Appendix 1: Template of the Questionnaire Presented to Medical Doctors (Residents and Attending Physicians).

RESEARCH PROJECT

IS THE FETAL STATUS REASSURING?

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY
UNIVERSITY OF TEXAS MEDICAL BRANCH
301 UNIVERSITY BLVD.
GALVESTON, TEXAS 77555
For any questions please contact Giuseppe Chiossi 409 643 3908

Number _______________________________

Respondent ID:  
○ MD Fellow/faculty
○ Resident

Date: ___ ___ / ___ ___/ ___ ___ ___ ___ (mm/dd/yyyy)

Affiliation: __________________________________

___________________________________________

___________________________________________

___________________________________________
IS THE FETAL STATUS REASSURING?

INSTRUCTION

The aim of this survey is to determine what could be considered reassuring fetal status according to your clinical judgment. This study includes two parts of a survey: in Part I you will be asked to evaluate the fetal status of a hypothetical laboring patient through a series of vignettes presenting different fetal heart rate tracing; in Part II you will be asked a series of questions about your background and experiences. Any information you provide in this survey is confidential and strictly for research purpose. Thank you very much for your time and effort.
PART I: THE CASE

Instructions: Please read the instructions carefully before you review the standardized case

The following case scenario of a hypothetical laboring patient intends to reproduce a common situation encountered in clinical practice. You will be asked to evaluate the fetal status through a series of vignettes presenting different fetal heart rate tracings. Each vignette consists of a 8-10 minute recording indicative of the fetal heart rate pattern in the previous 30 minutes.

1) As you will find from the information provided:
   a) There will be no indication to perform a cesarean delivery due to failure to dilate/descend, or arrest of dilatation/descent.
   b) There will not be any indication to perform an operative delivery due to maternal exhaustion during the second stage of labor.
   c) There will be no indication to augment labor with oxytocin.
   d) If you would like to perform procedures to obtain further information on the fetal status, such as fetal scalp stimulation, or if you would like to resuscitate the fetus administering fluid boluses, oxygen, or changing maternal position, please consider that in the specific case scenario no remarkable difference in the heart rate tracing would be achieved.
   e) If you would like to administer tocolytic agents such as terbutaline due to tachysystole, please consider that no significant change in the fetal heart rate and in the contraction patterns would be achieved.
   f) You will be given information on the labor curve as the patient undergoes cervical exams every 1 hour during the 1st stage of labor and every 30 minutes in the 2nd stage of labor.

2) After reviewing each vignette you will be asked if you think that the fetal condition would allow the patient to continue spontaneous labor or if delivery should be expedited due to fetal indications; if so you will provide information on how you would like to proceed and what feature in the NST prompted you to do so. There is no “right or wrong” answer, the aim of the study is to understand what you consider “non reassuring” in your daily clinical practice.

Standardized case

MG is a 32 y/o G1P0 Caucasian female at 38+5 weeks gestation according to her LMP and a 1st trimester ultrasound that presents to L&D at 8:30 am c/o painful contractions and leakage of fluid. Contractions started approximately 3 hours prior to presentation, leakage of fluid occurred 30 minutes before presenting to L&D. The patient’s BMI is 22, the estimated fetal weight is 3300 gr by Leopold and ultrasound performed at the bedside, the patient’s pelvis appears to be adequate by internal and external maneuvers, GBS screening is negative, cervical exam is 3/100/-2, fetal presentation is vertex, position is left occiput anterior. You confirm that membranes are ruptured. After admitting the patient, you position a fetal scalp electrode and an intrauterine pressure catheter to due to initial difficulties in monitoring the heart rate tracing. The patient receives epidural anesthesia for pain management; she remains normotensive and afebrile throughout labor.
9.00 am: cervical exam 3/100/-2
9.00 am

*If you are a MD Physician please answer the following questions*

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

*If you are a MD Resident please answer the following questions*

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

**List A**

*select only one of the following:*

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**

*select only one of the following:*

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

Chiossi G, Costantine MM, Pfannstiel JM, Hankins GDV, Saade GR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article.

© Copyright 2011 American College of Obstetricians and Gynecologists.
9.30 am
9.30 am

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  
   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  
   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  
   b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
10.00 am: cervical exam 4/100/-2
If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  
   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery 
   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  
   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call 
3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  
   b) No
4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery 
   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
10.30 am

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? a) Yes b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery.

If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? a) Yes b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call.

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? a) Yes b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery.

If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
11.00 am: am cervical exam 5/100/-2
11.00

**If you are a MD Physician please answer the following questions**

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call  
3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

**List A**

*select only one of the following:*

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**

*select only one of the following:*

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

The authors provided this information as a supplement to their article.  
© Copyright 2011 American College of Obstetricians and Gynecologists.
Chiossi G, Costantine MM, Pfannstiel JM, Hankins GDV, Saade GR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article.

© Copyright 2011 American College of Obstetricians and Gynecologists.
11.30 am

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
12.00 pm: cervical exam 6/100/-1
12.00 pm

**If you are a MD Physician please answer the following questions**

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes   b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

**List A**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
Chiossi G, Costantine MM, Pfannstiel JM, Hankins GDV, Saade GR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article. © Copyright 2011 American College of Obstetricians and Gynecologists.
If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
1.00 pm: cervical exam 7/100/-1
1.00 pm

**If you are a MD Physician please answer the following questions**

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  
   b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery.  
   If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  
   b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call.

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  
   b)No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery.  
   If you think that delivery is not indicated ask for the next vignette

**List A**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
Chiossi G, Costantine MM, Pfannstiel JM, Hankins GDV, Saade GR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article.
1.30 pm

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

   If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
2.00 pm: cervical exam 8/100/0
2.00 pm

**If you are a MD Physician please answer the following questions**

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes  b)No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery  
   If you think that delivery is not indicated ask for the next vignette

**List A**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**  
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
Chiossi G, Costantine MM, Pfannstiel JM, Halakia CDV, Stade CR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article.
2.30 pm

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes    b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes    b)No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a)Yes    b)No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery

   If you think that delivery is not indicated ask for the next vignette

List A

select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B

select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
3.00 pm: cervical exam 9/100/0
3.00 pm

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

<table>
<thead>
<tr>
<th>List A</th>
<th>select only one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>○ Absent variability</td>
<td></td>
</tr>
<tr>
<td>○ Minimal variability</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/prolonged early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/ prolonged variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/ prolonged late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Tachycardia</td>
<td></td>
</tr>
<tr>
<td>○ Bradycardia</td>
<td></td>
</tr>
<tr>
<td>○ Sinusoidal pattern</td>
<td></td>
</tr>
</tbody>
</table>

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  a)Yes  b)No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

<table>
<thead>
<tr>
<th>List B</th>
<th>select only one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>○ Absent variability</td>
<td></td>
</tr>
<tr>
<td>○ Minimal variability</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/prolonged early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/ prolonged variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Intermittent/ prolonged late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged early decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged variable decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Recurrent/ prolonged late decelerations</td>
<td></td>
</tr>
<tr>
<td>○ Tachycardia</td>
<td></td>
</tr>
<tr>
<td>○ Bradycardia</td>
<td></td>
</tr>
<tr>
<td>○ Sinusoidal pattern</td>
<td></td>
</tr>
</tbody>
</table>

The authors provided this information as a supplement to their article.

© Copyright 2011 American College of Obstetricians and Gynecologists.
3.30 pm

If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?  
   a) Yes  b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

List A

select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B

select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
4.00 pm: cervical exam 10/100/+1
If you are a MD Physician please answer the following questions

1) Would you deliver the patient via cesarean section (CS) for non reassuring fetal status (NRFS) if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you deliver the patient via CS for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes? 
   a) Yes  b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   If you think that delivery is not indicated ask for the next vignette

List A
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Intermittent/ prolonged late decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
4.30 pm: cervical exam 10/100/+2
If you are a MD Physician please answer the following questions

1) Would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

2) If the answer is yes,
   a) Select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?

   a) CS
   b) Forceps assisted vaginal delivery
   c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  b) No

4) If the answer is yes,
   a) Select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?

   a) CS
   b) Forceps assisted vaginal delivery
   c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette
List A
select only one of the following

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
5.00 pm: cervical exam 10/100/+2
5.00 pm

**If you are a MD Physician please answer the following questions**

1) Would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes,
   a) Select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?
      a) CS
      b) Forceps assisted vaginal delivery
      c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?
   a) Yes  b) No

4) If the answer is yes,
   a) Select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?
      a) CS
      b) Forceps assisted vaginal delivery
      c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette
List A
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/ prolonged variable decelerations
○ Intermittent/ prolonged late decelerations
○ Recurrent/ prolonged early decelerations
○ Recurrent/ prolonged variable decelerations
○ Recurrent/ prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
5.30 pm: cervical exam 10/100/+3
5.30 pm

If you are a MD Physician please answer the following questions

1) Would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

2) If the answer is yes,
   a) Select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?

      a) CS
      b) Forceps assisted vaginal delivery
      c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes    b) No

4) If the answer is yes,
   a) Select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery
   b) How would you expedite the delivery?

      a) CS
      b) Forceps assisted vaginal delivery
      c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette
**List A**
select only one of the following

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

**List B**
select only one of the following:

- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Intermittent/prolonged late decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
6.00 pm: cervical exam 10/100/+4
6.00 pm

If you are a MD Physician please answer the following questions
1) Would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes     b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery

   a) CS
   b) Forceps assisted vaginal delivery
   c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette

If you are a MD Resident please answer the following questions
1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes     b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes     b) No

4) If the answer is yes, select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery

   a) CS
   b) Forceps assisted vaginal delivery
   c) Vacuum assisted vaginal delivery

If you think that delivery is not indicated ask for the next vignette
List A
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/prolonged variable decelerations
○ Intermittent/prolonged late decelerations
○ Recurrent/prolonged early decelerations
○ Recurrent/prolonged variable decelerations
○ Recurrent/prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern

List B
select only one of the following:

○ Absent variability
○ Minimal variability
○ Intermittent early decelerations
○ Intermittent variable decelerations
○ Intermittent late decelerations
○ Recurrent early decelerations
○ Recurrent variable decelerations
○ Recurrent late decelerations
○ Intermittent/prolonged early decelerations
○ Intermittent/prolonged variable decelerations
○ Intermittent/prolonged late decelerations
○ Recurrent/prolonged early decelerations
○ Recurrent/prolonged variable decelerations
○ Recurrent/prolonged late decelerations
○ Tachycardia
○ Bradycardia
○ Sinusoidal pattern
6.30 pm: cervical exam 10/100/+5
6.30 pm

**If you are a MD Physician please answer the following questions**

1) Would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  
   b) No

2) If the answer is yes, 
   a) Select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to expedite delivery 
   b) How would you expedite the delivery?

   a) CS 
   b) Forceps assisted vaginal delivery 
   c) Vacuum assisted vaginal delivery 

If you think that delivery is not indicated ask for the next vignette

**If you are a MD Resident please answer the following questions**

1) Would you be so concerned about the fetal status to notify the attending physician on call if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  
   b) No

2) If the answer is yes, select amongst the options provided in list A, the fetal heart rate characteristic that would prompt you to notify the attending physician on call

3) If you were to decide, would you expedite delivery for NRFS if the displayed fetal heart rate tracing was indicative of the heart rate pattern in the previous 30 minutes?

   a) Yes  
   b) No

4) If the answer is yes, 
   a) Select amongst the options provided in list B, the fetal heart rate characteristic that would prompt you to expedite delivery 
   b) How would you expedite the delivery?

   a) CS 
   b) Forceps assisted vaginal delivery 
   c) Vacuum assisted vaginal delivery 

If you think that delivery is not indicated ask for the next vignette
List A
select only one of the following:
- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/ prolonged variable decelerations
- Recurrent/ prolonged early decelerations
- Recurrent/ prolonged variable decelerations
- Recurrent/ prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern

List B
select only one of the following:
- Absent variability
- Minimal variability
- Intermittent early decelerations
- Intermittent variable decelerations
- Intermittent late decelerations
- Recurrent early decelerations
- Recurrent variable decelerations
- Recurrent late decelerations
- Intermittent/prolonged early decelerations
- Intermittent/prolonged variable decelerations
- Recurrent/prolonged early decelerations
- Recurrent/prolonged variable decelerations
- Recurrent/prolonged late decelerations
- Tachycardia
- Bradycardia
- Sinusoidal pattern
PART II: QUESTIONNAIRE

SECTION 1: BACKGROUND INFORMATION

Instruction: In this section you will be asked about your demographic background and you medical training experience.

1) Please circle ONE OPTION from the following race/ethnicity categories about yourself.
   a) Caucasian
   b) Black/African American
   c) Asian
   d) Hispanic
   e) American Indian
   f) Alaskan Native
   g) Indian
   h) Other, specify _____________

2) The next questions are about your medical training
   a) Where did you graduate from medical school?
      School _________________________
      State__________________________
      Country _______________________
   b) If you are currently a resident or a fellow, what year of postgraduate training are you in?
      If you are a MFM faculty circle Not Applicable (NA)
      a) PGY1
      b) PGY2
      c) PGY3
      d) PGY4
      e) PGY5
      f) PGY6
      g) PGY7
      h) NA
   c) Where did you do your residency?
      If you are currently a resident circle NA
      School _________________________
      State __________________________
      Country ________________________
      ○ NA
   d) Did you complete an ABOG certified MFM fellowship?
      If you are currently a resident or a fellow circle NA
      a) Yes
      b) No
      c) NA
   e) Where did you graduate from fellowship?
      School _________________________
      State __________________________
      Country ________________________
   f) How many years have you been practicing after completion of residency?
      ________ (in years)
      a) Never married
      b) Currently married
      c) Cohabitating
      d) Separated/divorced
      e) Widowed
      f) Other, please specify _______

3) Please circle your current marital status
4) Do you have any children?  
   d) Yes  
   e) No  

5) How many children < 18 do you have?  
   ____ ____ (# of children)  

6) Please circle if any of your children is affected by any of the following conditions?  
   a) Cerebral palsy  
   b) Seizure disorder  
   c) Mental retardation  
   d) Motor function impairment  
   e) Neurodevelopmental delay  

7) Is any of the following affected by a debilitating medical or psychiatric condition that severely worsens the quality of life, requires chronic treatment or makes the person not self sufficient?  
   a) Child Condition, specify: ____________  
      Is this stressful for you?  
      a) Yes  
      b) No  
   b) Parent Condition, specify: ____________  
      Is this stressful for you?  
      a) Yes  
      b) No  
   c) Partner/spouse Condition, specify: ____________  
      Is this stressful for you?  
      a) Yes  
      b) No  
   d) Sibling Condition, specify: ____________  
      Is this stressful for you?  
      a) Yes  
      b) No  

SECTION 2: PROFESSIONAL EXPERIENCE AND CLINICAL PRACTICE  
Instruction: In this section you will be asked about your previous experience and your standard in clinical practice  

1) What percentage of your professional time do you dedicate to Labor and Delivery on a yearly basis?  
   _________%  

2) What is the percentage of laboring patients that require intervention to expedite delivery due to non reassuring fetal status in your practice?  
   _________%  

3) Amongst patients in the second stage of labor requiring intervention for non reassuring fetal status, what is the percentage of the following delivery methods in your practice? Please make sure that the total percent will be 100%.  
   a) _____% Cesarean section  
   b) _____% Vacuum assisted vaginal delivery  
   c) _____% Forceps assisted vaginal delivery  

4) Please circle if any of the following occurred to you during operative deliveries in your practice  
   a) 4th degree perineal lacerations  
   b) Persistent marks on the infant’s fetal face/head  
   c) Fetal scalp lacerations  
   d) Cephalohematoma  
   e) Maternal fecal or urinary incontinence  
   f) No complications  
   a) 4th degree perineal lacerations  
   b) Persistent marks on the infant’s fetal face/head  
   c) Fetal scalp lacerations  
   d) Cephalohematoma  
   e) Maternal fecal or urinary incontinence  
   f) No complications
Study ID __________________________ Date: __________________ (dd/mm/yyyy)

g) I do not perform forceps assisted vaginal deliveries

5) Please circle if any of the following occurred to your colleagues or instructors

<table>
<thead>
<tr>
<th>Forceps assisted vaginal delivery</th>
<th>Vacuum assisted vaginal delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) 4th degree perineal lacerations</td>
<td>a) 4th degree perineal lacerations</td>
</tr>
<tr>
<td>b) Persistent marks on the infant’s fetal face/head</td>
<td>b) Persistent marks on the infant’s fetal face/head</td>
</tr>
<tr>
<td>c) Fetal scalp lacerations</td>
<td>c) Fetal scalp lacerations</td>
</tr>
<tr>
<td>d) Cephalohematoma</td>
<td>d) Cephalohematoma</td>
</tr>
<tr>
<td>e) Maternal fecal or urinary incontinence</td>
<td>e) Maternal fecal or urinary incontinence</td>
</tr>
<tr>
<td>f) No complications</td>
<td>f) No complications</td>
</tr>
<tr>
<td>g) They do not perform forceps assisted vaginal deliveries</td>
<td>g) They do not perform vacuum assisted vaginal deliveries</td>
</tr>
</tbody>
</table>

6) If you were to expedite delivery in case of non reassuring fetal status during the second stage of labor would the decision on which route to choose depend on:

a) gravidity and parity?  a) yes  b) no
b) patient’s ethnicity?  a) yes  b) no
c) patient’s type of insurance?  a) yes  b) no
d) level of education?  a) yes  b) no

7) What is the percentage of uninsured patients in your practice?  _____%

8) How do you perceive your labor and delivery skills?  
   a) Excellent  b) Good  c) Fair  d) Poor  e) Not sure

9) What do you think your colleagues think about your labor and delivery skills?  
   a) Excellent  b) Good  c) Fair  d) Poor  e) Not sure

10) If you could have an obstetrician to admire, list the 3 characteristics that person should have from the most to the least important.  
    a) __________________________  b) __________________________  c) __________________________

11) Have you ever had permanent neonatal outcome such as cerebral palsy, mental retardation, motor function impairment or neurodevelopmental delay that were attributed to intrapartum events?  
    a) Yes  b) No

12) Have any of your colleagues ever had permanent neonatal outcome such as cerebral palsy, mental retardation, motor function impairment or neurodevelopmental delay that were attributed to intrapartum events?  
    a) Yes  b) No

13) Have you ever had any case of shoulder dystocia?  
    a) Yes  b) No

Chiossi G, Costantine MM, Pfannstiel JM, Hankins GDV, Saade GR, Wu ZH. Intervention for fetal distress among obstetricians, registered nurses, and residents: similarities, differences, and determining factors. Obstet Gynecol 2011;118. The authors provided this information as a supplement to their article.

© Copyright 2011 American College of Obstetricians and Gynecologists. Page 51 of 55
14) Have you ever had any of the following as a complication of shoulder dystocia as listed? Please circle all that happened.

a) Brachial plexus palsy
b) Cerebral palsy
c) Motor function impairment
d) Neurodevelopmental delay
e) Fracture of the humerus/radius/ulna?
f) No complications

15) The following questions are related to the 2008 National Institute of Child Health and Human Development workshop report on electronic fetal monitoring.

a) Are you familiar with new subdivision of the fetal monitoring tracings in Class 1, 2, 3?
   a) Yes
   b) No
b) Do you agree with the new classification?
   a) Yes
   b) No
c) Has this classification changed your clinical practice?
   a) Yes
   b) No
d) If your clinical practice has changed due to the new classification has the
   • number of cesarean section for non reassuring fetal status?
     a) Decreased
     b) Increased
     c) Remained the same
   • number of operative deliveries for non reassuring fetal status?
     a) Decreased
     b) Increased
     c) Remained the same

16) Has any professional licensing or disciplinary body limited, restricted, suspended, or revoked any professional license, certificate, or registration granted to you, or imposed a find or reprimand, or taken any other disciplinary action against you?

   a) Yes
   b) No

17) Have you ever been subject to, or do you currently have pending, any complaint, investigation, charge, or disciplinary action by any licensing or disciplinary body?

   a) Yes
   b) No

18) Have you ever been named in a malpractice suit?

   a) If the answer if yes, was it related to a laboring patient?
     a) Yes
     b) No __ please skip to Section 3.
   b) How many malpractice suits have you ever been named in?
     __________ (number of times)
### SECTION 3: SELECTED SOCIAL-PSYCHOLOGICAL EXPERIENCES

This section contains items about emotions, moods, thoughts, and behavior. Place an x in the box under the yes or no column for each question to indicate whether it describes how you have been acting, feeling, thinking. If the item does not apply to you then place an x in the box “no”. Please answer every question.

<table>
<thead>
<tr>
<th>DURING THE LAST 2 WEEKS</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Did you feel sad or depressed?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>2) Did you feel sad or depressed for most of the day, nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>3) Did you get less joy or pleasure from almost all the things you normally enjoy?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>4) Were you less interested in almost all the activities you are usually interested in?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>5) Was your appetite significantly smaller than usual nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>6) Was your appetite significantly greater than usual nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>7) Did you sleep at least 1 – 2 hours less than usual nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>8) Did you sleep at least 1 – 2 hours more than usual nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>9) Did you feel very jumpy and physically restless and have a lot of trouble sitting calmly in a chair, nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>10) Did you feel tired out nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>11) Did you frequently feel guilty about things you have done?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>12) Did you put yourself down and have negative thoughts about yourself nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>13) Did you feel like failure nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>14) Did you have problems concentrating nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>15) Was decision making more difficult than normal nearly every day?</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DURING THE PAST 6 MONTHS</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Were you a nervous person on most days?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>2) Did you worry a lot that bad things might happen to you or someone close to you?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>3) Did you worry about things that other people said you shouldn’t worry about?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>4) Were you worried and anxious about a number of things in your daily life on most days?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>5) Did you often feel restless or on the edge because you were worrying?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>6) Did you often have problems falling asleep because you were worrying about things?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>7) Did you often feel tension in your muscles because of anxiety or stress?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>8) Did you often have difficulties concentrating because your mind was on your worries?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>9) Were you often snappy or irritable because you were worrying or were feeling stressed out?</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>10) Was it hard for you to control or stop your worrying on most days?</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

**Please circle a number for each item which is appropriately described your experience. Please rate average occurrence of each item during the prior week up to and including the time of interview**

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Time spent on obsessions</td>
<td>0 hr/day</td>
<td>0-1 hr/day</td>
<td>1-3 hr/day</td>
<td>3-8 hr/day</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2) Interference from obsessions</td>
<td>None</td>
<td>Mild</td>
<td>Definite but manageable</td>
<td>Substantial impairment</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3) Distress from obsessions</td>
<td>None</td>
<td>Mild</td>
<td>Moderate but manageable</td>
<td>Severe</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4) Resistance to obsessions</td>
<td>Always resist</td>
<td>Much resistance</td>
<td>Some resistance</td>
<td>Often yields</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5) Control over obsessions</td>
<td>Complete control</td>
<td>Much control</td>
<td>Some control</td>
<td>Little control</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6) Time spent on compulsions</td>
<td>0 hr/day</td>
<td>0-1 hr/day</td>
<td>1-3 hr/day</td>
<td>3-8 hr/day</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7) Interference from compulsions</td>
<td>None</td>
<td>Mild</td>
<td>Definite but manageable</td>
<td>Substantial impairment</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8) Distress from compulsions</td>
<td>None</td>
<td>Mild</td>
<td>Moderate but manageable</td>
<td>Severe</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9) Resistance to compulsions</td>
<td>Always resist</td>
<td>Much resistance</td>
<td>Some resistance</td>
<td>Often yields</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10) Control over compulsions</td>
<td>Complete control</td>
<td>Much control</td>
<td>Some control</td>
<td>Little control</td>
</tr>
<tr>
<td></td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>
SECTION 4: RISK ATTITUDE

The decisions we make in many areas of life, in both private and professional contexts, will often contain an element of uncertainty and risk. Our attitudes to risk (ie, the probability of an undesirable situation occurring) vary greatly. The following is a list of 6 statements concerning attitude to risk. We would like you to answer according to how true these statements are for you, using a scale from 1 to 6, in which 1 is “totally disagree” and 6 is “totally agree.” For each statement below please place an x in the box that most closely describes your attitude.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Totally Disagree</th>
<th>Totally Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) I enjoy taking risks.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
<tr>
<td>2) I try to avoid situations that have uncertain outcomes.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
<tr>
<td>3) Taking risks does not bother me if the gains involved are high.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
<tr>
<td>4) I consider security an important element in every aspect of my life.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
<tr>
<td>5) People have told me that I seem to enjoy taking chances.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
<tr>
<td>6) I rarely, if ever, take risks when there is another alternative.</td>
<td>□ 1</td>
<td>□ 2</td>
</tr>
<tr>
<td></td>
<td>□ 3</td>
<td>□ 4</td>
</tr>
<tr>
<td></td>
<td>□ 5</td>
<td>□ 6</td>
</tr>
</tbody>
</table>

When you make decisions about type of delivery (both vaginal and cesarean), would you take into consideration the risk of experiencing any of the following situations. Please choose 1 option for each line by placing an x in 1 box.

<table>
<thead>
<tr>
<th>The risk of …</th>
<th>Often</th>
<th>Occasionally</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) a complaint being made to your employer</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>2) a complaint being made to the State Medical Board</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>3) a case being taken to court (litigation threat)</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>4) a case being the object of negative discussion at a morning meeting/on a ward (criticized by colleagues)</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>5) a case receiving negative attention in the mass media (being criticized in mass media)</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

The information you provided is strictly confidential for research use only.

Thank you very much for your participation.