Appendix

Section 1: Demographic Characteristics

6) Do you drink alcohol?

Please complete the following section regarding your demographic data 1) What is your age (years)? 18-34 35-44 45-54 55-64 65-70 2) What is your gender? Male Female 3) What is your marital status? Married Single Divorced Widowed 4) Do you have children? Yes No 5) Do you smoke? No Yes]<1 cigarette pack/day 1-2 cigarette packs/day >2 cigarette packs/day

□ No
Yes
Every day
3- 5 times/ week
Once a week
Only on weekends
On special occasions
Section 2: Professional Status
7) What is your professional occupation?
Hospital pharmacist
Clinical pharmacist
Pharmacy Resident
8) Please select the term that best represents how you are employed in your current position
☐ Full Time
Part Time
9) How many years of experience do you have as a licensed pharmacist?
10) For how long have you been working in the same hospital?

11) How many times have you changed your job?
12) What is your highest pharmacy degree?
BS Pharmacy
PharmD
o PGY-1
o PGY-2
 No postgraduate training

Other
13) Which School of Pharmacy did you graduate from?
14) Are you BPS certified?
Yes
□ No
15) On average, how many hours do you work per week?
< 20
<u>20-40</u>
<u>41-60</u>
> 60
16) How many average weekends do you work per year?

17) How many hours weekly do you work from home?
□ 0
<u></u> 1-5
<u> </u>
<u>10-20</u>
≥21
18) How many average days do you work on call per month?
19) Are you eligible to receive overtime pay?
Yes
□ No
20) Have you ever observed or experienced any kind of discrimination at work? (sexual harassment, religious, gender)?

21) Who is your social support?			
Section 3: Hospital Characteristi	cs		
22) What is your primary practic	ce setting?		
Teaching Hospital	Nonteaching Hospit	al	
23) Please indicate which setting	g describes your practice		
Private Hospital	Public Hospital		
24) Where is the location of the	hospital you practice in?		
Beirut	Mount Lebanon		
25) What is the size of the instit	ution you work in (numb	er of beds)?	
<50		·	
☐ 50-99			
100-199			
<u></u> ≥ 200			
26) What is the mean daily patie	ent workload (i.e. how m	any patients (do you manage per day)?
27) What is the mean number o	f medication orders verif	ied?	
28) Does your current position i	nvolve participation in th	e following a	ectivities?
		Voc	No
		Yes	No
Order Verification			
Pharmacy Committee Participat			
Medical Staff Committee Partic	ipation		
Resident Precepting			
Student Precepting			
Student Training			

Directing/Coordinating a residency program	
Research / Publication	
Medication Reconciliation	
Formal Pharmacy Consultation (excluding nutrition)	
Nutrition Support Consultation	
Didactic Lecturing	
Procurement, Selection, and Purchasing of medications	
Medication Dispensing	
Sterile Compounding	
Providing Adequate Information for safe medication	
use	
Strategies and Policies Implementation to Prevent	
Medication Errors	
Leadership Role in Formulary Management and Update	
Antibiotic Stewardship Involvement	
Pharmacokinetic Consults	
Pharmacotherapy Consults	
Documentation in Medical Records	
Pharmacy Patient Care Rounds	
Interdisciplinary Patient Care Rounds	
Patient Counseling	

Section 4: Professional Stressors

29) To what extent have the following factors affected you in your practice over the last 12-24 months?

	Not at	Small	Moderate	Large	Extreme	Not
	all	amount	amount	amount	amount	applicable
Too many hours at work						
Too much downtime at work						

Too much call			
Inadequate research time			
Inadequate			
administrative time			
Inadequate teaching			
time			
Too many students			
Too many residents			
Low salary			
Unpleasant work			
environment			
Inadequate office			
space			
Too little vacation			
Medication-related			
errors			
Too many			
non-clinical			
responsibilities			

Difficult nonpharmacist			
a lla a gua			
colleagues			
Difficult pharmacist			
colleagues			
Contributions under-			
appreciated			
Too much focus on			
cost			
Negative work/life			
Wegative worky me			
balance			
Little or no time for			
(
professional growth			
Work is not			
intellectually			
mencecuany			
challenging			
Spouse not			
dovetovdina of ich			
understanding of job			
demand			
Interruptions in work			
Rushing			
Divided Attention			

Section 5: Professional Satisfaction

30) In relation to your current position as a hospital pharmacist, how satisfied are you with the factors listed below?

Please answer by:

- 5: Very satisfied
- 4: Somewhat satisfied
- 3: Neutral
- 2: Somewhat dissatisfied
- 1: Very dissatisfied

1: Very dissatisfied	1	2	3	4	5
	Very	Somewhat	Neutral	Somewhat	Very
	dissatisfied	dissatisfied		satisfied	satisfied
Overall career					
Balance between					
professional and					
personal life					
Time for professional					
growth					
Intellectual challenge of					
work					
My pharmacist					
colleagues					
My physician and					
nursing colleagues					
My salary / income					

Section 6: MBI-HSS MP

Section 7: Coping Strategies

32) What strategies do you use to manage your work-related stress?

	Yes	No
Medical consultation		
Medication use		
Medical prescription		
 Self-medication 		
Medication Type (if applicable)		
 Anxiolytic medication Hypnotic medication Phytotherapy medication Homeopathy medication Others:		
Leisure		
Sport activities		
Hobbies		
Holidays or time off		
Nutritional strategies		
Relaxation strategies		
Psychotherapy		