

FIGURE W2

Medical Records: Yes/No/Partial _____ Other (specify) _____

Office Operations

Staff involvement in patient education MD NP PA RN LPN MA Other _____

Staff involvement in reminder systems MD NP PA RN LPN MA Other _____

Patient phone calls returned by MD NP PA RN LPN MA Other _____

X-ray onsite/offsite _____

Lab onsite; CLIA approved: Yes/No _____
 offsite _____

Patient Education Materials

Accessibility	Low	Medium	High
Patient usage	Low	Medium	High
Quality	Low	Medium	High

Physician Referrals

Please describe in fieldnotes the referral patterns, e.g., who is referring; to whom (specialties) are they referring; where is referral located (distances); why are referrals made.

Medical Records

1. Chart Type: Dictated/transcribed _____ Handwritten _____ Computerized _____

2. Chart Format: Individual _____ Individual within Family _____ Family chart _____

3. Chart Organization: Unorganized/Poorly Organized _____ Somewhat Organized _____ Well-organized _____

4. Mgmt of Chart Flow: Poor _____ Fair _____ Good _____ Excellent _____

5. Chart accuracy: Poor _____ Fair _____ Good _____ Excellent _____

Personnel

Degree of Friendliness among Staff	Low	Medium	High
Degree of Friendliness toward Patients	Low	Medium	High
Degree of Office Efficiency	Low	Medium	High
Research Nurse Level of Comfort in Office	Low	Medium	High
Ability to Work In Unscheduled Patients	Low	Medium	High
Degree of Patient Privacy Observed	Low	Medium	High

Office Culture (global rating)

How important is taking care of patient's needs	Low	Medium	High
How important is keeping on schedule	Low	Medium	High
How important is handling urgencies/emergencies	Low	Medium	High
How important is finances	Low	Medium	High
How important is doing prevention	Low	Medium	High
How important is managing chronic illness	Low	Medium	High
How important is family in patient care	Low	Medium	High
How important is community/public health	Low	Medium	High
How important is patient teaching	Low	Medium	High
How important is record-keeping	Low	Medium	High
How important is feeling of "pressured"	Low	Medium	High

Physician Characteristics: _____

How much do you think your presence changed _____ Alot
 the physician's behavior during patient visits? _____ Quite a bit

FIGURE W2

_ Moderately

 _ Slightly

 _ Not at all

Please rate the physician's:

Intuition (key in on problem)	Excellent	Very Good	Good	Fair	Poor
Patient empowerment	Excellent	Very Good	Good	Fair	Poor
Listening ability	Excellent	Very Good	Good	Fair	Poor
Communication skills	Excellent	Very Good	Good	Fair	Poor
Prioritization	Excellent	Very Good	Good	Fair	Poor
Thoroughness (follow-through)	Excellent	Very Good	Good	Fair	Poor
Focus on comprehensive care	Excellent	Very Good	Good	Fair	Poor
Ability to stay on time	Excellent	Very Good	Good	Fair	Poor
Sensitivity to the patient's agenda	Excellent	Very Good	Good	Fair	Poor
Knowledge of patients as people	Excellent	Very Good	Good	Fair	Poor
Focus on prevention	Excellent	Very Good	Good	Fair	Poor
Use of WOO for prevention	Excellent	Very Good	Good	Fair	Poor
Patient teaching skills	Excellent	Very Good	Good	Fair	Poor
Use of patient education	Excellent	Very Good	Good	Fair	Poor
Use of WOO for teaching	Excellent	Very Good	Good	Fair	Poor
Affiliation toward patient	Excellent	Very Good	Good	Fair	Poor
Physical touch/closeness	Excellent	Very Good	Good	Fair	Poor
Eye contact	Excellent	Very Good	Good	Fair	Poor

During observation period:

Physician Workload	Monday	Tuesday	Wednesday	Thursday	Friday
# patients scheduled/day	_____	_____	_____	_____	_____
# unscheduled patients/day	_____	_____	_____	_____	_____
# minutes behind schedule	_____	_____	_____	_____	_____ (end of day)
# of 'no shows'/day	_____	_____	_____	_____	_____

Two previous weeks - get from schedule book:

Physician Workload	Monday	Tuesday	Wednesday	Thursday	Friday
# patients scheduled/day	_____	_____	_____	_____	_____
# unscheduled patients/day	_____	_____	_____	_____	_____
# of 'no shows'/day	_____	_____	_____	_____	_____

Physician Workload	Monday	Tuesday	Wednesday	Thursday	Friday
# patients scheduled/day	_____	_____	_____	_____	_____
# unscheduled patients/day	_____	_____	_____	_____	_____
# of 'no shows'/day	_____	_____	_____	_____	_____