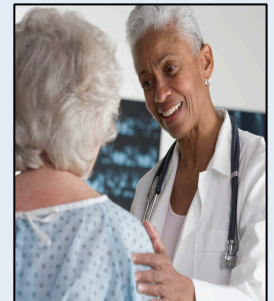
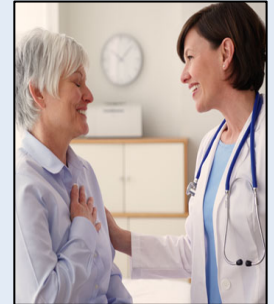
### Thank you for your participation!

Do not prescribe statins

Please exclude my responses to the vignettes

## A 5-minute Cardiovascular Disease Prevention Survey

Your practice makes a difference for your patients



\$20 enclosed  
Please return by June 20, 2012



University of Michigan  
Health System

Dear Colleague:

Our group of physician researchers from the University of Michigan (UM) is conducting a national survey examining statin prescription practices for coronary artery disease prevention in the adult ambulatory care setting. This study has been granted approval by the Institutional Review Board at UM.

We obtained your name from a random selection process of AMA Physician Masterfile. We are interested in clinical practice patterns of office-based internal medicine and family physicians in the United States.

Your participation in this survey is entirely voluntary, and your responses to the survey questions will be kept confidential. Your information will be stored anonymously and securely. Your responses indicate your consent to participate.

Please send your survey back in the self-addressed stamped envelope by June 20, 2012. If you do not prescribe statins, please fill out Part A and mark the "do not prescribe" box on the back of the survey. If you choose not to participate, please check the "exclude" box on the back of the survey. All survey recipients may keep the \$20 bill as a token of our gratitude.

## Part A: Your Background

Please check the appropriate box

1. What is your degree credential?  
 M.D or D.O Family Medicine  
 M.D. or D.O. Internal Medicine
2. Are you subspecialty trained?  
 No  If yes, what field? \_\_\_\_\_
3. How many years have you been practicing in an outpatient setting (after post-graduate training)?  
 <3 years  3-5 years  5-10 years  
 >10 years  N/A
4. How many outpatients (on average) do you see in a week?  
 <20 patients  20-39 patients  40-59 patients  
 60-79 patients  >80 patients  N/A

Please continue to middle insert

## Part B: Clinical Vignettes

We would like to assess your current clinical practice  
Please circle your response below each statement

### Case 1:

- A 52 year-old woman with no chronic medical conditions, no history of tobacco smoking or family history of cardiovascular disease.
- Blood pressure 128/82, pulse 72, BMI 30.
- Total cholesterol is 260 mg/dL, triglycerides 145 mg/dL, HDL 56 mg/dL, and LDL 175 mg/dL (after trial of diet and exercise).

1. I am likely to prescribe a statin.  
1 Strongly Disagree 2 Disagree 3 Neither Agree nor Disagree 4 Agree 5 Strongly Agree
2. If you did start a statin in this patient, what would be your LDL target (mark the answer that is closest)?  
1 <70 mg/dL 2 <100 mg/dL 3 <130 mg/dL 4 <160 mg/dL 5 N/A
3. Without using a risk calculator, what is your best single estimate (nearest % point) of this patient's 10-year cardiovascular risk?  
Approximately a \_\_\_\_\_% 10-year risk of a cardiovascular event

### Case 2:

- A 70 year-old man with hypertension, treated with a thiazide, and osteoarthritis. He quit tobacco 40 years ago.
- Blood pressure is 136/80, pulse 70.
- Total cholesterol is 208 mg/dL, triglycerides 190 mg/dL, HDL 42 mg/dL, and LDL 128 mg/dL (after trial of diet and exercise).

1. I am likely to prescribe a statin.  
1 Strongly Disagree 2 Disagree 3 Neither Agree nor Disagree 4 Agree 5 Strongly Agree
2. If you did start a statin in this patient, what would be your LDL target (mark the answer that is closest)?  
1 <70 mg/dL 2 <100 mg/dL 3 <130 mg/dL 4 <160 mg/dL 5 N/A
3. Without using a risk calculator, what is your best single estimate (nearest % point) of this patient's 10-year cardiovascular risk?  
Approximately a \_\_\_\_\_% 10-year risk of a cardiovascular event

### Case 3:

- A 55 year-old woman with hypertension, treated with a calcium channel blocker, and obesity.
- She smokes 1 pack of cigarettes daily.
- No family history of cardiovascular disease or diabetes.
- Blood pressure is 128/82, pulse 72, BMI 32.
- Total cholesterol is 200 mg/dL, triglycerides 125 mg/dL, HDL 40 mg/dL, and LDL 135 mg/dL (after trial of diet and exercise).

1. I am likely to prescribe a statin.  
1 Strongly Disagree 2 Disagree 3 Neither Agree nor Disagree 4 Agree 5 Strongly Agree
2. If you did start a statin in this patient, what would be your LDL target (mark the answer that is closest)?  
1 <70 mg/dL 2 <100 mg/dL 3 <130 mg/dL 4 <160 mg/dL 5 N/A
3. Without using a risk calculator, what is your best single estimate (nearest % point) of this patient's 10-year cardiovascular risk?  
Approximately a \_\_\_\_\_% 10-year risk of a cardiovascular event

### Case 4:

- A 52 year-old man with hypertension, treated with a thiazide.
- He smokes 1 pack of cigarettes daily.
- No family history of cardiovascular disease.
- Blood pressure is 128/82, pulse 72.
- Total cholesterol is 145 mg/dL, triglycerides 125 mg/dL, HDL 30 mg/dL, and LDL 90 mg/dL (after trial of diet and exercise).

1. I am likely to prescribe a statin.  
1 Strongly Disagree 2 Disagree 3 Neither Agree nor Disagree 4 Agree 5 Strongly Agree
2. If you did start a statin in this patient, what would be your LDL target (mark the answer that is closest)?  
1 <70 mg/dL 2 <100 mg/dL 3 <130 mg/dL 4 <160 mg/dL 5 N/A
3. Without using a risk calculator, what is your best single estimate (nearest % point) of this patient's 10-year cardiovascular risk?  
Approximately a \_\_\_\_\_% 10-year risk of a cardiovascular event

Please continue on the back