

**POST-COURSE SELF-ASSESSMENT SURVEY - Assessing the educational effectiveness of a family planning pre-clinical elective for medical students**

**Dear Student,**

**Thank you for your participation in this elective course. We greatly appreciated your interest in and support of this project.**

**We hope you have enjoyed the peer interaction and discussion this course generated and hope you find the information presented beneficial to you in your future medical career.**

**You will also be completing a post-course evaluation today and turning in your reflection papers. Please feel free to make comments and suggestions for future revisions of this course.**

**Sincerely,**

**Lance Talmage MD, Professor, University of Toledo College of Medicine**

**Kari Stausmire, Medical Student, University of Toledo College of Medicine**

**Claire Meikle, Medical Student, University of Toledo College of Medicine**

**Please contact Kari Stausmire via email for any research related questions at [kari.stausmire@rockets.utoledo.edu](mailto:kari.stausmire@rockets.utoledo.edu)**

**Yes use my data for research       NO do not use my data and return this form to me**

**Print Your Name Here For Course Credit \_\_\_\_\_**

1. I can accurately and comfortably elicit a complete sexual history from a patient

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

2. I have a solid medical knowledge base of available hormonal contraceptive methods.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

3. I have a solid medical knowledge base of available non-hormonal contraceptive methods.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

4. I have a solid medical knowledge base of available emergency contraceptive methods.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

5. I have a solid medical knowledge base of available barrier contraceptive methods.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

6. I have a solid medical knowledge base of available permanent contraceptive methods.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

7. I have a solid medical knowledge base of common causes of infertility in men.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

8. I have a solid medical knowledge base of common causes of infertility in women.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

                

9. I have a solid medical knowledge base regarding assisted reproductive technology procedures.

Strongly disagree      Somewhat disagree      Somewhat agree      Strongly agree

10. I have a solid medical knowledge base of spontaneous abortions (miscarriages) and the resulting medical management.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

11. I have a solid medical knowledge base regarding surrogacy pregnancy options.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

12. I have a solid medical knowledge base regarding 1st trimester termination options.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

13. I have a solid medical knowledge base regarding 2nd trimester termination options.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

14. I have a solid medical knowledge base regarding adoption options.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

15. I have a solid medical knowledge base regarding the most common fetal abnormalities and maternal complications referred to maternal-fetal medicine.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

16. I am confident in my ability to provide clear, comprehensive, and unbiased contraceptive options counseling to a patient.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

17. I am confident in my ability to provide unbiased and accurate pregnancy options counseling to women who are undecided about continuing a pregnancy.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

18. I will make sexual history taking a routine part of my H&P practice

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

19. I support the use of emergency contraception use following unprotected sex.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

20. I support the use of assisted reproductive techniques for infertile couples.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

21. I support the use of contracted surrogate mothers to carry a pregnancy for another person.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

22. I support adoption by married heterosexual couples who can provide a safe, stable environment.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

23. I support adoption by unmarried heterosexual couples who can provide a safe, stable environment.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

24. I support adoption by married homosexual couples who can provide a safe, stable environment.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

25. I support adoption by unmarried homosexual couples who can provide a safe, stable environment.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

26. I support adoption by single individuals of either gender who can provide a safe, stable environment.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

27. I support adoption for any individual(s) of same race/ethnicity as the child who can support a safe stable environment.

Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

28. I support adoption for any individual(s) of different race/ethnicity as the child who can support a safe stable environment.

Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

29. I support a woman's right to choose to continue or terminate a pregnancy regardless of the reason.

Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

30. I support a woman's right to terminate a pregnancy only in the following situations:

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
Rape	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Incest	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fetal anomalies- Down's Syndrome	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fetal anomalies - minor, lifelong	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fetal anomalies - major, lifelong	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fetal anomalies - Incompatible with life or predicted early death	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maternal risk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial burden	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional distress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychiatric disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender selection for genetic reasons	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender selection for gender preference	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Viral infections (Zika virus)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

31. I would include termination as a pregnancy option in my patient discussion even if I am personally opposed to pregnancy termination.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

32. I would assist my patient in finding an abortion provider if requested, even if I am personally opposed to pregnancy termination.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

33. I believe that pregnancy termination should be legal during the 1st trimester (0-12 weeks).

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

34. I believe that pregnancy termination should be legal during the 2nd trimester (13-22) weeks).

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

35. I would consider providing pregnancy terminations in my future practice.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

36. I will discuss the following contraceptive options with my female patients in the future:

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
Hormonal birth control pill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hormonal birth control patch	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nuva ring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long term implantable device	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intrauterine device (IUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency contraception	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Condoms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fertility awareness methods/ Natural family planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diaphragms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depoprovera injections	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tubal ligation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abstinence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vasectomy option for male partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spermicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

37. I will discuss the following contraceptive options with my male patients in the future:

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
Hormonal birth control pill for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hormonal birth control patch for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nuva ring for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long term implantable device for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intrauterine device (IUD) for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Contraception for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Condoms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fertility awareness methods/ Natural family planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Diaphragms for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Depoprovera injections for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tubal ligation for female partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abstinence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vasectomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spermicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>