



Approved: 15APR10

Hospital: National ID Number: \_\_\_\_\_

Study-generated Surgeon ID: \_\_\_\_\_

Facility Type (Circle): DH(1), PH(2), RH(3), SH(4)

Today's Date: (mm/dd): \_\_\_/ \_\_\_

## EmONC Needs Assessment in Afghanistan-Part III Cesarean Section (CS) Jhpiego

### Tool 5: Self-Administered Questionnaire of Surgical Provider's Experience and Practice

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**Instructions to the Surgical Provider:** Your responses to the questions below are important. The questions ask about your training and experience; usual cesarean practices, anesthesia, and post-operative care. Please complete this questionnaire and return it to the Assessor today. Please write in or circle your response to each question. Thank you.

| 100  | Training and Experience                                                                                                                              | Response                                                 |
|------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 101  | In what year were you <i>first</i> trained to do cesarean section?<br><i>Write in the year:</i>                                                      | _ _ _ _ _                                                |
| 102  | In what year was your <i>most recent</i> training related to cesarean section?<br><i>Write in the year:</i>                                          | _ _ _ _ _                                                |
| 103  | At what institution was your <i>most recent</i> training related to cesarean section?<br><i>Write in the institution and location:</i>               | Institution: _____<br>District: _____<br>Province: _____ |
| 104a | Of all the training you received related to cesarean section, have you received:<br>...formal, <i>pre-service</i> training? <i>(circle response)</i> | Yes .....1<br>No.....0                                   |
| 104b | ...formal, <i>in-service</i> training?                                                                                                               | Yes .....1<br>No.....0                                   |
| 104c | ... <i>informal, on-the-job</i> training?                                                                                                            | Yes .....1<br>No.....0                                   |
| 105  | When was the last time you did a cesarean section?<br><i>Write in month, day, and year (mm/dd/yr):</i>                                               | Month: _____<br>Day: _____<br>Year: _____                |
| 106  | How many cesarean sections have you done in the last six (6) months?<br><i>Write in number:</i>                                                      | _____                                                    |

| 100 | Training and Experience                                                                                                      | Response                                                                                                                               |
|-----|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| 107 | How would you rate your level of confidence in doing cesarean section?<br><i>(circle one response)</i>                       | <b>Not at all</b> confident.....1<br><b>A little</b> confident.....2<br><b>Fairly Confident</b> .....3<br><b>Very Confident</b> .....4 |
| 108 | How would you rate your level of confidence in teaching cesarean section to other providers?<br><i>(circle one response)</i> | <b>Not at all</b> confident.....1<br><b>A little</b> confident.....2<br><b>Fairly Confident</b> .....3<br><b>Very Confident</b> .....4 |

*Next, we would like to ask you about the way you usually perform cesareans.*

| 200  | Usual CS Practices                                                                                                             | Response                                               |
|------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 201  | Is it your usual practice to request or administer an enema to empty the bowel in preparation for cesarean section?            | Yes .....1<br>No.....0                                 |
| 202  | Is it your usual practice to shave the lower abdomen and pubic hairs in preparation for cesarean section?                      | Yes .....1<br>No.....0                                 |
| 203a | Is it your usual practice to deliver the woman by cesarean section if the woman has the following condition?<br>... eclampsia  | Yes .....1<br>No.....0                                 |
| 203b | ... short primigravida                                                                                                         | Yes .....1<br>No.....0                                 |
| 203c | ... women with one previous cesarean section                                                                                   | Yes .....1<br>No.....0                                 |
| 203d | ... women with two previous cesarean sections                                                                                  | Yes .....1<br>No.....0                                 |
| 203e | ... women who have secondary arrest of labor with good contractions                                                            | Yes .....1<br>No.....0                                 |
| 203f | ... women who have meconium stained liquid in early labor                                                                      | Yes .....1<br>No.....0                                 |
| 204  | Is it your usual practice to do cesarean sections using...                                                                     | General Anesthesia.....1<br>Regional Anesthesia .....0 |
| 205  | Is a laryngeal mask usually in your operating theatre?                                                                         | Yes .....1<br>No.....0                                 |
| 206  | Is it your usual or routine practice to do the following?:<br>... transfuse one unit of blood during or shortly after cesarean | Yes .....1<br>No.....0                                 |
| 207  | ...open the abdomen by transverse incision                                                                                     | Yes .....1<br>No.....0                                 |
| 208  | ...open the uterine cavity with a vertical incision                                                                            | Yes .....1<br>No.....0                                 |

| <b>200</b> | <b>Usual CS Practices</b>                                                                                                                  | <b>Response</b>        |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| 209        | ...ask a provider to give oxytocin to the mother after the delivery of the baby                                                            | Yes .....1<br>No.....0 |
| 210        | ...perform tubal ligation after the mother's third (3 <sup>rd</sup> ) cesarean                                                             | Yes .....1<br>No.....0 |
| 211        | Is it your usual or routine practice to do the following?:<br>...give a single dose of antibiotics to the mother after the cord is clamped | Yes .....1<br>No.....0 |
| 212        | ...close the peritoneum                                                                                                                    | Yes .....1<br>No.....0 |

| <b>300</b> | <b>Post-operative Care</b>                                                                                  | <b>Response</b>        |
|------------|-------------------------------------------------------------------------------------------------------------|------------------------|
| 301        | Is it your usual or routine practice in post-operative care to...:<br>...restrict oral intake for 24 hours? | Yes .....1<br>No.....0 |
| 302        | ...restrict ambulation for 24 hours?                                                                        | Yes .....1<br>No.....0 |
| 303        | ...prescribe antibiotics for 5 to 7 days in all cesarean cases?                                             | Yes .....1<br>No.....0 |
| 304        | ...encourage breastfeeding as soon as client has recovered from anesthesia?                                 | Yes .....1<br>No.....0 |
| 305        | ...discharge patients on the third day after cesarean, if all is well?                                      | Yes .....1<br>No.....0 |

*Thank you for taking the time to complete this questionnaire.*