



## The Professional Development of Physicians-in-Training Follow-Up Questionnaire

Several months ago, you participated in our study on the professional development of physicians-in-training. In this follow-up questionnaire, we would appreciate an update regarding your experiences. Some of these questions may seem familiar and repetitive, but we hope that you will complete all the responses. We have included a **\$10 dollar bill** as a token of our sincere appreciation.

1. Please answer to what extent each of the following statements describes you.

(Brief Calling Scale: Dik, Eldridge, Steger, Duffy, Journal of Career Assessment, 2012)

	Not At All True of Me	Mildly True of Me	Moderately True of Me	Mostly True of Me	Totally True of Me
a) I have a calling to a particular kind of work. (Presence)	<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>
b) I have a good understanding of my calling as it applies to my career. (Presence)	<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>

2. Please indicate to what extent you agree or disagree with the following statements:

	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly
a) Medical educators should focus on teaching the science of medicine rather than trying to shape students' character.	<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) Medical educators are responsible for training students to have good character.	<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) Medical educators should <u>not</u> make judgments about the character of their students.	<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) One can still be a good physician even if one is not a very good person.	<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) I feel professionally obligated to report peers whose personal behaviors compromise their professional responsibilities.	<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) I feel professionally obligated to report peers who I believe are seriously unfit to practice medicine.	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

## CHARACTERISTICS YOU ADMIRE IN OTHER PHYSICIANS

3. Among the physicians you have known personally, think about the one you most admire *as a physician*.

a) What is that physician's clinical specialty? \_\_\_\_\_

b) Please indicate whether each of the following is true of that physician:

The physician is/was...	No	Yes
i) a member of your family (a relative)	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>
ii) one of your attendings or preceptors during your medical training	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>
iii) one of your residents or interns during your medical training	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>
iv) part of your religious community or tradition	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>
v) a physician you worked with prior to starting medical training	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>

c) Thinking about this physician, please indicate how often each statement applies to him/her:

	Never	Occasionally or Seldom	Fairly Often	Very Often or Nearly Always
a) Tries to slow down and give patients the time and help they need	<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) Makes time to pay extra careful attention to patients' problems	<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) Goes the extra mile to help take care of patients	<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) Have you ever worked closely with this physician? (Vianello et al, J of Pos Psych, 2010)

<sub>1</sub> Yes →

<sub>2</sub> No

**If Yes, when you were working with this physician, how often did you feel:**

	Never	Rarely	Sometimes	Often	Always
a. Admiration for this physician	<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>
b. Feeling of generosity	<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>
c. Feeling of openness toward others	<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>
d. The desire to do something good for people	<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>
e. The desire to be like this physician	<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>
f. The desire to become a better person	<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>

4. Based on your academic performance up to now, which quartile of your class are you in currently? (Please give your best guess.)

- <sub>1</sub> Top 25% of class  
<sub>2</sub> 2<sup>nd</sup> quartile  
<sub>3</sub> 3<sup>rd</sup> quartile  
<sub>4</sub> Bottom 25% of class

5. Please indicate your responses to the following questions:

	Yes	No	Not applicable/ rather not say
a) Are you a member of the Alpha Omega Alpha (AOA) Honor Medical Society?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b) Are you a member of the Gold Humanism Honor Society?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c) Have you ever failed a course or rotation?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

6. Please indicate whether you obtained the **highest grade (A, or Honors, or equivalent)** for the following clinical rotations:

	Yes	No	Not applicable/ rather not say
a) Internal Medicine	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b) Family Medicine	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c) Pediatrics	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d) Surgery	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
e) Obstetrics/Gynecology (OB/GYN)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
f) Psychiatry	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
g) The clinical specialty you have chosen for residency training	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

7. Do you plan to locate your practice in a medically underserved area?

- <sub>1</sub> Yes  
<sub>2</sub> No  
<sub>3</sub> Undecided

a. If Yes, indicate the likely location:

- <sub>1</sub> Rural community  
<sub>2</sub> Inner-city community  
<sub>3</sub> Other (please specify): \_\_\_\_\_

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

- <sub>1</sub> Family Medicine
- <sub>2</sub> Internal Medicine
- <sub>3</sub> Pediatrics
- <sub>4</sub> Obstetrics/Gynecology
- <sub>5</sub> Anesthesiology
- <sub>6</sub> Dermatology
- <sub>7</sub> Emergency Medicine
- <sub>8</sub> Neurology
- <sub>9</sub> Ophthalmology
- <sub>10</sub> Orthopedic Surgery
- <sub>11</sub> Otolaryngology
- <sub>12</sub> Pathology
- <sub>13</sub> Psychiatry
- <sub>14</sub> Radiology (diagnostic)
- <sub>15</sub> Surgery (general)
- <sub>16</sub> Urology
- <sub>-1</sub> Undecided
- <sub>-2</sub> 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"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. become a hospitalist*?	<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. pursue a loan repayment program (e.g., National Health Service Corps)?	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

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

9. 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"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b) Desire for a manageable lifestyle	<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) Family considerations and/or expectations	<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) Expected income for different specialties	<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) Desire to follow in the footsteps of a physician you admire	<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) A deep sense of calling to a particular specialty	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
g) The extent to which physicians in different specialties seem to be <b>burned out</b> by their work	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

In the following items, 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.

10. 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. (IOO-1)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b) I feel as though I have made a difference to many people. (IOO-4)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c) I have important skills that I try to teach others. (IOO-12)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d) My actions have a positive effect on other people. (IOO-14)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e) People come to me for advice. (IOO-19)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

11. 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.

(shortened 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 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
b) 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
c) 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
d) 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
e) 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
f) 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

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

(shortened Empathic concern subscale from IRI: Davis, JSAS Catalog of Selected Documents in Psychology, 1980)

	<b>Does Not Describe Me Well</b>				<b>Describes Me Very Well</b>
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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) 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
c) 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
d) 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
e) 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

Now 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.

13. **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)

	<b>Never</b>	<b>Occasionally or Seldom</b>	<b>Fairly Often</b>	<b>Very Often or Nearly Always</b>
	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
a) I really try to slow down and give patients the time and help they need. (Attention) (A)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b) I make time to pay extra careful attention to patients' problems. (Attention) (IOO)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c) I go the extra mile to help take care of my patients. (Compassion) (A)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d) I make a special point of being kind to patients who are suffering. (Compassion) (IOO)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e) I eagerly look for moments in which I can teach patients something helpful to them. (IOO)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
f) I make it a point to let my patients know how much I care about and appreciate them. (Verbal Expression) (IOO)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

14. 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) 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
d) 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
e) 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
f) 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

15. 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) 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
c) 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
d) 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
e) 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

## YOUR MORAL BELIEFS

16. In your clinical experiences, when you decide whether something is right or wrong, to what extent are the following considerations relevant to your thinking?

(Moral Foundations Questionnaire: Graham, Haidt, Nosek, 2008)	Not At All Relevant	Not Very	Slightly	Somewhat	Very	Extremely Relevant
a) Whether or not someone was harmed (revised MFQ-12) (Harm/Care)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b) Whether or not some people were treated differently than others (MFQ-2) (Fairness/Reciprocity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c) Whether or not someone did something to betray his or her team (revised MFQ-9) (In-group Loyalty)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d) Whether or not someone showed a lack of respect for legitimate authority (revised MFQ-4) (Authority/Respect)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e) Whether or not someone did something disgusting (MFQ-11) (Purity/Sanctity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f) Whether or not someone suffered emotionally (MFQ-1) (Harm/Care)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g) Whether or not someone ended up profiting more than others (revised MFQ-13) (Fairness/Reciprocity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h) Whether or not someone put the interests of the team above his/her OWN (revised MFQ-14) (In-group Loyalty)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i) Whether or not someone failed to fulfill the duties of his or her role (revised MFQ-10) (Authority/Respect)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j) Whether or not someone violated standards of purity and decency (MFQ-5) (Purity/Sanctity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
k) Whether or not someone was good at math (MFQ-6) (used to catch if people are paying attention)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
l) Whether or not someone cared for someone weak or vulnerable (MFQ-7) (Harm/Care)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
m) Whether or not someone acted unfairly (MFQ-8) (Fairness/Reciprocity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
n) Whether or not the action affected your team (revised MFQ-15) (Authority/Reciprocity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
o) Whether or not an authority failed to protect his/her subordinates (revised MFQ-3?) (Ingroup-Loyalty)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
p) Whether or not someone acted in a virtuous or uplifting way (revised MFQ-16) (Purity/Sanctity)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5



## YOUR PERSONALITY AND OTHER LIFE PERSPECTIVES

17. To what extent do you agree with the way these statements describe you as a person?

(NEO Personality Inventory-Revised by Paul T. Costa Jr., PhD and Robert R. McCrae, PhD, Copyright 1978, 1985, 1989, 1991, 1992)

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a) I try to be courteous to everyone I meet. (44)	<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>
b) I'm pretty good about pacing myself so as to get things done on time. (25)	<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>
c) When I'm under a great deal of stress, sometimes I feel like I'm going to pieces. (86)	<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>
d) I am intrigued by the patterns I find in art and nature. (98)	<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>
e) I really enjoy talking to people. (122)	<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>
f) I often feel tense and jittery. (91)	<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>
g) I like to be where the action is. (142)	<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>
h) I often feel as if I'm bursting with energy. (107)	<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>
i) I often get angry at the way people treat me. (6)	<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>
j) Some people think of me as cold and calculating. (74)	<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>
k) I have little interest in speculating on the nature of the universe or the human condition. (173)	<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>
l) I generally try to be thoughtful and considerate. (104)	<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>
m) I never seem to be able to get organized. (130)	<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>
n) I often enjoy playing with theories or abstract ideas. (23)	<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>
o) I strive for excellence in everything I do. (200)	<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>

18. 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"/> <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>
b) I have become more callous toward people since I took this 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>
c) I feel I'm positively influencing other people's lives through 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>

19. Please answer to what extent each of the following statements describes you.

(Meaning in Life Questionnaire, short form: Steger, et.al, 2006 and Satisfaction with Life Scale: Diener, et. Al, 1985)

	<b>Absolutely Untrue</b>	<b>Mostly Untrue</b>	<b>Somewhat Untrue</b>	<b>Can't Say True or False</b>	<b>Somewhat True</b>	<b>Mostly True</b>	<b>Absolutely True</b>
a) My life has a clear meaning or purpose. (MLQ-P)	<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>	<input type="checkbox"/> <sub>7</sub>
b) I have found a satisfactory meaning in life. (MLQ-P)	<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>	<input type="checkbox"/> <sub>7</sub>
c) I have a clear sense of what gives meaning to my life. (MLQ-P)	<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>	<input type="checkbox"/> <sub>7</sub>
d) In most ways, my life is close to my ideal. (SWLS)	<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>	<input type="checkbox"/> <sub>7</sub>
e) The conditions of my life are excellent. (SWLS)	<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>	<input type="checkbox"/> <sub>7</sub>
f) I am satisfied with my life. (SWLS)	<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>	<input type="checkbox"/> <sub>7</sub>
g) So far I have gotten the important things I want in life. (SWLS)	<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>	<input type="checkbox"/> <sub>7</sub>
h) If I could live my life over, I would change almost nothing. (SWLS)	<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>	<input type="checkbox"/> <sub>7</sub>

20. 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)

	<b>Disagree Strongly</b>	<b>Disagree Somewhat</b>	<b>Neither Agree nor Disagree</b>	<b>Agree Somewhat</b>	<b>Agree Strongly</b>
a) I deserve more things in my 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>	<input type="checkbox"/> <sub>5</sub>
b) Things should go my 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>	<input type="checkbox"/> <sub>5</sub>
c) I feel entitled to more of everything.	<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>

## YOUR RELIGIOUS CHARACTERISTICS

21. 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 important in my life  
<sub>5</sub> Not applicable. I have no religion

22. To what extent do you consider yourself a spiritual person?

- <sub>1</sub> Very spiritual  
<sub>2</sub> Moderately spiritual  
<sub>3</sub> Slightly spiritual  
<sub>4</sub> Not spiritual at all

23. 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

24. 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. If Jewish, 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. If Christian, do you consider yourself *evangelical*?  
<sub>1</sub> Yes  
<sub>2</sub> No

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

	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly
a) 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>
b) There is one religion that is uniquely and comprehensively true.	<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>
d) I try hard to carry my religious beliefs over into all my other dealings in 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>
e) My whole approach to life is based on my 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>

26. Current year in medical school:

- <sub>1</sub> First year    <sub>2</sub> Second year    <sub>3</sub> Third year    <sub>4</sub> Fourth year    <sub>5</sub> Other : \_\_\_\_\_

*If you have not already answered these questions earlier in the study, we hope you will take the opportunity now to complete the responses below, or provide another update if you like.*

27. Please describe how your current experiences in medical school have influenced the kind of doctor you are becoming (any turning points, highlights, or obstacles?)

28. Lastly, please describe a clinical experience you observed that, in your opinion, raised an ethical or professional issue. Then describe how you thought the situation should have been approached.

29. If you would be willing to participate in a 15-30 minute **confidential phone interview** about your experiences during medical school, please indicate below the preferred way to reach you. A portion of respondents who volunteer will be contacted. If selected, you will be compensated **\$50** for your time.

- Phone number: (\_\_\_\_) \_\_\_\_\_
- Email me \_\_\_\_\_

30. If you would be willing to participate in a confidential peer-rating study in which you will have the opportunity to confidentially rate your classmates who are also enrolled in this study, please indicate your interest below. Your classmates will also have the opportunity to rate you, but only if you agree to participate. If selected, you will be compensated **\$50** for your participation in this study.

- Yes, I am interested in participating
- No thanks

**THANK YOU FOR YOUR PARTICIPATION!**