

**Program on Medicine and Religion**  
**Farr Curlin, MD, Director**

Survey Methodology Report

**Title:** OB-GYNs Approaches to Sexual and Reproductive Health Care: A National Survey

**Purpose:**

1. To obtain national estimates of OBGYN physician attitudes, knowledge and practices concerning ethically and morally challenging medical issues related to their practice.
2. To understand the relationship between physicians' religiosity and these attitudes, knowledge and practices.

**Population:** American physicians listing OBGYN as their first specialty and listing no subspecialty

**Source of Sample Frame:** American Medical Association Physician Master File

**Sample Design:** Sample frame was sorted into 4 strata: (1) those with South Asian last names, (2) those with Arabic last names, (3) those with Jewish last names and (4) everyone else. Demographers were consulted to obtain lists of last names. Last name groups were used as proxy measures of the following religious groups we wished to over-represent in our sample – Hindu's, Muslims, and Jews. A total of 1,800 cases were fielded. The following table gives the breakdown in terms of frequency and percent of cases within each stratum

Stratum	Freq.	Percent	Cum.
1	180	10.00	10.00
2	225	12.50	22.50
3	180	10.00	32.50
4	1,215	67.50	100.00
Total	1,800	100.00	

**Questionnaire Development:** Questionnaire topics were developed through qualitative interviews with OBGYN physicians and consultation with experts (prominent OBGYN physician researchers and ethicists). Cognitive interviews on selected questions were conducted with a small group of physicians around the country. Questionnaires were pretested on OBGYN physicians at university of Chicago hospital. A copy of the final questionnaire is attached as an appendix. Topics are listed below.

**Topics:**

1. Contraception and Family Planning
2. Emergency Contraception
3. Prenatal Screening and Testing for Genetic Abnormalities
4. Abortion and Maternal Fetal Medicine
5. Addressing Patient Sexuality and Sexual Practices
6. Values and Professionalism
7. Practice Characteristics
8. Religious Characteristics
9. Background Characteristics

**Data collection:** Questionnaires were administered by mail according to the following schedule.

Advance letter: October 22<sup>nd</sup>, 2008

First questionnaire: October 30<sup>th</sup>, 2008

Post card reminder: November 6<sup>th</sup>, 2008

Second questionnaire: December 8<sup>th</sup>, 2008

Third questionnaire: January 8<sup>th</sup>, 2009

**Data Processing:** Questionnaires were receipted once they came in. Each questionnaire was then double-entered into an Excel spreadsheet. After the data entry was completed the two versions were compared with one another using an Excel function and discrepancies were checked against the hard copy.

**Response rates:** Of the 1800 cases fielded, 38 were declared out of scope because surveys were returned after three attempts were made to contact respondents at different addresses. Two additional surveys were declared out of scope when we received information that physician had retired and in another case that the physician had moved out of the country. Completed cases, response rates and refusal rates for the 1760 in-scope cases are shown in the following table.

Strata	Refusal	Completed Case	Total
1	68 38.86	107 61.14	175 100.00
2	101 45.70	120 54.30	221 100.00
3	56 31.82	120 68.18	176 100.00
4	381 32.07	807 67.93	1,188 100.00
Total	606 34.43	1,154 65.57	1,760 100.00

**Weighting:** A base weight was constructed for each stratum by dividing the stratum's sample frame total by the number of cases sampled for fielding minus the number of ineligible cases (inverse of the selection probability within stratum). The base weight was adjusted for nonresponse within eight post-stratification adjustment cells formed by the combination of name stratum and whether the physician attended a medical school inside or outside of the US. A factor was calculated for each of these eight cells by taking the inverse of the response rate for each cell. The final weight was the product of the base weight and the nonresponse adjustment factor. The sum of the final weights across all 1,154 respondents is equal to the sample frame total of 34689. Detail is presented in the two tables below.

CALCULATE BASE WEIGHT				
	Selections	Number in Frame	Selection Probability	Base Weight
South Asian	175	736	0.238	<b>4.21</b>
Arabic	221	1207	0.183	<b>5.46</b>
Jewish	176	1235	0.143	<b>7.02</b>
Everyone else	1,188	31511	0.038	<b>26.52</b>
<b>TOTAL</b>	<b>1760</b>	<b>34689</b>		

CALCULATE POSTSTRATIFICATION ADJUSTMENT						
	Targeted	Obtained	Response Rate (RR)	1/RR	Final Weight	Obtained X Final Weight
<b>US/Can. Med School</b>						
South Asian	47	32	0.68	<b>1.47</b>	<b>6.177</b>	197.6685714
Arabic	102	56	0.55	<b>1.82</b>	<b>9.948</b>	557.0769231
Jewish	155	106	0.68	<b>1.46</b>	<b>10.261</b>	1087.642045
Other	1,075	738	0.69	<b>1.46</b>	<b>38.637</b>	28513.74158
<b>Foreign Med School</b>						
South Asian	128	75	0.59	<b>1.71</b>	<b>7.178</b>	538.3314286
Arabic	119	64	0.54	<b>1.86</b>	<b>10.155</b>	649.9230769
Jewish	21	14	0.67	<b>1.50</b>	<b>10.526</b>	147.3579545
Other	113	69	0.61	<b>1.64</b>	<b>43.439</b>	2997.258418
Totals	1760	1154	0.66			<b>34689</b>

**File construction:** After the data were cleaned a self-documented Stata file was constructed with variable names matching the question numbers on the questionnaire and variable and value labels also watching matching the questionnaire.

**Methodological experiments:** Two methodological experiments were conducted to inform us about future data collection efforts. The first experiment assigned cases at random either to a standard postcard follow-up after the first mailing or to a telephone follow-up. The telephone follow-up was conducted by a third-party vendor, VoiceLogic, Inc. The second study examined the advantage of using priority mail vs. standard mail at the third questionnaire mailing.

**Postcard vs. Phone follow-up:** Cases in sample 4 (non-Asian, non-Arabic, non-Jewish names) were randomly assigned to either the traditional postcard reminder condition or to a telephone reminder condition. For the telephone reminder we used a vendor named VoiceLogic. They called the doctors' offices and either left a message on the answering machine or talked directly to whoever answered the doctor's phone describing the envelope with the questionnaire and asking the party to make sure that the doctor opened the envelope. Note that cases in samples 1, 2, and 3 were all assigned to the phone follow-up, and were not included in the experiment, because we assumed that this would be the better mode and we were interested in maximizing the response rates in these samples.

**Results:** As shown in the table below, the response rate for the phone call follow-up group was slightly higher than for the postcard follow-up group but the results were not statistically significant. Therefore, we conclude that the phone call, as implemented in this study (by third party vendor) was no more effective than the standard post card.

	Follow-up		Total
	Postcard	Phone	
Nonrespondent	198	183	381
	33.39	30.76	32.07
Respondent	395	412	807
	66.61	69.24	67.93
Total	593	595	1,188
	100.00	100.00	100.00

Pearson  $\chi^2(1) = 0.9453$  Pr = 0.331

**Express mail vs. Regular mail final questionnaire mailing:** The standard recommendation for a final mailing is to send the questionnaire by express mail or registered mail. The reasoning is that this gets the respondent's attention and also conveys the seriousness of the researchers. For the third mailing we divided respondents in sample 4 into two groups at random and assigned them to receive the final questionnaire either by priority mail or by using the standard green envelope we had used for the first two questionnaire mailings. We started by dividing the sample 4 respondents into 2 equal groups but found that we had more priority mail envelopes than we had green envelopes. When we ran out of green envelopes we used priority mail envelopes for the remaining respondents. Since the remaining respondents constituted a random subsample of sample 4 respondents the switch to priority mail did not bias the assignment. However, the envelope type samples were not longer of equal size. Note that, as with the follow-up experiment, cases in samples 1, 2, and 3 were all assigned to the priority mail condition and were not included in the experiment, because we assumed that this would maximize the response rates for these samples.

**Results:** The following table shows that the response rates for the third mailing from the two types of envelopes were essentially equal, showing no advantage of using priority mail. A potential confounding factor is that both the standard and the priority mail envelopes were stamped on the outside in red ink with the text "Earn \$30 for your Participation". We assume that the text was a motivating factor in the return of the questionnaire and cannot assess the pure effect of envelope type.

	Envelope type		Total
	Standard	Priority	
Nonrespondent	137	196	333
	84.57	84.48	84.52
Respondent	25	36	61
	15.43	15.52	15.48
Total	162	232	394
	100.00	100.00	100.00

Pearson chi2(1) = 0.0005 Pr = 0.982

## Questionnaire vignette experiments:

We included three vignette experiments in the questionnaire. Questions 12, 14 and 15 were clinical scenarios in which characteristics of the patient were varied using a between-subjects design. In addition, all factors across all studies were made orthogonal to each other with one exception, due to a programming error. F3 (age of patient in question 14) was inadvertently confounded perfectly with f12 doctor's referral decision in question 15). Although we cannot do an empirical test we believe that this confound will not effect results for question 15

The generic versions of each of the three questions are listed below along with the text fills for each variable. Although the cells across studies were balanced perfectly in the target sample, non-response upset the perfect balancing. All things equal, nonresponse should not differ significantly across conditions. Chi-squared goodness-of-fit tests in which the average frequency across cells was fit to the distribution within cells for each study indicated that the distribution of obtained responses shown in the tables below differed only by chance (Q12: Chi-squared (3)= 1.65, ns; Q14: Chi-squared (7)= 2.45, ns; Q15: Chi-squared (31)= 12.59, ns).

12. A healthy [F1] year old [F2] woman presents for an annual exam. How likely would you be to: (A). Recommend screening for HIV, (B) Recommend screening for other sexually transmitted infections (apart from HIV).

Version	F1	F2	Freq
1	27	unmarried	306
2	36	married	286
3	36	unmarried	286
4	27	married	276

14. A [F3] year old married woman, [F4], requests in-hospital surgical sterilization (tubal ligation) after her upcoming childbirth. [F5] She has considered but declined other options for contraception. (A.) How likely would you be to *discourage* the patient from having the tubal ligation at this point in time? (B.) If the patient requests the surgery after your discussion, which of the following indicates how you would most likely respond?

Version	F3	F4	F5	Freq.
1	26	G2P1	Disagree	148
2	26	G2P1	Agree	149
3	26	G4P3	Disagree	138
4	26	G4P3	Agree	146
5	36	G2P1	Disagree	130
6	36	G2P1	Agree	151
7	36	G4P3	Disagree	149
8	36	G4P3	Agree	143

15 A 23 year old single graduate student presents to her OB/GYN and is found to be 8 weeks pregnant. She requests an abortion. The OB/GYN believes that to provide the abortion would violate [F6] [F7] [F8] standards. [F9] [F10] the patient why [F\_ADD] believes abortion is [F11] and [F12] her to another physician who will provide the abortion. In your judgment, how appropriate are the physicians' actions in this case?

Version	F6	F7	F8	F10	F12	Freq.
1	His	Professional	Moral	Tells	Refers	39
2	His	Professional	Moral	Tells	Refuses to refer	35
3	His	Professional	Moral	Does not tell	Refers	35
4	His	Professional	Moral	Does not tell	Refuses to refer	41
5	His	Professional	Ethical	Tells	Refers	41
6	His	Professional	Ethical	Tells	Refuses to refer	29
7	His	Professional	Ethical	Does not tell	Refers	34
8	His	Professional	Ethical	Does not tell	Refuses to refer	35
9	His	Personal	Moral	Tells	Refers	35
10	His	Personal	Moral	Tells	Refuses to refer	36
11	His	Personal	Moral	Does not tell	Refers	31
12	His	Personal	Moral	Does not tell	Refuses to refer	31
13	His	Personal	Ethical	Tells	Refers	25
14	His	Personal	Ethical	Tells	Refuses to refer	35
15	His	Personal	Ethical	Does not tell	Refers	36
16	His	Personal	Ethical	Does not tell	Refuses to refer	37
17	Her	Professional	Moral	Tells	Refers	42
18	Her	Professional	Moral	Tells	Refuses to refer	36
19	Her	Professional	Moral	Does not tell	Refers	34
20	Her	Professional	Moral	Does not tell	Refuses to refer	42
21	Her	Professional	Ethical	Tells	Refers	38
22	Her	Professional	Ethical	Tells	Refuses to refer	37
23	Her	Professional	Ethical	Does not tell	Refers	40
24	Her	Professional	Ethical	Does not tell	Refuses to refer	35
25	Her	Personal	Moral	Tells	Refers	34
26	Her	Personal	Moral	Tells	Refuses to refer	34
27	Her	Personal	Moral	Does not tell	Refers	38
28	Her	Personal	Moral	Does not tell	Refuses to refer	41
29	Her	Personal	Ethical	Tells	Refers	39
30	Her	Personal	Ethical	Tells	Refuses to refer	34
31	Her	Personal	Ethical	Does not tell	Refers	40
32	Her	Personal	Ethical	Does not tell	Refuses to refer	35

**Repair of Q12 experiment:** Another programming error resulted in a mistake in the text for F1 in the Q12 experiment. The contrast should have been between 27 and 65 year old instead of between 27 and 36 year olds. An attempt to rectify this was made by re-mailing to all respondents who received the 36- year-old age manipulation a one-page questionnaire that repeated the question but instead presented a 63 year old patient. No mention of the former version was made, except to say that there was a mistake in it. Since the re-mailing occurred several months after the data collection were finished it is unlikely that the doctors remembered the original version of the question.

Two mailings resulted in retrieving data from 249 of the 572 targeted respondents (response rate=44%). The response rate did not vary by physician age, gender or region. The extra data were appended to the data file as a new variable.



## APPENDIX A: Survey Questionnaire



THE CENTER FOR HEALTH AND THE SOCIAL SCIENCES AND  
THE MACLEAN CENTER FOR CLINICAL MEDICAL ETHICS AT  
THE UNIVERSITY OF CHICAGO

### **OB-GYN's Approaches to Sexual and Reproductive Health Care: A National Survey**

supported by grants from:  
The Greenwall Foundation  
The Templeton Foundation

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Dear Fellow Physician,

The attached questionnaire is part of a national survey of OB/GYN physicians we are conducting in order to better understand national variations in physician practices around sexual and reproductive health care.

You were selected with the aim of representing obstetricians nationwide, and for the study to be accurate, we need as many people selected as possible to respond. We would greatly appreciate it if you would take a moment to complete the questionnaire. When you have done so, please mail it back in the envelope provided.

The questionnaire takes about 20 minutes to complete. Your responses will be confidential and in publications from this study, your name will never be matched to your answers. If you prefer not to answer a question for any reason, you may skip it. However, we hope that you will give your best answer to every question. Please feel free to write additional comments on your questionnaire.

**As a fellow physician, I know how limited and valuable your time is. Although we cannot compensate you for your time, we have included a \$20 bill with the questionnaire as a token of our appreciation for your generous assistance.**

Again, thank you for your time and your participation in this important study.

Sincerely,

Farr Curlin, MD

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## CONTRACEPTION AND FAMILY PLANNING

1. In your clinical practice, do you encounter patients seeking contraceptive services?

- <sub>1</sub> Yes  
<sub>2</sub> No

2. For each of the following contraceptive methods, please indicate  
 i) whether you have any moral or ethical objections to using the method, and  
 ii) whether you would offer the method to your patients if they requested it.

	i) Do you have moral or ethical objections to this method?		ii) Would you offer to patients if they requested it?	
	Yes	No	Yes	No
A. Oral contraceptive pills	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
B. Progesterone implants and/or injections	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
C. Intrauterine devices (IUD)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
D. Diaphragms/cervical cap with spermicide	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
E. Condoms	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
F. Tubal ligation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

3. Please consider the following case: A 17-year-old college freshman presents to you seeking birth control pills and does not want her parents to know. How likely would you be to do each of the following:

	Very Likely	Somewhat Likely	Not very Likely	Not at all likely
A. Encourage her to abstain from sexual activity until she is older.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. Try to persuade her to involve one or both of her parents in this decision.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
C. Prescribe contraceptives without notifying her parents.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**The next questions are about natural family planning methods (the use of cervical mucus and/or basal body temperature assessment to prevent pregnancy):**

4. Of 100 couples who use natural family planning methods to prevent pregnancy, how many do you think will get pregnant over a year?

\_\_\_\_\_ expected pregnancies in 100 per year

5. As a method of family planning, would you say that natural family planning is ... (please check one):

- <sub>1</sub> the best option for most women  
<sub>2</sub> the best option for some women  
<sub>3</sub> a poor option for most women

## EMERGENCY CONTRACEPTION

6. Which of the following best describes your practice with respect to post-coital or emergency contraception?

Do you offer it ...

- <sub>1</sub> to all women you believe are at risk of unplanned pregnancy  
<sub>2</sub> only to women who tell you that they have had unprotected intercourse  
<sub>3</sub> only to victims of sexual assault  
<sub>4</sub> to nobody under any circumstance

7. Please indicate whether you agree or disagree with the following statements about how access to emergency contraceptive pills (EC) will affect women's sexual behaviors and reproductive outcomes.

Compared to women who are similar but do not have access to EC:	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly
A. Women who have access to EC will have lower rates of unintended pregnancy.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. Women who have access to EC will be less likely to use other contraceptive methods.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
C. Giving women or girls access to EC will cause them to initiate sexual activity at a younger age than if they did not have access to EC.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
D. Women who have access to EC will have, on average, more sexual partners.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

## PRENATAL SCREENING AND TESTING FOR GENETIC ABNORMALITIES

8. Which of the following best describes your clinical practice with respect to **serum and ultrasound screening for genetic abnormalities** in women age 20 to 30 with no personal or family history of genetic disease?

Do you ...

- <sub>1</sub> recommend screening  
<sub>2</sub> present information about screening but do not make a recommendation one way or the other  
<sub>3</sub> offer screening only if the woman requests it  
<sub>4</sub> not offer screening

9. Please indicate how likely you would be to offer amniocentesis to pregnant patients with the following characteristics:

	Very Likely	Somewhat Likely	Somewhat Unlikely	Very Unlikely
A. A 25 year old with negative serum and/or ultrasound screening for congenital defects	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. A 25 year old with positive serum and/or ultrasound screening for congenital defects	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
C. A 37 year old with negative serum and/or ultrasound screening for congenital defects	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
D. A 37 year old with positive serum and/or ultrasound screening for congenital defects	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**INFERTILITY AND THE USE OF ASSISTED REPRODUCTIVE TECHNOLOGIES**

10. For each of the following assisted reproductive technologies (ART), please indicate

- whether you have **moral or ethical objections** to the intervention, and
- whether you would **help a patient obtain it** (either by providing the technology yourself or by referring the patient to someone who would).

	i) Do you have moral or ethical objections to this method?		ii) Would you help a patient obtain the intervention?	
	Yes	No	Yes	No
A. Artificial insemination by husband sperm	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
B. Artificial insemination by donor sperm	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
C. In vitro fertilization with husband and wife gametes	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
D. In vitro fertilization with donor sperm and/or egg	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

11. Assuming that the patient has documented infertility and is able to pay for the treatment, please indicate whether you would

- discourage patients with the following characteristics from using ART, and
- whether you would help such patients obtain ART if asked.

Patient characteristics:	i) Discourage ART?		ii) Help patient obtain ART?	
	Yes	No	Yes	No
A. The patient is not married to her male sexual partner.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
B. The patient plans to be a single parent.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
C. The patient's sexual partner is female.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
D. The patient is 56 years old.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
E. The patient has HIV infection.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
F. The patient and her husband have five healthy biological children.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
G. The patient has a cardiopulmonary abnormality with an associated 25% risk of death in carrying a pregnancy to term.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**PLEASE CONSIDER THE FOLLOWING CASES:**

12. A healthy [F1] year old [F2] woman presents for an annual exam. How likely would you be to:

	<b>Very Likely</b>	<b>Somewhat Likely</b>	<b>Not very Likely</b>	<b>Not at all Likely</b>
A. Recommend screening for HIV	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. Recommend screening for other sexually transmitted infections (apart from HIV)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

13. A 24-year-old patient presents with left lower quadrant pain. Vaginal ultrasound reveals a 7-week ectopic pregnancy implanted in the fallopian tube, with fetal heart tones present.

	<b>Yes</b>	<b>No</b>
A. Assuming it was technically feasible and you had the appropriate surgical skills, would you be willing to perform a salpingostomy in this case?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
B. Assuming it was technically feasible and you had the appropriate surgical skills, would you be willing to perform a salpingectomy in this case?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
C. Do the policies of your hospital or employer limit the options you have for treating ectopic pregnancy in cases like this one?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

14. A [F3] year old married woman, [F4], requests in-hospital surgical sterilization (tubal ligation) after her upcoming childbirth. [F5] She has considered but declined other options for contraception.

A. How likely would you be to *discourage* the patient from having the tubal ligation at this point in time?

- <sub>1</sub> Very likely
- <sub>2</sub> Somewhat likely
- <sub>3</sub> Not very likely
- <sub>4</sub> Not at all likely

B. If the patient requests the surgery after your discussion, which of the following indicates how you would most likely respond?

- <sub>1</sub> You would provide the surgery yourself
- <sub>2</sub> You would refer the patient to another physician you believe would provide the surgery
- <sub>3</sub> You would neither provide the surgery yourself nor refer the patient to someone who would

15. A 23 year old single graduate student presents to her OB/GYN and is found to be 8 weeks pregnant. She requests an abortion. The OB/GYN believes that to provide the abortion would violate [F6] [F7] [F8] standards. [F9] [F10] the patient why [F\_ADD] believes abortion is [F11] and [F12] her to another physician who will provide the abortion.

In your judgment, how appropriate are the physicians' actions in this case?

- <sub>1</sub> Very appropriate
- <sub>2</sub> Somewhat appropriate
- <sub>3</sub> Somewhat **in**appropriate
- <sub>4</sub> Very **in**appropriate

**ABORTION AND MATERNAL FETAL MEDICINE**

16. In each of the following cases, please indicate  
 i) whether you have any ethical or moral objections to abortion in this case, and  
 ii) whether you would help the patient obtain the abortion if asked (either by providing the abortion yourself or by referring the patient to someone who would).

Clinical Scenario	i) Do you morally object to abortion in this case?		ii) Would you help the patient obtain the abortion if asked?	
	Yes	No	Yes	No
A. A 22-year-old single woman 6 weeks pregnant after failed hormonal contraception	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
B. A 38 year old with five daughters and no sons, after chorionic villus testing at 10 weeks gestation reveals the fetus is a chromosomally normal female	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
C. A 36 year old in the first trimester of pregnancy who needs radiation and chemotherapy for newly diagnosed breast cancer	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
D. A 28 year old with brittle type 1 diabetes, for whom glucose management has become very difficult at 16 weeks gestation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
E. A 34-year-old woman 6 weeks pregnant after being raped	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
F. Selective reduction in a healthy 37-year-old patient with quintuplet pregnancy	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
G. A 24 year old with a cardiopulmonary abnormality associated with a 25% chance of death with gestation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

17. Which of the following statements comes closest to your beliefs about when *pregnancy* begins?

- <sub>1</sub> At conception
- <sub>2</sub> At implantation of the embryo
- <sub>3</sub> Not sure

18. In your practice, do you ever encounter patients seeking an abortion?

- <sub>1</sub> Yes
- <sub>2</sub> No

19. Do you provide abortion services?

- <sub>1</sub> Yes
- <sub>2</sub> No

**ADDRESSING PATIENT SEXUALITY AND SEXUAL PRACTICES**

20. We are interested in doctors' practices about talking to their patients about sexuality. Please take a minute to think back and indicate how often you do each of the following:

	<b>Routinely</b>	<b>Sometimes</b>	<b>Rarely</b>	<b>Never</b>
A. Ask patients about their sexual activities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. Ask patients about their sexual <u>orientation</u> or <u>identity</u>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
C. Ask patients if they are <u>satisfied</u> with their sexual life	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
D. Ask patients if they experience <u>pleasure</u> with sexual activity	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
E. Ask patients questions to assess for sexual problems or dysfunction	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
F. Express to patients disapproval of or disagreement with their sexual practices	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

21. **To the best of your knowledge**, what percentage of your patients are lesbian or bisexual?  
 \_\_\_\_\_ (% of patients)  
<sub>1</sub> Don't Know

22.b Please indicate whether you agree or disagree with the following statements.

	<b>Agree Strongly</b>	<b>Agree Somewhat</b>	<b>Disagree Somewhat</b>	<b>Disagree Strongly</b>
A. If physicians counsel patients about safe-sex practices, the patients will be much less likely to engage in risky sexual behaviors.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. If physicians counsel patients about abstinence, the patients will be much less likely to engage in sexual activity.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

23. Please indicate whether you routinely recommend the HPV vaccine for asymptomatic patients in each of the following age groups.  
 Assume the patient has no history of abnormal Pap smears.

<b>Patient Age</b>	<b>Do you recommend the HPV vaccine?</b>		<b>Don't see patients in this age group</b>
	<b>Yes</b>	<b>No</b>	
A. 9 to 11 years	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
B. 12 to 27 years	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
C. 28 to 50 years	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
D. 51 to 65 years	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

## VALUES AND PROFESSIONALISM

Please indicate whether you agree or disagree with each of the following statements.

24. When dealing with <b>typical</b> medical decisions, a physician should ...				
	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly
A. provide all relevant facts without trying to influence the patient's decision one way or another	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. encourage the patient to make the decision that the physician believes is best	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

25. When dealing with <b>morally controversial</b> medical decisions, a physician should ...				
	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly
A. provide all relevant facts without trying to influence the patient's decision one way or another	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. encourage the patient to make the decision that the physician believes is best	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

The following questions are about the <b>challenges</b> OB/GYNs sometimes experience in their work. Please answer the questions by indicating how often each of the statements applies to you.							
	Never	A few times a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Daily
26.* I feel emotionally drained from my work.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
27.* I feel used up at the end of the workday.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
28.* I feel tired when I get up in the morning and have to face another day on the job.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
29.* Working all day is really a strain for me.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
30.* I feel burned out from my work.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
31. I make treatment decisions that are in conflict with the expectations of my immediate colleagues.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>
32. I make treatment decisions that are in conflict with my patients' expectations.	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>

\* Indicates items from Maslach Burnout Inventory (MBI=GS) by Wilmar Schaufeli, Michael P. Leiter, Christina Maslach and Susan Jackson. Copyright 1996 by Consulting Psychologists Press. All rights reserved. Further reproduction is prohibited without the Publisher's written consent. Used with permission of authors. FORM NO. [CASEID]-[VERSION]



33. If each of the following were to assess **how empathetic you are with patients**, how do you think they would **compare you to the average OB/GYN?**

How would ...	Below Average	Average	Above Average
A. <b>nurses</b> who work with you rate your empathy?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
B. <b>patients</b> you take care of rate your empathy?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
C. <b>you</b> rate your empathy?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

**YOUR PRACTICE**

34. Please estimate the number of patients you see in a typical week for the following types of care:

- A. Prenatal patients ..... \_\_\_\_\_ (# of patients)
- B. Obstetrics/delivery ..... \_\_\_\_\_ (# of patients)
- C. Outpatient gynecology ..... \_\_\_\_\_ (# of patients)
- D. Operating room-based gynecological procedures and surgery ..... \_\_\_\_\_ (# of patients)
- E. Infertility treatment ..... \_\_\_\_\_ (# of patients)
- F. Other (specify \_\_\_\_\_) . ..... \_\_\_\_\_ (# of patients)

35. Please estimate the percentage of patients you see in a typical week that are:

- A. under 18 years of age ..... \_\_\_\_\_ (% of patients)
- B. over 50 years of age ..... \_\_\_\_\_ (% of patients)

36. Is your primary place of practice an academic medical center or teaching hospital?

- <sub>1</sub> Yes
- <sub>2</sub> No

37. Is your primary place of practice religiously affiliated?

<sub>1</sub> Yes →

<sub>2</sub> No

A. What is the religious affiliation of that hospital/practice?

- <sub>1</sub> Jewish
- <sub>2</sub> Roman Catholic
- <sub>3</sub> Christian, non-Catholic
- <sub>4</sub> Other (specify) \_\_\_\_\_

B. Have you ever had a conflict with that hospital/practice over religiously-based policies for patient care?

- <sub>1</sub> Yes
- <sub>2</sub> No

38. Including you, how many OB/GYN physicians work in your primary place of practice?  
\_\_\_\_\_ (# of OB/GYNS)

39. To the best of your knowledge, what percentage of your OB/GYN colleagues in your primary place of practice are similar to you in their ethical or moral outlooks about sexual and reproductive health care practices?  
\_\_\_\_\_ (% of OB/GYNS)

\_1 Don't Know

40. For you personally, how important is it to work with colleagues who share your **ethical/moral outlook about sexual and reproductive health care** practices?

\_1 Very important

\_2 Somewhat important

\_3 Not very important

\_4 Not at all important

41. Are you a member of the American College of Obstetricians and Gynecologists?

\_1 Yes

\_2 No

42. Please indicate your current marital status.

\_1 Single, never married

\_2 Married

\_3 Widowed

\_4 Divorced

43. How many children do you have? (if none, please enter 0) \_\_\_\_\_

44. Would you describe your sexual orientation as heterosexual?

\_1 Yes

\_2 No

## YOUR RELIGIOUS CHARACTERISTICS

45. Which of the following best indicates your religious affiliation?

- <sub>1</sub> None  
<sub>2</sub> Buddhist  
<sub>3</sub> Hindu  
<sub>4</sub> Jewish  
<sub>5</sub> Muslim  
<sub>6</sub> Roman Catholic  
<sub>7</sub> Eastern Orthodox  
<sub>8</sub> Protestant  
<sub>9</sub> Other Christian  
<sub>10</sub> Other Religion (please specify) \_\_\_\_\_
- A. Would you say you are ...

<sub>1</sub> Orthodox      <sub>2</sub> Conservative      <sub>3</sub> Reform  
<sub>4</sub> Secular      <sub>5</sub> Other
- B. Do you consider yourself evangelical?

<sub>1</sub> Yes  
<sub>2</sub> No

46. How important would you say your religion is in your own life?

- <sub>1</sub> The most important part of my life  
<sub>2</sub> Very important in my life  
<sub>3</sub> Fairly important in my life  
<sub>4</sub> Not very important in my life

47. How often do you attend religious services?

- <sub>1</sub> Never  
<sub>2</sub> Less than once a year  
<sub>3</sub> About once or twice a year  
<sub>4</sub> Several times a year  
<sub>5</sub> About once a month  
<sub>6</sub> Two to three times a month  
<sub>7</sub> Nearly every week  
<sub>8</sub> Every week  
<sub>9</sub> Several times a week

48. To what extent do you agree or disagree with the following statements?

	<b>Agree Strongly</b>	<b>Agree Somewhat</b>	<b>Disagree Somewhat</b>	<b>Disagree Strongly</b>
A. There is truth in one religion	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
B. Different religions have different versions of the truth, and each may be equally right in its own way	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
C. There is no one, true, right religion	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**OTHER DEMOGRAPHIC CHARACTERISTICS**

49. Do you consider yourself Hispanic or Latino?

- <sub>1</sub> Yes
- <sub>2</sub> No

50. How would you classify your race? **[CHECK ONLY ONE]**

<sub>1</sub> Asian →

A. Do you think of yourself as ... <input type="checkbox"/> <sub>1</sub> East Asian or Pacific Islander <input type="checkbox"/> <sub>2</sub> South Asian <input type="checkbox"/> <sub>3</sub> Other Asian
--

- <sub>2</sub> Black or African-American
- <sub>3</sub> American Indian or Alaskan Native
- <sub>4</sub> White or Caucasian
- <sub>5</sub> Other (please specify) \_\_\_\_\_

51. Which of the following best describes how long you have been in the United States?

- <sub>1</sub> You immigrated to the United States as an adult.
- <sub>2</sub> You immigrated to the United States as a child.
- <sub>3</sub> One or both of your parents immigrated to the United States before you were born.
- <sub>4</sub> Both of your parents were born in the United States

52. **Please use the following space for anything else you would like to tell us about sexual and reproductive health care practices.**

If you would be willing to participate in a 15-30 minute confidential phone interview about religion and the practice of medicine, please check this box  and indicate below the preferred way to reach you. A portion of respondents who volunteer will be contacted.

- Phone number: (\_\_\_\_) \_\_\_\_\_
- E-mail: \_\_\_\_\_

**Please return this survey in the enclosed, postage-paid envelope.**

**Thank you** for participating

## APPENDIX B: Codebook

-----  
sample SAMPLE#  
-----

type: numeric (byte)  
range: [1,4] units: 1  
unique values: 4 missing .: 0/1154  
tabulation: Freq. Value  
                  107 1  
                  120 2  
                  120 3  
                  807 4

-----  
gender GENDER  
-----

type: string (str1)  
unique values: 2 missing "": 0/1154  
tabulation: Freq. Value  
                  537 "F"  
                  617 "M"

-----  
specialty SPECIALTY  
-----

type: string (str3)  
unique values: 1 missing "": 0/1154  
tabulation: Freq. Value  
                  1154 "OBG"

-----  
birthyear BIRTH YEAR  
-----

type: numeric (int)  
range: [1943,1982] units: 1  
unique values: 40 missing .: 0/1154  
mean: 1960.22  
std. dev: 9.18286  
percentiles:           10%       25%       50%       75%       90%  
                  1947       1953       1961       1968       1972

-----  
schoolstate SCHOOL STATE  
-----

type: numeric (int)  
range: [1,957] units: 1  
unique values: 98 missing .: 0/1154  
  
mean: 133.626  
std. dev: 226.275  
  
percentiles:       10%       25%       50%       75%       90%  
                  11        21        36        51        495

-----  
board\_cert\_1 BOARD\_CERT\_1  
-----

type: numeric (int)  
label: boardcert\_1  
  
range: [1040,1056] units: 1  
unique values: 4 missing .: 191/1154  
  
tabulation:   Freq.   Numeric   Label  
                  2       1040   Internal Medicine  
                  3       1041   Family Practice  
                 957       1043   OB/GYN Board  
                  1       1056   Clinical Cytogenetics  
                 191       .       .

-----  
board\_cert\_2 BOARD\_CERT\_2  
-----

type: numeric (int)  
label: boardcert\_1  
  
range: [1040,1041] units: 1  
unique values: 2 missing .: 1148/1154  
  
tabulation:   Freq.   Numeric   Label  
                  4       1040   Internal Medicine  
                  2       1041   Family Practice  
                 1148       .       .

-----  
caseid CASEID  
-----

type: numeric (int)  
range: [1,1799] units: 1  
unique values: 1154 missing .: 0/1154  
  
mean: 902.656  
std. dev: 522.695  
  
percentiles:       10%       25%       50%       75%       90%  
                  184       446       903.5       1364       1624

-----  
version VERSION  
-----

type: numeric (int)  
range: [111,4832] units: 1  
unique values: 491 missing .: 0/1154  
mean: 2248.62  
std. dev: 1553.86  
percentiles: 10% 25% 50% 75% 90%  
233 447 2322 3618 4425

-----  
q1 encounter pts seeking contraception  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 30/1154  
tabulation: Freq. Numeric Label  
1098 1 yes  
26 2 no  
30 .

-----  
q2ai m/e objections to oral contraceptives  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 6/1154  
tabulation: Freq. Numeric Label  
16 1 yes  
1132 2 no  
6 .

-----  
q2aai offer oral contraceptives  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 13/1154  
tabulation: Freq. Numeric Label  
1130 1 yes  
11 2 no  
13 .

-----  
q2bi m/e objections to progesterone  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 5/1154  
tabulation: Freq. Numeric Label  
                  19          1 yes  
                 1130         2 no  
                  5          .

-----  
q2bii offer progesterone  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 13/1154  
tabulation: Freq. Numeric Label  
                 1116          1 yes  
                  25          2 no  
                  13          .

-----  
q2ci m/e objections to IUD  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 5/1154  
tabulation: Freq. Numeric Label  
                  46          1 yes  
                 1103         2 no  
                  5          .

-----  
q2cii offer IUD  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 12/1154  
tabulation: Freq. Numeric Label  
                 1106          1 yes  
                  36          2 no  
                  12          .



-----  
q2di m/e objections to diaphragms  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 5/1154  
tabulation: Freq. Numeric Label  
                  16        1 yes  
                  1133       2 no  
                   5        .

-----  
q2dii offer diaphragms  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 12/1154  
tabulation: Freq. Numeric Label  
                  1101       1 yes  
                   41        2 no  
                   12        .

-----  
q2ei m/e objections to condoms  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 6/1154  
tabulation: Freq. Numeric Label  
                  18        1 yes  
                  1130       2 no  
                   6        .

-----  
q2eii offer condoms  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 13/1154  
tabulation: Freq. Numeric Label  
                  1123       1 yes  
                   18        2 no  
                   13        .

-----  
q2fii m/e objections to tubal ligation  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 8/1154  
tabulation: Freq. Numeric Label  
                  20          1 yes  
                 1126         2 no  
                  8          .

-----  
q2fii offer tubal ligation  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 18/1154  
tabulation: Freq. Numeric Label  
                 1119          1 yes  
                  17          2 no  
                  18          .

-----  
q3a encourage 17 yo to abstain from sex  
-----

type: numeric (byte)  
label: likely  
range: [1,4] units: 1  
unique values: 4 missing .: 22/1154  
tabulation: Freq. Numeric Label  
                  318          1 very likely  
                  288          2 somewhat likely  
                  302          3 not very likely  
                  224          4 not at all likely  
                  22          .

-----  
q3b persuade 17 yo to involve parents  
-----

type: numeric (byte)  
label: likely  
range: [1,4] units: 1  
unique values: 4 missing .: 19/1154  
tabulation: Freq. Numeric Label  
                  249          1 very likely  
                  285          2 somewhat likely  
                  334          3 not very likely  
                  267          4 not at all likely  
                  19          .

-----  
q3c

prescribe contraceptives w/o notifying parents  
-----

type: numeric (byte)  
label: likely

range: [1,4] units: 1  
unique values: 4 missing .: 9/1154

tabulation: Freq. Numeric Label  
950 1 very likely  
121 2 somewhat likely  
47 3 not very likely  
27 4 not at all likely  
9 .

-----  
q4

expected pregnancies in 100 per yr for couples who use NFP  
-----

type: numeric (float)

range: [0,100] units: .1  
unique values: 60 missing .: 33/1154

mean: 24.9493  
std. dev: 18.113

percentiles: 10% 25% 50% 75% 90%  
8 12.5 20 30 50

-----  
q5

NFP  
-----

type: numeric (byte)  
label: q5lab

range: [1,3] units: 1  
unique values: 3 missing .: 9/1154

tabulation: Freq. Numeric Label  
9 1 best option for most  
342 2 best option for some  
794 3 poor option for most  
9 .

-----  
q6

offer EC  
-----

```
      type: numeric (byte)
      label: q6lab, but 1 nonmissing value is not labeled

      range: [1,5]                units: 1
unique values: 5                  missing .: 21/1154

      tabulation: Freq.  Numeric  Label
                  595      1  to all women you believe are at
                  412      2  only to women who tell you that
                        they have had unprotected
                        intercourse
                  56      3  only to victims of sexual
                        assault
                  59      4  to nobody under any circumstance
                  11      5
                  21      .
```

-----  
q7a

women EC lower rates of unintended pregnancy  
-----

```
      type: numeric (byte)
      label: agree

      range: [1,4]                units: 1
unique values: 4                  missing .: 7/1154

      tabulation: Freq.  Numeric  Label
                  627      1  agree strongly
                  401      2  agree somewhat
                   81      3  disagree somewhat
                   38      4  disagree strongly
                   7      .
```

-----  
q7b

women EC will be less likely to use other contraceptive methods  
-----

```
      type: numeric (byte)
      label: agree

      range: [1,4]                units: 1
unique values: 4                  missing .: 7/1154

      tabulation: Freq.  Numeric  Label
                  59      1  agree strongly
                 266      2  agree somewhat
                 458      3  disagree somewhat
                 364      4  disagree strongly
                   7      .
```

-----  
q7c giving women access to EC will cause them to initiate sex at younger age  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 9/1154

tabulation: Freq. Numeric Label

35	1	agree strongly
121	2	agree somewhat
332	3	disagree somewhat
657	4	disagree strongly
9	.	

-----  
q7d women EC will have more sexual partners  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 10/1154

tabulation: Freq. Numeric Label

32	1	agree strongly
148	2	agree somewhat
329	3	disagree somewhat
635	4	disagree strongly
10	.	

-----  
q8 serum/ultrasound for genetic abnormalities  
-----

type: numeric (byte)  
label: q8lab

range: [1,4] units: 1  
unique values: 4 missing .: 20/1154

tabulation: Freq. Numeric Label

537	1	recommend screening
551	2	present information about screening but do not make a recommendation one way or the other
32	3	offer screening only if the woman requests it
14	4	not offer screening
20	.	

-----  
q9a offer amniocentesis to a 25 yo w/ - serum/ultrasound  
-----

type: numeric (byte)  
label: q9lab

range: [1,4] units: 1  
unique values: 4 missing .: 33/1154

tabulation: Freq. Numeric Label

49	1	very likely
25	2	somewhat likely
75	3	somewhat unlikely
972	4	very unlikely
33	.	

-----  
q9b offer amniocentesis to a 25 yo w/ + serum/ultrasound  
-----

type: numeric (byte)  
label: q9lab

range: [1,4] units: 1  
unique values: 4 missing .: 30/1154

tabulation: Freq. Numeric Label

979	1	very likely
122	2	somewhat likely
19	3	somewhat unlikely
4	4	very unlikely
30	.	

-----  
q9c offer amniocentesis to a 37 yo w/ - serum/ultrasound  
-----

type: numeric (byte)  
label: q9lab

range: [1,4] units: 1  
unique values: 4 missing .: 31/1154

tabulation: Freq. Numeric Label

575	1	very likely
228	2	somewhat likely
183	3	somewhat unlikely
137	4	very unlikely
31	.	

-----  
q9d offer amniocentesis to a 37 yo w/ + serum/ultrasound  
-----

type: numeric (byte)  
label: q9lab

range: [1,4] units: 1  
unique values: 4 missing .: 29/1154

tabulation: Freq. Numeric Label  
1076 1 very likely  
36 2 somewhat likely  
5 3 somewhat unlikely  
8 4 very unlikely  
29 .

-----  
q10ai m/e objections to artificial insemination by husband sperm  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 10/1154

tabulation: Freq. Numeric Label  
19 1 yes  
1125 2 no  
10 .

-----  
q10aai help obtain artificial insemination by husband sperm  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 17/1154

tabulation: Freq. Numeric Label  
1127 1 yes  
10 2 no  
17 .

-----  
q10bi m/e objections to artificial insemination by donor sperm  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 13/1154

tabulation: Freq. Numeric Label  
59 1 yes  
1082 2 no  
13 .

-----  
q10bii help obtain artificial insemination by donor sperm  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 23/1154  
tabulation: Freq. Numeric Label  
1098 1 yes  
33 2 no  
23 .

-----  
q10ci m/e objections to IVF w/ husband & wife gametes  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 13/1154  
tabulation: Freq. Numeric Label  
24 1 yes  
1117 2 no  
13 .

-----  
q10cii help obtain IVF w/ husband & wife gametes  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 22/1154  
tabulation: Freq. Numeric Label  
1123 1 yes  
9 2 no  
22 .

-----  
q10di m/e objections to IVF w/ donor sperm and/or egg  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 18/1154  
tabulation: Freq. Numeric Label  
60 1 yes  
1076 2 no  
18 .



-----  
q10dii help obtain IVF w/ donor sperm and/or egg  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 24/1154  
tabulation: Freq. Numeric Label  
                  1099 1 yes  
                  31 2 no  
                  24 .

-----  
q11ai discourage ART for pt who is not married to her male sexual partner  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 24/1154  
tabulation: Freq. Numeric Label  
                  154 1 yes  
                  976 2 no  
                  24 .

-----  
q11aii help obtain ART for pt who is not married to her male sexual partner  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 36/1154  
tabulation: Freq. Numeric Label  
                  1014 1 yes  
                  104 2 no  
                  36 .

-----  
q11bi discourage ART for pt who plans to be a single parent  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 22/1154  
tabulation: Freq. Numeric Label  
                  185 1 yes  
                  947 2 no  
                  22 .

-----  
q11bii help obtain ART for pt who plans to be a single parent  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 39/1154  
tabulation: Freq. Numeric Label  
                  995 1 yes  
                  120 2 no  
                  39 .

-----  
q11ci discourage ART for pt whose sexual partner is female  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 31/1154  
tabulation: Freq. Numeric Label  
                  150 1 yes  
                  973 2 no  
                  31 .

-----  
q11cii help obtain ART for pt whose sexual partner is female  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 45/1154  
tabulation: Freq. Numeric Label  
                  969 1 yes  
                  140 2 no  
                  45 .

-----  
q11di discourage ART for pt who is 56  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 22/1154  
tabulation: Freq. Numeric Label  
                  980 1 yes  
                  152 2 no  
                  22 .

-----  
qlldii help obtain ART for pt who is 56  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 48/1154

tabulation: Freq. Numeric Label  
557 1 yes  
549 2 no  
48 .

-----  
qllei discourage ART for pt who has HIV  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 38/1154

tabulation: Freq. Numeric Label  
803 1 yes  
313 2 no  
38 .

-----  
qlleii help obtain ART for pt who has HIV  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 57/1154

tabulation: Freq. Numeric Label  
575 1 yes  
522 2 no  
57 .

-----  
ql1fi discourage ART for pt & husband w/ 5 healthy biological children  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 21/1154

tabulation: Freq. Numeric Label  
282 1 yes  
851 2 no  
21 .

-----  
q11fii help obtain ART for pt & husband w/ 5 healthy biological children  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 47/1154  
tabulation: Freq. Numeric Label  
955 1 yes  
152 2 no  
47 .

-----  
q11gi discourage ART for pt w/ cardiopulmonary abnormality  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 15/1154  
tabulation: Freq. Numeric Label  
1077 1 yes  
62 2 no  
15 .

-----  
q11gii help obtain ART for pt w/ cardiopulmonary abnormality  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 45/1154  
tabulation: Freq. Numeric Label  
420 1 yes  
689 2 no  
45 .

-----  
q12a recommend screening for HIV  
-----

type: numeric (byte)  
label: likely  
range: [1,4] units: 1  
unique values: 4 missing .: 9/1154  
tabulation: Freq. Numeric Label  
290 1 very likely  
303 2 somewhat likely  
419 3 not very likely  
133 4 not at all likely  
9 .

-----  
q12b recommend screening for other STDs  
-----

type: numeric (byte)  
label: likely

range: [1,4] units: 1  
unique values: 4 missing .: 11/1154

tabulation: Freq. Numeric Label  
400 1 very likely  
321 2 somewhat likely  
323 3 not very likely  
99 4 not at all likely  
11 .

-----  
q13a perform salpingostomy for 24 yo w/ 7-wk ectopic pregnancy  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 15/1154

tabulation: Freq. Numeric Label  
1082 1 yes  
57 2 no  
15 .

-----  
q13b perform salpingectomy for 24 yo w/ 7-wk ectopic pregnancy  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 19/1154

tabulation: Freq. Numeric Label  
1027 1 yes  
108 2 no  
19 .

-----  
q13c policies of hospital/employer limit options  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 18/1154

tabulation: Freq. Numeric Label  
31 1 yes  
1105 2 no  
18 .

-----  
q14a discourage pt from having tubal ligation  
-----

type: numeric (byte)  
label: likely

range: [1,4] units: 1  
unique values: 4 missing .: 10/1154

tabulation: Freq. Numeric Label

191	1	very likely
242	2	somewhat likely
290	3	not very likely
421	4	not at all likely
10	.	

-----  
q14b response if pt requests surgery after discussion  
-----

type: numeric (byte)  
label: q14blab

range: [1,3] units: 1  
unique values: 3 missing .: 14/1154

tabulation: Freq. Numeric Label

1035	1	provide the surgery yourself
80	2	refer pt to another physician you believe would provide the surgery
25	3	neither provide the surgery yourself nor refer pt to someone who would
14	.	

-----  
q15 physicians' actions regarding abortion  
-----

type: numeric (byte)  
label: q15lab

range: [1,4] units: 1  
unique values: 4 missing .: 13/1154

tabulation: Freq. Numeric Label

377	1	very appropriate
103	2	somewhat appropriate
210	3	somewhat inappropriate
451	4	very inappropriate
13	.	

```
-----  
q16ai                morally object to abortion for pt w/ failed hormonal contraception  
-----
```

```
          type: numeric (byte)  
          label: yesno  
  
          range: [1,2]                units: 1  
unique values: 2                     missing .: 22/1154  
  
          tabulation: Freq.  Numeric  Label  
                      420      1  yes  
                      712      2  no  
                      22      .
```

```
-----  
q16aii               help obtain abortion for pt w/ failed hormonal contraception  
-----
```

```
          type: numeric (byte)  
          label: yesno  
  
          range: [1,2]                units: 1  
unique values: 2                     missing .: 26/1154  
  
          tabulation: Freq.  Numeric  Label  
                      970      1  yes  
                      158      2  no  
                      26      .
```

```
-----  
q16bi                morally object to abortion for pt w/ chromosomally normal female fetus  
-----
```

```
          type: numeric (byte)  
          label: yesno  
  
          range: [1,2]                units: 1  
unique values: 2                     missing .: 18/1154  
  
          tabulation: Freq.  Numeric  Label  
                      923      1  yes  
                      213      2  no  
                      18      .
```

```
-----  
q16bii               help obtain abortion for pt w/ chromosomally normal female fetus  
-----
```

```
          type: numeric (byte)  
          label: yesno  
  
          range: [1,2]                units: 1  
unique values: 2                     missing .: 34/1154  
  
          tabulation: Freq.  Numeric  Label  
                      719      1  yes  
                      401      2  no  
                      34      .
```

-----  
q16ci      morally object to abortion for pt in 1st trimester of pregnancy w/ breast cancer  
-----

```
      type: numeric (byte)
      label: yesno

      range: [1,2]                units: 1
unique values: 2                  missing .: 17/1154

      tabulation:  Freq.   Numeric  Label
                   178     1      yes
                   959     2      no
                   17      .
```

-----  
q16cii      help obtain abortion for pt in 1st trimester of pregnancy w/ breast cancer  
-----

```
      type: numeric (byte)
      label: yesno

      range: [1,2]                units: 1
unique values: 2                  missing .: 26/1154

      tabulation:  Freq.   Numeric  Label
                   1046    1      yes
                   82     2      no
                   26     .
```

-----  
q16di                      morally object to abortion for pt w/ brittle type 1 diabetes  
-----

```
      type: numeric (byte)
      label: yesno

      range: [1,2]                units: 1
unique values: 2                  missing .: 31/1154

      tabulation:  Freq.   Numeric  Label
                   445     1      yes
                   678     2      no
                   31     .
```

-----  
q16dii                      help obtain abortion for pt w/ brittle type 1 diabetes  
-----

```
      type: numeric (byte)
      label: yesno

      range: [1,2]                units: 1
unique values: 2                  missing .: 38/1154

      tabulation:  Freq.   Numeric  Label
                   915     1      yes
                   201     2      no
                   38     .
```







-----  
q19

provide abortions  
-----

```
      type: numeric (byte)
      label: yesno

      range: [1,2]                units: 1
unique values: 2                missing .: 10/1154

      tabulation: Freq.  Numeric  Label
                  194      1      yes
                  950      2      no
                  10       .
```

-----  
q20a

ask abt sexual activities  
-----

```
      type: numeric (byte)
      label: freq

      range: [1,4]                units: 1
unique values: 4                missing .: 5/1154

      tabulation: Freq.  Numeric  Label
                  733      1      routinely
                  325      2      sometimes
                  76       3      rarely
                  15       4      never
                  5       .
```

-----  
q20b

ask abt sexual orientation  
-----

```
      type: numeric (byte)
      label: freq

      range: [1,4]                units: 1
unique values: 4                missing .: 8/1154

      tabulation: Freq.  Numeric  Label
                  322      1      routinely
                  385      2      sometimes
                  336      3      rarely
                  103      4      never
                  8       .
```

-----  
q20c

ask if satisfied with sex life  
-----

```
      type: numeric (byte)
      label: freq

      range: [1,4]                units: 1
unique values: 4                missing .: 6/1154

      tabulation: Freq.  Numeric  Label
                  318      1  routinely
                  495      2  sometimes
                  273      3  rarely
                   62      4  never
                   6          .
```

-----  
q20d

ask if experience pleasure  
-----

```
      type: numeric (byte)
      label: freq

      range: [1,4]                units: 1
unique values: 4                missing .: 8/1154

      tabulation: Freq.  Numeric  Label
                  155      1  routinely
                  443      2  sometimes
                  414      3  rarely
                  134      4  never
                   8          .
```

-----  
q20e

ask abt sexual dysfunction  
-----

```
      type: numeric (byte)
      label: freq

      range: [1,4]                units: 1
unique values: 4                missing .: 6/1154

      tabulation: Freq.  Numeric  Label
                  440      1  routinely
                  504      2  sometimes
                  167      3  rarely
                   37      4  never
                   6          .
```

-----  
q20f express disapproval w/ sex  
-----

type: numeric (byte)  
label: freq  
range: [1,4] units: 1  
unique values: 4 missing .: 7/1154  
tabulation: Freq. Numeric Label  
18 1 routinely  
61 2 sometimes  
215 3 rarely  
853 4 never  
7 .

-----  
q21 % lesbian/bisexual  
-----

type: numeric (float)  
label: q21lab, but label does not exist  
range: [-1,50] units: .01  
unique values: 30 missing .: 8/1154  
mean: 4.1349  
std. dev: 5.49012  
percentiles: 10% 25% 50% 75% 90%  
-1 .5 2.5 5 10

-----  
q22a counsel abt safe-sex practices & risky sexual behaviors  
-----

type: numeric (byte)  
label: agree  
range: [1,4] units: 1  
unique values: 4 missing .: 6/1154  
tabulation: Freq. Numeric Label  
308 1 agree strongly  
699 2 agree somewhat  
123 3 disagree somewhat  
18 4 disagree strongly  
6 .

-----  
q22b counsel abt abstinence & sex  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 6/1154

tabulation: Freq. Numeric Label

41	1	agree strongly
315	2	agree somewhat
484	3	disagree somewhat
308	4	disagree strongly
6	.	

-----  
q23a HPV vaccine to 9-11 yrs  
-----

type: numeric (byte)  
label: q23lab

range: [1,3] units: 1  
unique values: 3 missing .: 15/1154

tabulation: Freq. Numeric Label

498	1	yes
206	2	no
435	3	don't see pts in age group
15	.	

-----  
q23b HPV vaccine to 12-27 yrs  
-----

type: numeric (byte)  
label: q23lab

range: [1,3] units: 1  
unique values: 3 missing .: 13/1154

tabulation: Freq. Numeric Label

1078	1	yes
59	2	no
4	3	don't see pts in age group
13	.	

-----  
q23c HPV vaccine to 28-50 yrs  
-----

type: numeric (byte)  
label: q23lab

range: [1,3] units: 1  
unique values: 3 missing .: 23/1154

tabulation: Freq. Numeric Label

223	1	yes
903	2	no
5	3	don't see pts in age group
23	.	

-----  
q23d

HPV vaccine to 51-65 yrs  
-----

type: numeric (byte)  
label: q23lab

range: [1,3] units: 1  
unique values: 3 missing .: 23/1154

tabulation: Freq. Numeric Label  
36 1 yes  
1069 2 no  
26 3 don't see pts in age group  
23 .

-----  
q24a

w/ typical provide all relevant facts  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 17/1154

tabulation: Freq. Numeric Label  
765 1 agree strongly  
306 2 agree somewhat  
58 3 disagree somewhat  
8 4 disagree strongly  
17 .

-----  
q24b

w/ typical encourage pt to make decision that physician believes is best  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 24/1154

tabulation: Freq. Numeric Label  
98 1 agree strongly  
428 2 agree somewhat  
362 3 disagree somewhat  
242 4 disagree strongly  
24 .

-----  
q25a w/ morally controversial provide all relevant facts  
-----

```
      type: numeric (byte)
      label: agree

      range: [1,4]          units: 1
unique values: 4          missing .: 18/1154

      tabulation: Freq.   Numeric  Label
                  902     1  agree strongly
                  214     2  agree somewhat
                   19     3  disagree somewhat
                   1     4  disagree strongly
                  18     .
```

-----  
q25b w/ morally controversial encourage pt to make decision that physician believes i  
-----

```
      type: numeric (byte)
      label: agree

      range: [1,4]          units: 1
unique values: 4          missing .: 27/1154

      tabulation: Freq.   Numeric  Label
                  41     1  agree strongly
                  204     2  agree somewhat
                  342     3  disagree somewhat
                  540     4  disagree strongly
                   27     .
```

-----  
q26 emotionally drained  
-----

```
      type: numeric (byte)
      label: often

      range: [0,6]          units: 1
unique values: 7          missing .: 19/1154

      tabulation: Freq.   Numeric  Label
                  53     0  never
                  262     1  a few times a year
                  169     2  once a month
                  272     3  a few times a month
                  128     4  once a week
                  183     5  a few times a week
                   68     6  daily
                   19     .
```



-----  
q27

used up  
-----

type: numeric (byte)  
label: often  
range: [0,6] units: 1  
unique values: 7 missing .: 21/1154

tabulation:	Freq.	Numeric	Label
	60	0	never
	172	1	a few times a year
	150	2	once a month
	244	3	a few times a month
	167	4	once a week
	238	5	a few times a week
	102	6	daily
	21	.	

-----  
q28

tired in the morning  
-----

type: numeric (byte)  
label: often  
range: [0,6] units: 1  
unique values: 7 missing .: 21/1154

tabulation:	Freq.	Numeric	Label
	125	0	never
	278	1	a few times a year
	169	2	once a month
	204	3	a few times a month
	121	4	once a week
	166	5	a few times a week
	70	6	daily
	21	.	

-----  
q29

working all day is strain  
-----

type: numeric (byte)  
label: often  
range: [0,6] units: 1  
unique values: 7 missing .: 21/1154

tabulation:	Freq.	Numeric	Label
	189	0	never
	304	1	a few times a year
	201	2	once a month
	187	3	a few times a month
	99	4	once a week
	105	5	a few times a week
	48	6	daily
	21	.	

-----  
q30

burned out  
-----

type: numeric (byte)  
label: often  
range: [0,6] units: 1  
unique values: 7 missing .: 18/1154

tabulation:	Freq.	Numeric	Label
	202	0	never
	357	1	a few times a year
	166	2	once a month
	177	3	a few times a month
	81	4	once a week
	93	5	a few times a week
	60	6	daily
	18	.	

-----  
q31

treatment decisions in conflict w/ colleagues  
-----

type: numeric (float)  
label: often, but 1 nonmissing value is not labeled  
range: [0,6] units: .1  
unique values: 8 missing .: 27/1154

tabulation:	Freq.	Numeric	Label
	470	0	never
	1	.5	
	522	1	a few times a year
	62	2	once a month
	44	3	a few times a month
	11	4	once a week
	12	5	a few times a week
	5	6	daily
	27	.	

-----  
q32

treatment decisions in conflict w/ pts  
-----

type: numeric (byte)  
label: often  
range: [0,6] units: 1  
unique values: 7 missing .: 27/1154

tabulation:	Freq.	Numeric	Label
	457	0	never
	485	1	a few times a year
	98	2	once a month
	64	3	a few times a month
	11	4	once a week
	7	5	a few times a week
	5	6	daily
	27	.	

-----  
q33a nurses & empathy  
-----

type: numeric (byte)  
label: empathy

range: [1,3] units: 1  
unique values: 3 missing .: 24/1154

tabulation: 

Freq.	Numeric	Label
12	1	below average
252	2	average
866	3	above average
24	.	

-----  
q33b pts & empathy  
-----

type: numeric (byte)  
label: empathy

range: [1,3] units: 1  
unique values: 3 missing .: 23/1154

tabulation: 

Freq.	Numeric	Label
6	1	below average
208	2	average
917	3	above average
23	.	

-----  
q33c you & empathy  
-----

type: numeric (byte)  
label: empathy

range: [1,3] units: 1  
unique values: 3 missing .: 23/1154

tabulation: 

Freq.	Numeric	Label
14	1	below average
359	2	average
758	3	above average
23	.	

-----  
q34a # prenatal pts  
-----

type: numeric (float)

range: [0,200] units: .1  
unique values: 67 missing .: 0/1154

mean: 31.8853  
std. dev: 27.1114

percentiles: 

10%	25%	50%	75%	90%
0	10	30	50	60

-----  
q34b # ob/delivery  
-----

type: numeric (float)  
range: [0,200] units: .1  
unique values: 40 missing .: 0/1154  
mean: 5.50607  
std. dev: 9.56513  
percentiles: 10% 25% 50% 75% 90%  
0 2 4 5 10

-----  
q34c # outpt gyn  
-----

type: numeric (float)  
range: [0,200] units: .1  
unique values: 70 missing .: 0/1154  
mean: 42.4961  
std. dev: 32.1362  
percentiles: 10% 25% 50% 75% 90%  
1.5 20 40 60 80

-----  
q34d # operating room-based gyn procedures & surgery  
-----

type: numeric (float)  
range: [0,100] units: .1  
unique values: 31 missing .: 0/1154  
mean: 3.91075  
std. dev: 5.4886  
percentiles: 10% 25% 50% 75% 90%  
0 2 3 5 8

-----  
q34e # infertility treatment  
-----

type: numeric (float)  
range: [0,100] units: .1  
unique values: 31 missing .: 0/1154  
mean: 2.96326  
std. dev: 7.33702  
percentiles: 10% 25% 50% 75% 90%  
0 0 1 3 5

-----  
q34f # other  
-----

type: numeric (float)  
range: [0,300] units: .1  
unique values: 30 missing .: 0/1154  
mean: 2.57626  
std. dev: 15.8927  
percentiles: 10% 25% 50% 75% 90%  
0 0 0 0 0

-----  
q35a % pts under 18 yo  
-----

type: numeric (float)  
range: [0,200] units: .1  
unique values: 41 missing .: 34/1154  
mean: 13.3705  
std. dev: 14.8674  
percentiles: 10% 25% 50% 75% 90%  
2 5 10 20 25

-----  
q35b % pts over 50 yo  
-----

type: numeric (float)  
range: [0,95] units: .1  
unique values: 40 missing .: 35/1154  
mean: 26.8472  
std. dev: 17.536  
percentiles: 10% 25% 50% 75% 90%  
10 15 25 35 50

-----  
q36 primary place of practice  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 19/1154  
tabulation: Freq. Numeric Label  
305 1 yes  
830 2 no  
19 .

-----  
q37 is practice religiously affiliated  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 31/1154  
tabulation: Freq. Numeric Label  
                  221 1 yes  
                  902 2 no  
                  31 .

-----  
q37a religious affiliation of practice  
-----

type: numeric (byte)  
label: q37alab  
range: [1,4] units: 1  
unique values: 4 missing .: 908/1154  
tabulation: Freq. Numeric Label  
                  20 1 Jewish  
                  147 2 Roman Catholic  
                  57 3 Christian, non-Catholic  
                  22 4 Other  
                  908 .

-----  
q37b conflict w/ practice  
-----

type: numeric (byte)  
label: confprac  
range: [1,2] units: 1  
unique values: 2 missing .: 864/1154  
tabulation: Freq. Numeric Label  
                  99 1 Yes  
                  191 2 No  
                  864 .

-----  
q38 # ob/gyns in practice  
-----

type: numeric (float)  
range: [0,180] units: .1  
unique values: 47 missing .: 18/1154  
mean: 8.15405  
std. dev: 12.9155  
percentiles: 10% 25% 50% 75% 90%  
                  1 2 5 8 20

-----  
q39 % ob/gyn colleagues in practice similar to you in e/m outlooks  
-----

type: numeric (float)  
label: dk, but 34 nonmissing values are not labeled  
range: [-1,100] units: .1  
unique values: 35 missing .: 54/1154  
examples: -1 don't know  
50  
90  
100

-----  
q40 how important to work w/ colleagues who share e/m outlook  
-----

type: numeric (byte)  
label: important  
range: [1,4] units: 1  
unique values: 4 missing .: 17/1154  
tabulation: Freq. Numeric Label  
405 1 very important  
507 2 somewhat important  
183 3 not very important  
42 4 not at all important  
17 .

-----  
q41 member of American College of Ob/Gyns  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 7/1154  
tabulation: Freq. Numeric Label  
1052 1 yes  
95 2 no  
7 .

-----  
q42 marital status  
-----

type: numeric (byte)  
label: marital  
range: [1,4] units: 1  
unique values: 4 missing .: 11/1154  
tabulation: Freq. Numeric Label  
83 1 single, never married  
965 2 married  
12 3 widowed  
83 4 divorced  
11 .

-----  
q43 # children  
-----

type: numeric (float)  
range: [0,12] units: .1  
unique values: 13 missing .: 19/1154  
mean: 2.20044  
std. dev: 1.38289  
percentiles: 10% 25% 50% 75% 90%  
0 2 2 3 4

-----  
q44 sexual orientation  
-----

type: numeric (byte)  
label: yesno  
range: [1,2] units: 1  
unique values: 2 missing .: 11/1154  
tabulation: Freq. Numeric Label  
1106 1 yes  
37 2 no  
11 .

-----  
q45 religious affiliation  
-----

type: numeric (byte)  
label: religion  
range: [1,10] units: 1  
unique values: 10 missing .: 29/1154  
examples: 4 Jewish  
6 Roman Catholic  
7 Eastern Orthodox  
8 Protestant

-----  
q45a type of jewish  
-----

type: numeric (byte)  
label: typejew  
range: [1,5] units: 1  
unique values: 5 missing .: 966/1154  
tabulation: Freq. Numeric Label  
9 1 orthodox  
78 2 conservative  
63 3 reform  
25 4 secular  
13 5 other  
966 .





-----  
q47 how often attend religious services  
-----

type: numeric (byte)  
label: q47lab  
range: [1,9] units: 1  
unique values: 9 missing .: 18/1154

tabulation:	Freq.	Numeric	Label
	123	1	never
	101	2	less than once a yr
	156	3	about once or twice a yr
	201	4	several times a yr
	89	5	about once a month
	139	6	two to three times a month
	143	7	nearly every wk
	138	8	every wk
	46	9	several times a wk
	18	.	

-----  
q48a a/d truth in one religion  
-----

type: numeric (byte)  
label: agree  
range: [1,4] units: 1  
unique values: 4 missing .: 49/1154

tabulation:	Freq.	Numeric	Label
	196	1	agree strongly
	153	2	agree somewhat
	208	3	disagree somewhat
	548	4	disagree strongly
	49	.	

-----  
q48b a/d diff religions have diff versions of truth  
-----

type: numeric (byte)  
label: agree  
range: [1,4] units: 1  
unique values: 4 missing .: 39/1154

tabulation:	Freq.	Numeric	Label
	502	1	agree strongly
	403	2	agree somewhat
	80	3	disagree somewhat
	130	4	disagree strongly
	39	.	

-----  
q48c a/d no one, true, right religion  
-----

type: numeric (byte)  
label: agree

range: [1,4] units: 1  
unique values: 4 missing .: 54/1154

tabulation:	Freq.	Numeric	Label
	525	1	agree strongly
	231	2	agree somewhat
	111	3	disagree somewhat
	233	4	disagree strongly
	54	.	

-----  
q49 hispanic/latino  
-----

type: numeric (byte)  
label: yesno

range: [1,2] units: 1  
unique values: 2 missing .: 14/1154

tabulation:	Freq.	Numeric	Label
	64	1	yes
	1076	2	no
	14	.	

-----  
q50 race  
-----

type: numeric (byte)  
label: race

range: [1,5] units: 1  
unique values: 4 missing .: 43/1154

tabulation:	Freq.	Numeric	Label
	198	1	asian
	68	2	black or african-american
	815	4	white or caucasian
	30	5	other
	43	.	

-----  
q50a asian specifics  
-----

type: numeric (byte)  
label: asian

range: [1,3] units: 1  
unique values: 3 missing .: 965/1154

tabulation:	Freq.	Numeric	Label
	63	1	east asian or pacific islander
	74	2	south asian
	52	3	other asian
	965	.	

-----  
q50\_spec

Q50\_SPEC  
-----

```
type: string (str63)
unique values: 41          missing "": 1096/1154
examples:  " "
           " "
           " "
           " "
warning: variable has embedded blanks
```

-----  
q51

length of time in u.s.  
-----

```
type: numeric (byte)
label: immigration
range: [1,4]          units: 1
unique values: 4      missing .: 14/1154
tabulation: Freq.   Numeric Label
              217     1 you immigrated to u.s. as an
              106     2 you immigrated to u.s. as a
              138     3 one/both of parents immigrated
              679     4 to u.s. before you were born
              14      . both parents were born in u.s.
```

-----  
q52

additional comments  
-----

```
type: string (str244)
unique values: 28          missing "": 1117/1154
examples:  " "
           " "
           " "
           " "
warning: variable has embedded blanks
```

-----  
finwt

(unlabeled)  
-----

type: numeric (float)

range: [6.1771426,43.438526]           units: 1.000e-07  
unique values: 8                       missing .: 0/1154

tabulation: Freq. Value  
              32 6.1771426  
              75 7.1777525  
              56 9.9478025  
              64 10.155048  
             106 10.260774  
              14 10.525568  
             738 38.636505  
              69 43.438526