I am an intern/resident in the following program:

* Medicine (categorical)
* Medicine (preliminary)
* Surgery (categorical)
* Surgery (preliminary)
* Medicine/Pediatrics
* Anesthesia
* Emergency Medicine

Year of training:

* PGY1
* PGY2
* PGY3
* PGY4
* PGY5
* PGY6
* PGY7
* PGY8
* PGY 9+

My most recent inpatient clinical rotation was:

* ICU-level
* Floor-level

1. Have you heard of national guidelines for the prevention of catheter-associated urinary tract infections (CAUTIs):
   * Yes, I have heard of them
   * No, I have not heard of them
2. The daily risk of developing a CAUTI attributable to an indwelling urinary catheter is:

* 1-2%/day
* 3-7%/day \*
* 8-10%/day
* 11-15%/day

1. The most important predictor of developing a CAUTI is:

* Diabetes (type 1 or type 2)
* Urinary retention
* Indwelling urinary catheter insertion technique
* Indwelling urinary catheter duration \*
* Post-surgical status of patient

\* Correct answer based on guidelines

4a. Thinking about your most recent inpatient rotation, if your team needed to find documentation of the PRESENCE of an indwelling urinary catheter in your patients, how easy would it be to find:

* Easy
* Fairly easy
* Neutral
* Difficult
* Very difficult

4b. Thinking about your most recent inpatient rotation, if your team needed to find documentation of the PRESENCE of an indwelling urinary catheter in your patients, you would be most likely to find it in:

* Nursing notes
* Patient flow sheets (electronic or paper)
* Primary team progress notes
* Attending of record progress notes
* Other location

5a. Thinking about your most recent inpatient rotation, if your team needed to know the INDICATION for an indwelling urinary catheter in your patients, how easy would it be to find:

* Easy
* Fairly easy
* Neutral
* Difficult
* Very difficult

5b. Thinking about your most recent inpatient rotation, if your team needed to know the INDICATION for an indwelling urinary catheter in your patients, you would be most likely to find it in:

* Nursing notes
* Patient flow sheets (electronic or paper)
* Primary team progress notes
* Attending of record progress notes
* Other location

6. On your most recent inpatient rotation, how often did your team ASSESS the need for a urinary catheter in your inpatients:

* + Never
  + Weekly
  + About every other day
  + Daily
  + More than daily

7. Which of the following would be considered APPROPRIATE INDICATIONS for indwelling urinary catheter placement: (check all that apply)

* Monitoring of urinary output in critically ill patients \*
* Patient preference
* Comfort measures, palliative care in the terminally ill \*
* Incontinence
* Presence of stage 1 sacral, perineal or truncal ulcers in setting of incontinence
* Presence of stage 2 sacral, perineal or truncal ulcers in setting of incontinence
* Presence of stage 3 sacral, perineal or truncal ulcers in setting of incontinence \*
* Presence of stage 4 sacral, perineal or truncal ulcers in setting of incontinence \*
* Urethral trauma or post-op after radical prostatectomy \*
* Epidural in place \*
* Gross hematuria/risk of clotting \*
* Acute urinary retention or bladder outlet obstruction \*
* Limited mobility
* Chronic urinary retention and no reasonable alertnative \*
* All surgical patients

8. I have been taught about the role of duration of indwelling urinary catheterization as part of the Surgical Care Improvement Project (SCIP) measures.

* Yes
* No

9. Unless otherwise indicated, indwelling urinary catheters SHOULD BE REMOVED in post-operative patients within:

* I don’t know
* 6 hours post-op
* 12 hours post-op
* 24 hours post-op\*
* 36 hours post-op

\* Correct answer based on guidelines