Pediatric Public Health Curriculum Project Evaluation

As part of an evaluation of training on public health, please complete the following questionnaire. Your answers are entirely anonymous. This information WILL NOT be used for personal evaluation. Do not record your name anywhere on the sheet. If this information is ever published or disseminated, we may identify the institution but not the individual.

We estimate the total completion time of the survey to be 15 minutes. Thank you in advance for your participation.

Anonymous ID Code: Please enter one letter or number for each of the boxes. If you don’t know a particular answer, enter “X”

The first letter of my middle name__________________________
The first letter of the month I was born__________________________
The last digit of my social security number__________________________
The first letter of the city I was born__________________________

TELL US ABOUT YOURSELF

Which best describes you?
A. Pediatric Resident
B. Family Medicine Resident
C. Internal Medicine Resident
C. Other:__________________

If you are a resident, which year of training are you in?
A. PL-1
B. PL-2
C. PL-3
D. PL-4
E. Other:__________________

What is the name of your residency training program?
__________________________________________

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neither Agree or Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I am aware of what can be done to meet the needs of my patient community for health promotion</td>
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<td>b. I am aware of what can be done to meet the psycho-social needs in my patient community</td>
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<td>c. It is important for pediatricians to have knowledge and skills in public health in order to improve children’s health</td>
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<tr>
<td>d. It is important for pediatricians to have media interviewing skills in order to advocate for children</td>
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<td>e. In the future, I will get involved with community service opportunities in order to improve the health and overall living conditions of my patient community</td>
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<td>f. Merging public health principles with pediatrics is necessary to understand and address the multiple determinants of children’s health</td>
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<td>g. It is important to understand the context of children’s health within and outside the clinical setting</td>
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<td>h. It is important for pediatricians to interact and have a role with public health systems at the local level</td>
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<td>h. It is important for pediatricians to interact and have a role with public health systems at the state level</td>
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<tr>
<td>h. It is important for pediatricians to interact and have a role with public health systems at the national level</td>
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<tr>
<td>i. It is important for pediatricians to have the knowledge and understanding of our US health care system and financing</td>
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<tr>
<td>j. It is important for pediatricians to identify community resources for their patients and families</td>
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</tr>
</tbody>
</table>
1. Which of the following factors can impact pediatric obesity rates in your clinic population?
   a. Built environment
   b. School policies
   c. Hospital policies
   d. Child care policies
   e. All of the above

2. Studies on psychological and social factors that influence health have consistently implicated stress and social support in the outcome of disease and mortality. Which of the following statements support the role played by stress in disease prognosis and mortality?
   a. Widows and widowers tend to have an unusually high risk of dying soon after the death of their spouse but return to baseline risk after a month.
   b. Mortality rates of survivors are 40% to 50% higher during the 6 months after the death of a spouse relative to the mortality of married people of the same age.
   c. People who lose their jobs are 50% to 70% more likely to present with angina symptoms compared to their employed counterparts of the same age and similar demographics
   d. b and c only
   e. a and c only

3. Infant mortality is measured as the number of infants who die in the first year of life per thousand live births. Compared to other industrialized nations where does the U.S. rank?
   a. Of the 33 industrialized nations the US ranks among the top 5 countries with the lowest infant mortality rates.
   b. Of the 33 industrialized nations the US ranks among the middle with average infant mortality rates.
   c. Of the 33 industrialized nations the US ranks among the bottom 5 countries with the highest infant mortality rates.

4. The health status of populations can be determined using existing epidemiologic data that include all the following except:
   a. Vital statistics
   b. National Health and Nutrition Examination Survey
   c. U.S. Department of Health and Human Services Healthy People 2010
   d. Behavioral Risk Factors Surveillance Systems

5. Healthy People 2010 indicate the need to eliminate health disparities. Which of the following are focus areas to monitor the Nation’s progress in eliminating child health disparities?
6. A 16-year-old female sustains significant irreversible brain injury after being hit by a car while riding her bicycle. Her medical treatment and rehabilitation to restore and improve neurologic function and prevent other medical complications can be considered to be:
   a. Primary prevention
   b. Secondary prevention
   c. Tertiary prevention
   d. Routine medical examination
   e. None of the above

7. An 18-year old male has a history of being sexually active for two years. On a visit to his primary care provider, he is scheduled to undergo screening for various sexually transmitted infections. These services are considered to be:
   a. Primary prevention
   b. Secondary prevention
   c. Tertiary prevention
   d. Routine medical examination
   e. None of the above

8. The sensitivity of a screening test is defined as:
   a. Its ability to distinguish between who has a disease and who does not
   b. The probability that a patient has a disease if the test result is positive
   c. Its ability to identify correctly those who do not have a disease
   d. The probability that a patient has a disease if the test result is negative
   e. None of the above

9. A screening test is used in the same way in two similar populations in your New City, but the proportion of false positive results among those who test positive in population X is lower than that among those who test positive in population Y. What is the likely explanation for this finding?
   a. The specificity of the test is higher in population X
b. The prevalence of disease is higher in population X
c. The specificity of the test is lower in population X
d. The prevalence of disease is lower in population X
e. It is impossible to determine what caused the difference

10. Your New-City Health Department plans to reduce exposure to cigarettes in order to decrease the incidence of bladder cancer among its residents by implementing tobacco education sessions at all schools in the city. This approach best describes:

   a. Health promotion
   b. Disease prevention
   c. Disease screening
   d. All of the above
   e. None of the above

11. According to the U.S. Preventive Services Task Force (USPSTF) the following are strongly recommended clinical activities for children and adolescents based on the current evidence:

   a. Screening for chlamydial infection for all sexually active non-pregnant young women aged 24 and younger and for older non-pregnant women who are at increased risk
   b. Screening for congenital hypothyroidism in newborns.
   c. Screening urine in children older than age 5 years
   d. a and b
   e. All of the above

12. According to the American Academy of Pediatrics, pediatricians are recommended to work closely with:

   a. Women Infant and Children (WIC)
   b. Head Start Programs
   c. Local emergency-preparedness programs
   d. State Health Departments on prevention and management of obesity
   e. All of the above

13. The function of the Centers for Disease Control and Prevention include all of the following except:

   a. Collect health statistics
   b. Disease surveillance for the U.S.
   c. Grants for studies and programs
   d. Funds for Medicaid and SCHIP
14. Which of the following factors is not part of the emergency or disaster management?

   a. Mitigation measures such as safety codes
   b. Preparedness such as public education
   c. Governance such as launching mass immunization
   d. Response such as providing emergency medical care
   e. Recovery such as crisis counseling

15. The Vaccines for Children (VFC) Program is a federally funded program that provides vaccines at no cost to children who might not otherwise be vaccinated because of inability to pay. The Centers for Disease Control and Prevention plays a role in purchasing and distributing them to state health departments and local health agencies providers.

   a. True
   b. False

16. Approximately what percentage of US children have Medicaid or some other form of public insurance?

   a. 5%
   b. 15%
   c. 30%
   d. 50%

17. Some of the differences between Medicaid and the Children’s Health Insurance Program (CHIP) are:

   a. The family income eligibility requirements
   b. The federal funding contributions
   c. The age eligibility requirements
   d. The documentation of citizenship
   e. a, b and c
   f. All of the above
With respect to children 2-18 years old, please indicate whether you disagree or agree with the following statements.

<table>
<thead>
<tr>
<th>18. I feel confident in my abilities to:</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither Agree or Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td>a. Identify the leading child health issues in my community</td>
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<td>b. Consider the leading social determinants of children’s health in my approach to patient care</td>
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<td>c. Utilize community resources and develop a relationship with these community resources to improve the care and health of my patients and families</td>
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<td>d. Identify the core components of a community-based intervention to prevent disease or promote health</td>
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<td>e. Counsel my patients about health-related behavioral patterns and lifestyle habits promoting health</td>
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<td>f. Work with other health care teams or agencies to coordinate prevention services for my patients and families</td>
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<td>g. Identify local programs and public policies aimed at promoting health and prevention for children</td>
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<td>h. Interact with various media outlets (radio, TV, newspaper, etc) to effectively communicate public health issues affecting children’s health</td>
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<td>i. Perform at least one advocacy activity as described by the American Academy of Pediatrics Advocacy Modules to advocate on behalf of children’s health</td>
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