1.	What is your gender? Female Male
2.	What is your age?
3.	What is your current position? O Resident O Attending O Retired O Non-practicing / management
4.	How many years have you been working in Gynecology/Obstetrics as a doctor? (including as intern)
5.	I have seriously considered quitting my job in Gynecology/Obstetrics Strongly disagree Disagree Agree Strongly agree
6.	If applicable, what was the most important reason to consider quitting (more answers possible)? O Most important reason: O I never considered quitting
7.	I have had a complaint against me at the disciplinary board o No o Yes
8.	What work-related events do you consider the most emotional (more answers possibe) Not applicable Bad news conversation/interview (Critically) ill patients When a patient dies When you miss a diagnosis When I feel I can't help a patient When I'm in doubt about whether you're making the right decision Other
9.	How do you cope with the most emotional events on the work-floor (more answers possible) O Not applicable/ never experienced O Seeking professional help O Going home as soon as possible O Using (more) alcohol, drugs or cigarettes Using new medication

o Trying to not think about it

	0	Praying or other religious activities
	0	Making it a formal case report (complication meeting, perinatal audit)
	0	Working out, enjoying my hobby
	0	Talking to friends and family
	0	Informally discussing the matter with peers/colleagues
	0	Developing burn-out symptoms (for example: emotional exhausted, depersonalisation, less confidence)
	0	Calling in sick
	0	Quitting my work in Gynecology/Obstetrics
	0	Other
10.	The cu	rrent support organized by my institution after an adverse event is good:
	0	Strongly disagree
	0	Disagree
	0	Agree
	0	Strongly agree
11.	There i	s plenty of room to informally discuss adverse events in the department/partnership:
	0	Strongly disagree
	0	Disagree
	0	Agree
	0	Strongly agree
12.	Where	did you learn to cope with adverse events? (more answers possible):
	0	Med-school
	0	Specialist-training
	0	Training since I work as a ObsGyn
	0	Intervision
	0	Otherwise:
	0	I have never learned to cope.
13.	alone a	changed my work-conditions (e.g. less shifts, no vaginal breech deliveries, not operating anymore, staying in the hospital when on call) after experiencing a patient-related adverse
	event?	
	0	Strongly disagree
	0	Disagree
		Agree
	0	Strongly agree
14.		course of time of my carreer, I've become more defensive:
	0	Strongly disagree
	0	Disagree
		Agree
	0	Strongly agree
15.	After a	work-related adverse event, the support I received consisted of:
••••		······································

o Finding a distraction, staying active

17. My preferred support after an adverse event would be (more answers possible):					
 Evaluation with the present team 					
 Intervision wit indirect collegaes (physicians but no gynecologists) 					
 1 on 1 conversation with psychologist or coach 					
 A buddy system 					
o Otherwise:					
18. When you are having sleepless nights due to an adverse event means that you are not made to be an ObGyn.					
 Strongly disagree 					
 Disagree 					
o Agree					
 Strongly agree 					
19. There should be a change of culture regarding support after an adverse event:					

16. There is a protocol available at my department regarding support after an adverse event:

Sometimes people experiences traumatic events, such as a live-theatening situation as a cause of a natural disaster, high-impact-trauma or fire; being attacked or raped; witness a murder, death of hear find out someone close to them experienced something terrible.

As a doctor, one can experience such events in patient-care: critical illness or death of a patient, severe injury, as well as violent behaviour from a patient or their family.

- 1) Have you ever, <u>during your work as an ObGyn</u>, experienced such(adverse) events/incidents?
- 2) Did you react with intense fear, helplessness or horror?
- 3) Did the event took place more than 4 weeks ago?

20.

1. No

2. I don't know

Strongly disagree

Strongly agree

DisagreeAgree

3. Yes, it consists of.....

- My answer is yes to all three of the above questions
- o No, I did not answer all three of the above questions with "yes".

Read below about reactions than can develop after an traumatic event. This questionnaire is abut your personal reaction at the traumatic event. Answer (yes/no) if you have experienced at leat twice in the past week the following:

	Upsetting thoughts or memories about the event that have come into your mind against you will
	o Yes
	o No
22.	Upsetting dreams about the event
	o Yes
	o No
23.	Acting or feeling as though the event were happening again
	o Yes
	o No
24.	Feeling upset by reminders of the event
	o Yes
	o No
	Bodily reactions (such as fast heartbeat, stomach churning, sweatiness, dizziness) when
	reminded of the event
	o Yes
	o No
26.	Difficulty falling or staying asleep
	o Yes
	o No
<u>2</u> 7.	Irritability or outbursts of anger
	o Yes
	o No
28.	Difficulty concentrating
	o Yes
	o No
29.	Heightened awareness of potential dangers to yourself and others
	o Yes
	o No
30.	Being jumpy or being startled at something unexpected
	o Yes
	o No
31.	Can you describe the event/incident?

32. It is possible that you didn't experience the reactions, such as described on the previous pages, over the past few weeks, but do recognize them from a previous time of your life after experiencing a work-related event

- No, I don't recognize the symptoms
- Yes, I do recognize having at least 6 symptoms from a previous period in my life

The aim of this page is t find out how you feel. Please read every question carefully and check the box that applies the best how you've felt for the previous week.

Don't think too long about it. In these questions, your own impression is most important. There are no wrong answers, and every answer is correct if it fits your own impression.

- 33. I feel tense or wound up.
 - Most of the time
 - o A lot of the time
 - o From time to time
 - Not at all
- 34. I still enjoy the things I used to enjoy.
 - o Definitely as much
 - Not quite so much
 - Only a little
 - Hardly at all
- 35. I get a sort of frightened feeling as if something awful is about to happen.
 - Very definitely and quite badly
 - Yes, but not too badly
 - o little, but it doesn't worry me
 - o Not at all
- 36. I can laugh and see the funny side of things.
 - As much as I always could
 - o Not quite as much now
 - o Definitely not so much now
 - Not at all
- 37. Worrying thoughts go through my mind.
 - o A great deal of the time
 - A lot of the time
 - o From time to time but not too often
 - Only occasionally
- 38. I feel cheerful.
 - Not at all
 - Not often
 - Sometimes
 - Most of the time
- 39. I can sit at ease and feel relaxed.
 - Definitely
 - Usually
 - Not often

0 0	Teel as if I am slowed down. Nearly all the time Very often Sometimes Not at all
0 0	get a sort of frightened feeling like 'butterflies' in the stomach. Not at all Occasionally Quite often Very often
0 0	nave lost interest in my appearance. Definitely I don't take as much care as I should I may not take quite as much care I take just as much care as ever
0	reel restless as if I have to be on the move. Very much indeed Quite a lot Not very much Not at all
0 0	ook forward with enjoyment to things As much as I ever did Rather less than I used to Definitely less than I used to Hardly at all
0	get sudden feelings of panic Very often indeed Quite often Not very often Not at all

46. I can enjoy a good book or TV program

- o Often
- o Sometimes
- o Not often

o Not at all

- o Very seldom
- 47. If you want, you can leave a comments about this topic:

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