

Questionnaire

General information

1. Age:

2. Gender:

Male

Female

3. What is your professional status?

Resident doctor

Specialist doctor

4. What is your specialty;

Vascular surgery

Haematology

Gastroenterology

General practice

General surgery

Dermatology

Endocrinology

Cardiology

Cardiac surgery

Neurology

Neurosurgery

Nephrology

Orthopaedic

Urology

Ophthalmology

Internal medicine

Oncology

Obstetrics & Gynaecology

Plastic surgery

Respiratory medicine

Rheumatology

Psychiatry

ENT

Thoracic surgery

ICU

Craniofacial surgery

5. How many years of experience do you have as a doctor? (If you are a specialist doctor, please report only the years of experience you have as a specialist doctor)

6. Do you have previous experience (>3 months) with antimicrobial stewardship programmes (ASPs)?

Yes No

7. How often do you have patients with multidrug-resistant (MDR) Gram-negative infections under your care?

Not at all
1-4 times/month
5-10 times/month
>10 times/month

8. How often do you seek ASP consultation for patients with MDR Gram-negative infections who are under your care?

Not at all
1-4 times/month
5-10 times/month
>10 times/month

9. How often do you accept the recommendations provided by the ASP team?

Never
Rarely
Sometimes
Often
Always

Perceptions

10. How much do you disagree or agree with each of the following statements?

1 = Strongly disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly agree

- Prospective audit and feedback strategy is more effective than preauthorization strategy in improving patients' outcome
1 2 3 4 5

- Prospective audit and feedback strategy is more educational for me than preauthorization strategy
1 2 3 4 5

- Preauthorization strategy suits a Greek hospital better than prospective audit and feedback strategy
1 2 3 4 5

- Preauthorization strategy should substitute prospective audit and feedback strategy in our hospital
1 2 3 4 5

- Regardless of the strategy followed, the implementation of an ASP improves patients' outcome compared to the absence of such a program
1 2 3 4 5

11. How much do you disagree or agree with each of the following statements regarding in-person consultation as the followed practice for the ASP in our hospital?

1 = Strongly disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly agree

- It is the preferred practice for the ASP
1 2 3 4 5

- It can be largely replaced by telephone or electronic communication

1 2 3 4 5

- It is welcome as often as possible

1 2 3 4 5

- It is also a very useful educational process for me regarding prudent use of antimicrobials

1 2 3 4 5

- It disrupts my daily life in the clinic

1 2 3 4 5

12. How helpful do you find each of the following interventions for the improvement of the current ASP?

1 = Not helpful, 2 = Slightly helpful, 3 = Somewhat helpful, 4 = Very helpful, 5 = Extremely helpful

- Availability of hospital resistance data and development of hospital guidelines for the treatment of infections caused by multidrug-resistant organisms

1 2 3 4 5

- More educational sessions and training regarding optimal use of antimicrobials

1 2 3 4 5

- Stewardship-focused mobile/tablet applications

1 2 3 4 5

- More contact via telephone with ASP team members

1 2 3 4 5

- Communication via hospital's electronic systems

1 2 3 4 5

13. During COVID-19 pandemic, the ASP must be:

- continued and further developed
- postponed

Attitudes and Practices

14. The existence of the ASP in our hospital:

1 = Not at all, 2 = Slightly, 3 = Moderately, 4 = Significantly, 5 = Extremely

- Increased my concern regarding overuse/misuse of antimicrobials and antimicrobial resistance
1 2 3 4 5
- Amplified my awareness regarding appropriate use of antimicrobials in my daily clinical practice
1 2 3 4 5
- Stimulated me to seek further knowledge on selecting the optimal antimicrobial, whenever it is needed, and its dosage, route and duration of administration
1 2 3 4 5
- Reinforced my acknowledgement of the importance of microbiological analyses for infections' diagnosis and treatment
1 2 3 4 5
- Incited me to perform closer monitoring of the microbiological data of my patients
1 2 3 4 5
- Enriched my way of thinking about the diagnosis and treatment of infections caused by multidrug-resistance organisms

1 2 3 4 5

- Affected me towards multidisciplinary and personalised care of patients with infections caused by multidrug-resistant organisms

1 2 3 4 5

- Influenced my daily practice towards more rigorous implementation of infection prevention and control measures

1 2 3 4 5

15. Would you be willing to participate more actively in the ASP in the future?

Yes No