

BioFire Testing Pattern Survey

Please complete the survey below.

Thank you!

1. Name of hospital _____

2. Characteristics of hospital

(Community hospital= non-teaching hospitals that are not federally funded Combined academic + community = community hospitals with affiliations with universities, colleges, med schools Academic Pediatric hospital within hospital = Children's hospital as a part of bigger system Freestanding children's hospital = geographically, financially, clinically and administratively independent)

- Community hospital-University affiliated
 - Community hospital - Not university hospital
 - Children's hospital - University affiliated
 - Children's hospital - Not university affiliated
 - Others
-

3. Location

(Northeast : CT, ME, MA, NH, RI, NJ, NY, PA, VT Midwest: IL, IN, MI, OH, WI, IA, KS, MN, MO, NE, ND, SD South: DE, FL, GA, MD, NC, SC, VA, DC, WA, KY, AL, MS, TN, AR, LA, OK, TX West : AZ, CO, ID, MT, NV, NM, UT, WY, AK, CA, HI, OR, WA)

- US-NE
 - US-Midwest
 - US-south
 - US-West coast
 - Outside US
-

4. Your current position

- Physician (MD/DO)
 - Advance practice providers
-

5. Your specialty of practice

- Hospitalist
 - Emergency Medicine
 - Pediatric Intensive Care Unit
 - Infectious Disease
 - Neonatal Intensive Care Unit
 - Others
-

6. How long have you been practicing in this specialty

- In-training
- 1-2 years
- 3-5 years
- 6-10 years
- 10+ years

7. How long have you been using CSF BioFire (CSF meningitis/encephalitis Filmarray) at your institution?

- Not using
- 1 or less
- 2-3 years
- 4 + years

8. Did the CSF BioFire test replace single organism PCR test such as enterovirus or Herpes Simplex Virus (HSV) PCR?

- Yes, we no longer use single-organism PCR
- No , We still use single-organism PCR in some scenarios
- No, we still use single organism PCR in all scenarios

9. Is CSF BioFire test sent out to an external lab?

- Yes
- No
- I don't know

10. What is the average time to result?

- < 3 hours
- 3-6 hours
- 6- 24 hours
- >24 hours

11. Are you aware of any institutional guidelines regarding the use (ordering) of CSF BioFire testing?

- Yes
- No

12. Does your institution provide guidelines for interpreting CSF BioFire results?

- Yes
- No

13. Are you aware of the performance characteristics (sensitivity/specificity/positive predictive value/negative predictive value) of the CSF BioFire test?

- Yes
- No
- Depends on organism

14. On a scale of 1 to 5, with 5 being VERY confident, how confident are you in interpreting the results of the CSF BioFire test?

- 5 -Very Confident
- 4-Confident
- 3-Somewhat confident
- 2-Not confident
- 1-Unable to interpret

15. On a 3 week old febrile infant whose clinical picture is not consistent with bacterial meningitis would you stop antimicrobials based on positive viral (ex: enterovirus) BioFire results alone ?

- Yes
- No

Would you stop antibiotics based on a negative bacterial BioFire result and normal CSF cell counts without waiting for culture?

- Yes
 No

16. An otherwise healthy 4 yr. old patient presents with fevers and headache. His clinical features are not suspicious of bacterial meningitis/encephalitis, however, an LP is done and the CSF bacterial BioFire results are positive. Would you start antimicrobials based on positive CSF bacterial BioFire results alone?

- Yes
 No

17. In the same patient (as question no 16) would you start antimicrobials based on positive CSF bacterial BioFire results in addition to CSF cell count suggestive of meningitis?

- Yes
 No

17. In the same patient (as question no 16) would you narrow the antibiotics given the positive bacterial BioFire test without waiting for culture?

- Yes
 No

18. Would you like to enter a raffle for a chance to win a \$25 gift card?

- Yes
 No

Please enter your email address
