Attitude and Knowledge Of Physicians Toward Palliative Care Questionnaire (PCAK)

This is a **survey**, not a test.

1. Your participation is invaluable and greatly appreciated.

2. Your answers will remain strictly anonymous.

3. **Please complete consent form to participate in the survey.**

4. It is important that you complete this survey by yourself.

5. You can mark your choice by either ticking or circling your option.

6. If you would like to change an answer, please scratch out initial response with a single line and mark the new choice.

7. If you do not know the answer, please mark ‘I don’t know’ or `not sure' rather than guess.

8. Please complete all questions.

Section 1: Demographic Data

1- Sex

1. Male
2. Female

2- Degree

1. MBChB
2. Diploma in Primary Emergency Care
3. Other - ……

3- Position:

1. Medical Officer
2. Registrar

4- Years in practice: …….

5- Place of work: ……

6- Discussions of palliative care (past three months)

1. No patients, families
2. 1 to 5 patients, families
3. 6 to 10 patients, families
4. 11 to 15 patients, families
5. More than 15 patients, families

7- Did you receive any formal training (workshops, lectures, teaching) in palliative care

1. Yes
2. No

8- If the answer of Q7 was yes, please mention for how long?.....

Section 2: Knowledge about Palliative Care

Part 1:

1. How would you rate your experience in managing pain in cancer and palliative patients?
   1) None
   2) Weak
   3) Good
   4) Very Good
   5) Excellent

2. How would you rate your experience in managing other palliative care symptoms (constipation, nausea and vomiting, anorexia, etc.)?
   1) None
   2) Weak
   3) Good
   4) Very Good
   5) Excellent

3. How would you rate your experience in conducting family counseling and breaking bad news?
   1) None
   2) Weak
   3) Good
   4) Very Good
   5) Excellent

Part 2:

1. Palliative care is different from traditional care because palliative care:
    1. I don't Know
    2. Is curative.
    3. Is equivalent to hospice care.
    4. Is focused on comfort, rather than cure.
    5. Is equivalent to end of life care.
    6. Withdraws care.

2. Which of the following members of the healthcare team are important to the delivery of palliative care?
    1. I don't Know
    2. Doctors
    3. Nurses
    4. Dietitians
    5. Physical and occupational therapists
    6. All of the above

3. Which of the following drugs is considered weak opioids;
    1. I don't Know
    2. Morphine
    3. Codeine
    4. Hydromorphone
    5. Fentanyl
    6. Oxycodone

4. Which is the most appropriate drug can be used in management of delirium in palliative care:
    1. I don't Know
    2. Fentanyl
    3. Haloperidol
    4. Midazolam
    5. Ondansetron
    6. Fluoxetine

5. Dyspnea related to advanced lung cancer can be best treated by:
    1. I don't Know
    2. Morphine
    3. Midazolam
    4. Dexamethasone
    5. Oxygen mask and Ventolin
    6. 1 & 2

6. The second step in WHO ladder for treatment of chronic pain is:
    1. I don't Know
    2. Strong opioid ± adjuvant therapy
    3. Non-opioid ± adjuvant therapy
    4. Weak opioid ± adjuvant therapy
    5. Adjuvant therapy
    6. Strong opioid ± pain intervention modalities

7. Regarding Hypercalcemia in cancer patients, it:
    1. I don't Know
    2. Is the most common life threating metastatic disorder in cancer patients
    3. Needs to be corrected if adjusted serum calcium ≥3.5 mmol/l or the patient is symptomatic.
    4. Related to bone cancer only.
    5. Can cause severe diarrhea.
    6. All of the above

8. The hallmarks of opioid toxicity are all the following except:
    1. I don't Know
    2. Oxygen saturation ≤ 90%
    3. Respiratory rate ≤ 10 breaths/min
    4. Pinpoint pupils
    5. Sedation
    6. Jerky movement

9. Signs of superior vena caval obstruction are all the following *EXCEPT*:
    1. I don't Know
    2. Cyanosis
    3. Pulsatile distended neck veins
    4. Edema in the hands
    5. Dilated veins over the chest wall
    6. Periorbital edema

10. Management of Catastrophic bleeding in palliative care includes
    1. I don't Know
    2. Midazolam
    3. Vitamin K
    4. Dark towel
    5. Tranexamic injection in large doses.
    6. 1 & 3

11. “Golden standard” treatment of metastatic spinal cord compression includes the following:
    1. I don’t know
    2. High dose dexamethasone
    3. Neurosurgical intervention
    4. Chemotherapy
    5. Radiotherapy
    6. All of the above

12. All of the following are characteristics of oral opioid analgesics except:
    1. I don't Know
    2. Effective for localized and generalized pain
    3. Easily administered
    4. Stigma and fears associated with use
    5. Ceiling effect to analgesia
    6. None of the above

Section 3: Attitude toward Palliative Care

Please tick one box per item that it mostly fit your opinion	**Strongly Disagree**	**Disagree**	**Not Sure**	**Agree**	**Strongly Agree**
1. I am dissatisfied with the available palliative care services.					
2. I feel there is a lack of timely communication between palliative care providers and myself.					
3. I am not familiar with palliative care services in this community.					
4. I am uncertain of the length and types of coverage under the palliative care benefit.					
5. Palliative care provision is appropriate at the initial diagnosis of life-threatening illness as long as he/she has complex symptoms such as pain, dyspnea…etc.					
6. Patients or families are unwilling or unready to accept palliative care services.					
7. All adults and children who are terminally ill are candidates for palliative care services, not just those with cancer.					
8. Patients receiving radiation for palliation of symptoms are not candidates for palliative care.					
9. Palliative care benefits include enhanced quality of life for the patient and family.					
10. Palliative care benefits include skilled care for terminally ill patients.					
11. Palliative care benefits include expert pain and symptom management.					