

STERILIZATION QUESTIONNAIRE FOR DOCTORS

Name of Doctor

Address

Telephone number

1. How old are you? _____

- 1) 25 - 30
- 2) 31 - 36
- 3) 37 - 42
- 4) 43 - 48
- 5) 49 - 54
- 6) 55 - 60
- 7) 61 - 66

2. When did you complete your medical training? _____

3. What is your medical field of specialization?

- 1) Surgeon
- 2) OB/GYN
- 3) General Practice
- 4) Urologist
- 5) Other
- 6) _____
- 7) _____
- 8) _____
- 9) No Answer

4. What medical or health organization are you currently working for? _____

- 1) Health Department
- 2) Social Insurance
- 3) Army
- 4) Ministry of _____
- 5) Other _____
- 6) No Answer

5. Do you work in a hospital? Yes ____ No ____
If yes, which hospital? _____
6. Do you currently have a private practice? _____
(1) Yes (2) No (3) No Answer
7. How much do you charge for an office visit? _____
8. How many private patients do you see in a day? _____
9. Would you be willing to offer surgical contraception services to your patients?
Yes ____ No ____

In public or private practice?

Public Yes ____ No ____
Private Yes ____ No ____

10. Which of the following operations have you performed?

| | | | | |
|---------------------------|---------|--------|--------------------|----------------|
| a. Culpotomy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| b. Laparoscopy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| c. Hysterectomy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| d. Tubal Ligation | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| e. Appendectomy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| f. Dilation and Curettage | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| g. IUD Insertion | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| h. Vasectomy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| i. Herniotomy | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| j. Abortion | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |
| k. Other Surgery | (1) Yes | (2) No | (3) Not applicable | (4) Don't Know |

11. How much do you charge for vasectomy? ____ Tubal Ligation? ____

12. If we were to pay the cost of providing sterilization for a poor person, how much would the cost be?

| Operation | Price |
|-------------------|-------|
| a. Vasectomy | _____ |
| b. Tubal Ligation | _____ |
| c. Norplant | _____ |
| d. _____ | _____ |
| e. _____ | _____ |

13. For which of the following operations would you like to receive additional training?
- a. Laparoscopic sterilization _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - b. Mini-lap sterilization _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - c. Tubal ligation _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - d. Vasectomy _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - e. IUD Insertion _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - f. Subdermal implant (Norplant) _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - g. Other _____
(1) Yes (2) No (3) Not applicable (4) Don't know
15. If you have performed any female sterilization procedures, would you be willing to train other doctors? _____
(1) Yes (2) No (3) Not applicable (4) Don't know
(5) Never performed operation
16. Which of the following communication activities in surgical contraception would you be willing to do?
- a. Distribute leaflets on sterilization _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - b. Place posters in the office _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - c. Refer men or women to doctors trained to provide sterilization _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - d. Give a talk on sterilization at the radio station _____
(1) Yes (2) No (3) Not applicable (4) Don't know
 - e. Promote sterilization for couples who do not want any more children _____
(1) Yes (2) No (3) Not applicable (4) Don't know

- f. Give sterilization coupons to men and women who accept contraception (see attached coupon) ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
17. Which would be the best way to involve you in a surgical contraception program?
- a. To provide sterilization services as a routine part of existing practice ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
- b. To pay you on a per-case basis for each acceptor ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
- c. To hire you to provide services at a sterilization clinic ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
18. What medical equipment salesmen call on you?

19. Have you received training in using surgical equipment from a medical equipment importer/supplier? ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
- If yes, explain _____
20. Have you had any cases of complication in sterilization procedures performed? ____
 (1) Yes (2) No (3) Not applicable (4) Don't know
- If yes, how many cases in vasectomy? ____ In mini-lap? ____
21. If you have had any complications, please state briefly:

22. Who recruited your sterilization clients? ____
- (1) Clients themselves
 (2) Family planning fieldworker of health centers
 (3) Hospital or clinic staff
 (4) Other _____

23. What benefits can be given to men and women who have a sterilization after one or two children?

a. Free medical services to the child until 15 years of age

Yes _____ No _____ Don't know _____

b. Free medical services to the parents and child

Yes _____ No _____ Don't know _____