



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

The Professional Development of Physicians-in-Training

Dear Medical Student,

We invite you to participate in an important study of the professional development of physicians-in-training. Please complete this questionnaire to help us better understand medical students' perspectives on this important issue.

You were selected in such a way as to be sure that the study represents medical students nationwide, and we need everyone to participate for the study to be accurate. This questionnaire takes about 20 minutes to complete. Please know that all your responses will be confidential and 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.

After you complete this questionnaire, six months from now, we will invite you to provide us an update of your experiences and to tell us a bit more about your own perspective.

This study is being undertaken by the University of Chicago. If you have questions about this study, please contact project director Kenneth Rasinski, PhD at krasinsk@uchicago.edu or call him at 773-834-6837. If you would like to contact the director of our Institutional Review Board, Anita Goodnight, she can be reached at abg@uchicago.edu or (773) 834-0402.

As a small token of our sincere appreciation, we have enclosed a **\$5 dollar bill** with this questionnaire. Thank you again.

Sincerely,

Farr A. Curlin, MD

1. Please indicate your undergraduate major(s) _____

2. At this point, which clinical specialty will you most likely choose for residency training?

- ₁ Family Medicine
- ₂ Internal Medicine
- ₃ Pediatrics
- ₄ Obstetrics/Gynecology
- ₅ Anesthesiology
- ₆ Dermatology
- ₇ Emergency Medicine
- ₈ Neurology
- ₉ Ophthalmology
- ₁₀ Orthopedic Surgery
- ₁₁ Otolaryngology
- ₁₂ Pathology
- ₁₃ Psychiatry
- ₁₄ Radiology (diagnostic)
- ₁₅ Surgery (general)
- ₁₆ Urology
- ₋₁ Undecided
- ₋₂ Other (please specify): _____

If Family Medicine, Internal Medicine, or Pediatrics, how likely are you to ...

	Very likely	Somewhat likely	Not very likely	Not at all likely
a. go into primary care?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
b. become a hospitalist*?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
c. pursue a loan repayment program (e.g., National Health Service Corps)?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

(*A hospitalist is a physician whose focus is the general medical care of hospitalized patients)

3. How much do you think each of the following considerations will influence your specialty choice?

	Little to No Influence	Some Influence	A Lot of Influence	The Most Possible Influence
a) Your financial debt at graduation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
b) Desire for a manageable lifestyle	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
c) Family considerations and/or expectations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
d) Expected income for different specialties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
e) Desire to follow in the footsteps of a physician you admire	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
f) A deep sense of calling to a particular specialty	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
g) The extent to which physicians in different specialties seem to be <u>burned out</u> by their work	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

4. Do you plan to locate your practice in a medically underserved setting?

- ₁ Yes
- ₂ No
- ₃ Undecided

a. If Yes, indicate the likely location:

- ₁ Rural community
- ₂ Inner-city community
- ₃ Other (please specify): _____

5. Did you personally grow up in a medically underserved setting?

- ₁ Yes
- ₂ No

a. If Yes, indicate the location:

- ₁ Rural community
- ₂ Inner-city community
- ₃ Other (please specify): _____

6. Have you ever worked in a medically underserved setting?

- ₁ Yes
- ₂ No

a. If Yes, please check all of the following descriptors that apply to the underserved setting(s) in which you have worked.

- ₁ In the United States
- ₂ Outside the United States
- ₃ Global health program through your school
- ₄ Service learning experiences in the community
- ₅ Religiously-affiliated organization
- ₆ Other (please specify): _____

7. Do you have a parent or grandparent who is a physician?

- ₁ Yes
- ₂ No

8. How much total student debt (pre-medical and medical) do you expect to have by graduation?

- ₁ No debt
- ₂ ≤ \$50,000
- ₃ \$50,000 - \$100,000
- ₄ \$100,001 - \$150,000
- ₅ \$150,001 - \$200,000
- ₆ > \$200,000

In the following three pages, you will find a series of questions about your personal experiences in your overall life, not specific to your experience in medical training. Some items may seem unusual or repetitive, but please complete all of the items so that we can better understand your perspective.

9. Please indicate to what extent each of the following statements is true of you.

(Altruism & Impact on Others from Loyola Generativity Scale (LGS): McAdams, J of Personality and Social Psych, 1992)	Never	Occasionally or seldom	Fairly Often	Very Often or Nearly Always
a) I try to pass along knowledge I have gained through my life experiences. (100-1)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b) I feel that other people don't need me. (100-2)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c) I feel as though I have made a difference to many people. (100-4)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
d) I volunteer to work for a charity. (A-4)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
e) I have important skills that I try to teach others. (100-12)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
f) My actions have a positive effect on other people. (100-14)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
g) I feel as though I have nothing of worth to contribute to others. (100-15)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
h) I make commitments to many different people, groups, and activities. (A-16)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
i) I feel a responsibility to improve the neighborhood in which I live. (A-18)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
j) People come to me for advice. (100-19)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

10. Please indicate whether each of the statements applies to you.

(Marlowe-Crowne social desirability scale- short form: Crowne, D.P. & Marlowe, D., The approval motive, 1964)	Yes	Not Sure	No
a) Are you always a good listener, no matter whom you are talking to?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b) Do you sometimes feel resentful when you don't get you own way?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c) Are you always willing to admit when you make a mistake?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

11. Consider how well each statement describes you by choosing the appropriate number on the scale.

(Empathic concern & Perspective-taking subscales from IRI:
Davis, JSAS Catalog of Selected Documents in Psychology, 1980)

**Does not
describe
me well**

**Describes
me very
well**

a) I often have tender, concerned feelings for people less fortunate than me. (EC-2)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) I sometimes find it difficult to see things from the "other guy's" point of view.(PT-3) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) Sometimes I don't feel very sorry for other people when they are having problems. (EC-4) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d) I try to look at everybody's side of a disagreement before I make a decision. (PT-8)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e) When I see someone being taken advantage of, I feel kind of protective towards them. (EC-9)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
f) I sometimes try to understand my friends better by imagining how things look from their perspective. (PT-11)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
g) Other people's misfortunes do not usually disturb me a great deal. (EC-14) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
h) If I'm sure I'm right about something, I don't waste much time listening to other people's arguments. (PT-15) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
i) When I see someone being treated unfairly, I sometimes don't feel very much pity for them. (EC-18) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
j) I am often quite touched by things that I see happen. (EC-20)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
k) I believe that there are two sides to every question and try to look at them both. (PT-21)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
l) I would describe myself as a pretty soft-hearted person. (EC-22)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
m) When I'm upset at someone, I usually try to "put myself in his shoes" for a while.(PT-25)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
n) Before criticizing somebody, I try to imagine how I would feel if I were in their place. (PT-28)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

12. Please indicate how frequently or infrequently you have had each of the following experiences in the past six months. Indicate your actual experience, not what you think your experience should be.

(AA & NR from five Facet Questionnaire: Baer, Ruth A. Assessment, 2006)	Never or very rarely true	Not often true	Sometimes true Sometimes not true	Often true	Very often or always true
a) I perceive my feelings and emotions without having to react to them. (NR-1) (FMI 18)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) I find it difficult to stay focused on what's happening in the present. (AA-3) (-) (MAAS 3)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) I watch my feelings without getting lost in them. (NR-6) (FMI 25)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d) It seems I am "running on automatic" without much awareness of what I'm doing. (AA-8) (-) (MAAS 7)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e) In difficult situations, I can pause without immediately reacting. (NR-11) (FMI 26)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
f) I rush through activities without being really attentive to them. (AA-13) (-) (MAAS 8)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
g) When I have distressing thoughts or images, I am able just to notice them without reacting. (NR-16) (MQ 1)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
h) I do jobs or tasks automatically, without being aware of what I'm doing. (AA-18) (-) (MAAS 10)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
i) When I have distressing thoughts or images, I feel calm soon after. (NR-21) (MQ 4)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
j) I find myself doing things without paying attention. (AA-23) (-) (MAAS 14)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
k) When I have distressing thoughts or images, I "step back" and am aware of the thought or image without getting taken over by it. (NR-26) (MQ 9)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
l) When I do things, my mind wanders off and I'm easily distracted. (AA-28) (-) (KIMS 3)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
m) When I have distressing thoughts or images, I just notice them and let them go. (NR-31) (MQ 10)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
n) I don't pay attention to what I'm doing because I'm daydreaming, worrying, or otherwise distracted. (AA-33) (-) (KIMS 23)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
o) I am easily distracted. (AA-37) (-) (CAMS 6)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

YOUR MEDICAL EXPERIENCES AND BELIEFS ABOUT MEDICINE

13. Since the beginning of your clinical rotations, how many times have you experienced each of the following?

	Never	Once or twice	A few times	Several times	Numerous times
a) Been mistreated by an attending faculty	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
b) Been mistreated by an intern or resident	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
c) Received <u>positive</u> feedback from your attending regarding your character traits	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
d) Received <u>negative</u> feedback from your attending regarding your character traits	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

14. Have you encountered a doctor during your medical training who in your judgment displays the best characteristics of a good physician?

- ₁ Yes → If yes:
₂ No

A. In what capacity did this physician interact with you?

(CHECK ALL THAT APPLY)

- ₁ preceptor/mentor assigned by school
₂ preceptor/mentor I sought out myself
₃ physician who supervised me on the wards
₄ personal or family friend
₅ other (please specify): _____

B. What is that physician's specialty?

(please specify): _____

15. Please respond to the following items by marking the box that best reflects your own beliefs.

	Disagree Strongly	Disagree somewhat	Neither agree nor disagree	Agree somewhat	Agree strongly
a) I do not deserve special treatment in life just because I am a physician.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) As a physician, I deserve an extra break now and then.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) Given all the investments I plan to make over my medical career, I feel entitled to a higher salary.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

16. Please answer the questions by indicating how often each of the statements applies to you.
 “Work” or “job” refers to any work related to your **medical experiences**.

(from Maslach Burnout Inventory
 – short form)

	Never	A few times a year	Once a month or less	A few times a month	Once a week	A few times a week	Every day
a) I feel burned out from my work	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
b) I have become more callous toward people since I took this job.	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
c) I feel I’m positively influencing other people’s lives through my work.	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆

17. Please answer to what extent you agree or disagree with the following statements.
 “Work” refers to any work related to your **medical experiences**.

(Vocation Identity Questionnaire, Dreher)

	Disagree Strongly	Disagree somewhat	Neither agree nor disagree	Agree somewhat	Agree strongly
a) If I were independently wealthy, I would quit my current work or course of study.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) Most of the time I genuinely enjoy the work I do.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) My daily routine is often so tedious that I feel I’m just putting in time until the end of the day.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d) I get a sense of personal satisfaction completing projects and solving problems that come up.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e) I sometimes get so involved in my work that I lose track of time.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
f) My major motivation in my work is making money.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
g) I have a calling that enables me to develop my skills and talents and use them in a meaningful way.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
h) In my daily life I feel connected in a meaningful way to a community of other people.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
i) I see my work as a way to make a positive difference in the world.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

18. Please respond to the following items by marking the box that best reflects your own beliefs.

(Psychological Entitlement Scale (PES): Campbell, J of Personality Assessment, 2004)

	Disagree Strongly	Disagree somewhat	Neither agree nor disagree	Agree somewhat	Agree strongly
a) I deserve more things in my life.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) Things should go my way.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) I feel entitled to more of everything.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

In the following pages, you will find a series of questions about your clinical experiences. Some items may seem unusual or repetitive, but please complete all of the items so that we can better understand your perspective.

19. Thinking about your role as a physician-in-training, please indicate how often each statement applies to you in your **clinical experiences**.

(Modified Interpersonal Generosity Scale (IGS): Smith & Hill, 2009)

	Never	Occasionally or seldom	Fairly Often	Very Often or Nearly Always
a) I really try to slow down and give patients the time and help they need. (Attention) (A)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b) I make time to pay extra careful attention to patients' problems. (Attention) (IOO)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c) I go the extra mile to help take care of my patients. (Compassion) (A)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
d) I make a special point of being kind to patients who are suffering. (Compassion) (IOO)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
e) I am stingy with the time I give to patients. (Openhandedness) (A) (-)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
f) It annoys me when my patients ask too many questions. (IOO) (-)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
g) I eagerly look for moments in which I can teach patients something helpful to them. (IOO)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
h) Colleagues seek me out when they need help thinking through a difficult problem. (A)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
i) If I stand a chance of helping a patient, I am willing to risk upsetting my colleagues in the process. (Courage) (A)	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
j) I make it a point to let my patients know how much I	<input type="checkbox"/> ₀	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

care about and appreciate them. (Verbal Expression) (IOO)

20. Again please consider your thoughts and feelings **specific to your experience as a physician-in-training** and indicate how well each of the following statements describes you by choosing the appropriate number on the scale.

	Does not describe me well			Describes me very well	
a) I get a strong urge to help when I see a patient who is upset. (BEES, TEQ-13) (EC)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b) I try to imagine myself in my patients' shoes when providing care to them. (JSPE-9) (PT)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c) It upsets me to see a patient being treated disrespectfully. (BEES, TEQ-3) (EC)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d) I try to understand what is going on in my patients' minds by paying attention to their non-verbal cues and body language. (JSPE-13) (PT)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e) I become irritated when a patient cries. (TEQ-11) (EC) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f) It is difficult for me to view things from my patients' perspective. (JSPE-3) (PT) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g) I can tell when patients are sad even when they do not say anything. (Ecompreh, TEQ-8) (EC)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h) I frequently cannot understand why my patients act as they do. (Curlin) (PT) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i) I find that I am "in tune" with patients' moods. (HES, TEQ-9) (EC)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j) I imagine myself experiencing the symptoms that my patients are experiencing. (Curlin) (PT)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
k) I do not feel sorry for patients who cause their own serious illnesses. (BEES, TEQ-10) (EC) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
l) I listen carefully to my patients when they need to get something off their chests. (Curlin) (PT) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
m) When patients start to talk about their personal problems, I try to steer the conversation toward their medical issues. (QMEE, TEQ-7) (EC) (-)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
n) I am often able to share in a patient's sense of humor. (Curlin) (PT)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

21. Consider your experiences as a **physician-in-training**, and indicate how frequently or infrequently you have had each of the following experiences in the last six months of your clinical rotations. Indicate your actual experience, not what your experience should be.

	Never or very rarely true	Not often true	Sometimes true Sometimes not true	Often true	Very often or always true
a) I cope with stress without letting it hinder my care of patients. (Curlin) (NR)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
b) When I am with a patient, my mind wanders off and I am easily distracted. (AA)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
c) When my schedule is disrupted, I don't let it bother me. (NR)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
d) In my clinical work, it seems like I am running on automatic, without paying much attention to what I am doing. (AA)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
e) When patients are demanding and difficult, I remain calm and composed. (Curlin/Yoon) (NR)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
f) During a clinical workday, I tend to walk quickly to get where I'm going without paying attention to what I experience along the way. (MAAS-4) (AA) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
g) When I have a frustrating or distressing encounter with a patient, I can't get it out of my mind. (Curlin) (NR) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
h) When I carry out everyday clinical tasks, I remain actively aware of what I am thinking and doing. (Yoon) (AA)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
i) When the clinical environment is hectic, I keep my emotional composure. (Curlin) (NR)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
j) I find myself listening to a patient or colleague with one ear, while thinking about something else at the same time. (MAAS-11) (AA) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
k) When a patient has a bad outcome, I want to put it behind me as fast as possible. (Yoon) (NR)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
l) I forget a patient's name almost as soon as I've been told it for the first time. (MAAS-6) (AA) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
m) I get irritable with patients who do not adhere to their treatment plan. (Curlin) (NR) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
n) I overlook clinical clues in a case because of carelessness, not paying attention, or thinking of something else. (MAAS-2) (AA) (-)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
o) After a difficult interaction with a patient or colleague, I try to slow down and think over why	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

I behaved the way I did. (Yoon, AA)

In this final section, we ask questions about your personal demographic characteristics.

22. Do you consider yourself Hispanic or Latino?

- ₁ Yes
₂ No

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

- ₁ Asian →
₂ Black or African-American
₃ American Indian or Alaskan Native
₄ White or Caucasian
₅ Other (please specify): _____

A. If Asian, do you think of yourself as ...

- ₁ East Asian or Pacific Islander
₂ South Asian
₃ Other Asian

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

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

Lastly, please update the email address we may have on file for you so that we can contact you in the future about this study. If you prefer, you can also update your contact information using the website on the postcard attached to this survey. We will keep your emails confidential and will not share them with a third party.

Email address: _____

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

We hope you will also spend a moment to visit the study's website.

Six months from now we will invite you to provide us an update on your experiences and to tell us a bit more about your own perspective.

Thank you again for participating in this study!