

Additional file 1: Questionnaire for physicians working in the outpatient sector.

1	<p>How many MRSA positive patients have you seen in your practice in the last 12 months? (If you don't know the exact number, please estimate)</p> <p>_____</p>	Practice
2	<p>How relevant is MRSA with respect to your patients? Please give your answer on a scale from 0-10. "0" indicating "not relevant at all", "10" indicating "very relevant".</p> <p>0 1 2 3 4 5 6 7 8 9 10</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>not all relevant very relevant</p>	Attitude
3	<p>Which are your sources of information on MRSA?</p> <p>Medical journals <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Recommendations of the National Association of Statutory Health Insurance Physicians ("Kassenärztliche Bundesvereinigung") <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Recommendations of the Robert Koch Institute (RKI) (the central federal institution responsible for disease control and prevention) <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Recommendations of the Medical Chamber ("Ärztchammer") <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Recommendations of a MRSA network <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Conversation with colleagues <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p> <p>Other websites <input type="checkbox"/>Never <input type="checkbox"/>Rarely <input type="checkbox"/>Sometimes <input type="checkbox"/>Frequently <input type="checkbox"/>Very frequently</p>	Information
4	<p>Provided you are familiar with the recommendations for MRSA in the outpatient sector of the RKI, the "Kassenärztliche Bundesvereinigung" or a MRSA network - do you agree with these recommendations?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>In part <input type="checkbox"/>No <input type="checkbox"/>I don't know these recommendations <input type="checkbox"/>Don't know</p>	Recommendations
5	<p>Are you of the opinion that there is enough information available about MRSA in the outpatient sector?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>Don't know</p>	Information
6	<p>Are you a member of a MRSA quality circle or network?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>Does not exist in my region</p>	Practice
7	<p>Do you have a "MRSA certificate" from the National Association of Statutory Health Insurance Physicians?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>	Practice
8	<p>Do you know the reimbursement possibilities for the screening of patients at risk and the therapy of MRSA carriers?</p> <p><input type="checkbox"/>Yes <input type="checkbox"/>No</p>	Knowledge
9	<p>Which of the following criteria define a patient at risk according to the National Association of Statutory Health Insurance Physicians? (Only two answers are correct)</p> <p><input type="checkbox"/>Hospitalization > 4 days in the last 6 months and MRSA positivity in case history</p>	Knowledge

	<input type="checkbox"/> Hospitalization > 4 days in the last 6 months <input type="checkbox"/> Living in a nursing home <input type="checkbox"/> Hospitalization > 4 days in the last 6 months and the presence of at least two more risk factors (inserted catheter, need for care, chronic wounds, dialysis dependency, antibiotic therapy in the last 6 months) <input type="checkbox"/> Antibiotic therapy in the last 4 weeks <input type="checkbox"/> Don't know	
10	How many patients have you screened for MRSA in your practice in the last 12 months? (If you don't know the exact number, please estimate) <hr/>	Practice
11	A decolonization therapy has been thoroughly applied. From when on can you define your patient as permanently MRSA negative? (Only one answer is correct) <input type="checkbox"/> Negative swab 4 days to 4 weeks after completion of the decolonization therapy. <input type="checkbox"/> Negative swab 3 months after completion of the decolonization therapy. <input type="checkbox"/> Negative swabs at 2 time points: 3 to 6 months and 11 to 13 months after completion of the decolonization therapy. <input type="checkbox"/> Negative swabs at 2 time points: 6 to 12 months and 22 to 24 months after completion of the decolonization therapy.	Practice
12	How useful do you think is the application of a decolonization therapy in the outpatient sector in general? <input type="checkbox"/> Always useful <input type="checkbox"/> Often useful <input type="checkbox"/> Sometimes useful <input type="checkbox"/> Never useful	Attitude
13	How many MRSA positive patients have you already treated with a decolonization therapy? (If you don't know the exact number, please estimate) <hr/>	Practice
14	If you have already used decolonization therapies: How often do you estimate the decolonization therapy to have been successful? <input type="checkbox"/> Up to 0% <input type="checkbox"/> Up to 33% <input type="checkbox"/> Up to 66% <input type="checkbox"/> Almost 100% <input type="checkbox"/> Don't know	Practice
15	Are there, in your opinion, any difficulties concerning decolonization therapy in the outpatient sector? (Multiple answers possible) <input type="checkbox"/> None <input type="checkbox"/> Patients cannot procure the financial contribution necessary. <input type="checkbox"/> Patients and family fail at the practical implementation. <input type="checkbox"/> Staff at the nursing home fails at the practical implementation. <input type="checkbox"/> Other: _____ <hr/>	Practice
16	How often do you estimate does the hospital actually report a positive MRSA finding to you? In the discharge letter <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Frequently <input type="checkbox"/> Very frequently Additionally by phone <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Frequently <input type="checkbox"/> Very frequently	Information
17	How often do you estimate to become informed about a decolonization therapy that was started at the hospital? <input type="checkbox"/> Never <input type="checkbox"/> Rarely <input type="checkbox"/> Sometimes <input type="checkbox"/> Frequently <input type="checkbox"/> Very frequently	Information
18	Do you have specific requests concerning the communication between the inpatient and outpatient sector with regard to MRSA? <hr/>	Information

19	<p>Reimbursement for MRSA specific therapy was introduced on 31.03.2012; it allows reimbursement for: (multiple answers are possible)</p> <ul style="list-style-type: none"> <input type="checkbox"/>Determination of MRSA status for all patients > 60 years <input type="checkbox"/>Therapy and care for a patient at risk who is MRSA positive or for a MRSA positive contact person <input type="checkbox"/>MRSA status of a patient at risk <input type="checkbox"/>Participation in a MRSA case conference or a regional MRSA network conference <input type="checkbox"/>Remuneration of services is fixed, without upper limit and outside the patient's overall remuneration. ("außerhalb der morbiditätsbedingten Gesamtvergütung") 	Knowledge
20	<p>I am entitled to the reimbursement of the above mentioned items.</p> <ul style="list-style-type: none"> <input type="checkbox"/>Yes <input type="checkbox"/>No <input type="checkbox"/>Don't know 	Reimbursement
21	<p>Costs for screening of patients at risk and their subsequent treatment can be claimed. How satisfied are you with the amount of the reimbursement of the Statutory Health Insurance for the above mentioned items?</p> <ul style="list-style-type: none"> <input type="checkbox"/>Very satisfied <input type="checkbox"/>Satisfied <input type="checkbox"/>Unsatisfied <input type="checkbox"/>Don't know 	Reimbursement
22	<p>Which adjustments do you recommend for reimbursement?</p> <p>_____</p>	Reimbursement
23	<p>You are a physician working in the outpatient sector. Which is your specialization?</p> <ul style="list-style-type: none"> <input type="checkbox"/>General practitioner (GP) <input type="checkbox"/>Internal medicine (working as GP) <input type="checkbox"/>Internal medicine <input type="checkbox"/>Dermatology <input type="checkbox"/>Urologist <input type="checkbox"/>Other 	Demography
24	<p>Your gender is:</p> <ul style="list-style-type: none"> <input type="checkbox"/>male <input type="checkbox"/>female 	Demography
25	<p>Your age in years?</p> <p>_____</p>	Demography
26	<p>For how many years have you been working as a physician in the outpatient sector?</p> <p>_____</p>	Demography