

APPENDIX 14 **SELF-ADMINISTERED QUESTIONNAIRE FOR PRESCRIBERS**

DEMOGRAPHICS OF A PRESCRIBER **(To be Filled in by the interviewer)**

1	NAME	<div style="display: flex; justify-content: space-between; width: 100%;"> (SURNAME) (FIRST NAME) (LAST NAME) </div>			
2	ADDRESS	<div style="display: flex; justify-content: space-between; width: 100%;"> (CITY) (STATE) </div>			
3	QUALIFICATION BASIC SPECIALIZATION				
4	PRACTICE SEGMENT	(I) General Practice (GP) <input style="width: 40px;" type="text"/> (III) Gynaecologist <input style="width: 40px;" type="text"/> (V) General Surgeon <input style="width: 40px;" type="text"/> (VII) Dentist <input style="width: 40px;" type="text"/> (IX) Cancer - Surgeon <input style="width: 40px;" type="text"/> (XI) Cardiologist <input style="width: 40px;" type="text"/> (XIII) ENT Specialist <input style="width: 40px;" type="text"/> (XV) Other (Specify) <input style="width: 40px;" type="text"/>	(II) Physician <input style="width: 40px;" type="text"/> (IV) Paediatrician <input style="width: 40px;" type="text"/> (VI) Orthopaedic Surgeon <input style="width: 40px;" type="text"/> (VIII) Gastro-enterologist <input style="width: 40px;" type="text"/> (X) Skin/VD Specialist <input style="width: 40px;" type="text"/> (XII) Cardiac - Surgeon <input style="width: 40px;" type="text"/> (XIV) Psychiatrist <input style="width: 40px;" type="text"/>		
5	AGE GROUP	(i) Below 25 years <input style="width: 40px;" type="text"/> (iii) 41 - 55 yrs <input style="width: 40px;" type="text"/>	(ii) 25 - 40 yrs <input style="width: 40px;" type="text"/> (iv) Over 55 years <input style="width: 40px;" type="text"/>		
6	GENDER	(i) Male <input style="width: 40px;" type="text"/>	(ii) Female <input style="width: 40px;" type="text"/>		
7	PATIENT VOLUME	(i) Less than 25 per day <input style="width: 40px;" type="text"/> (iii) 51 to 75 per day <input style="width: 40px;" type="text"/>	(ii) 26 to 50 per day <input style="width: 40px;" type="text"/> (iv) More than 100 per day <input style="width: 40px;" type="text"/>		
8	PRESCRIPTION VOLUME	(i) Less than 15 per day <input style="width: 40px;" type="text"/> (iii) 31 to 45 per day <input style="width: 40px;" type="text"/>	(ii) 16 to 30 per day <input style="width: 40px;" type="text"/> (iv) More than 45 per day <input style="width: 40px;" type="text"/>		
9	WHETHER OWNS/OPERATES	(i) A dispensary <input style="width: 40px;" type="text"/> If Yes to (ii) I with less than 5 beds <input style="width: 40px;" type="text"/> III More than 10 beds <input style="width: 40px;" type="text"/>	(ii) A nursing home/hospital <input style="width: 40px;" type="text"/> II 6 to 10 beds <input style="width: 40px;" type="text"/>		
10	WHETHER THE DOCTOR IS/WAS ATTACHED TO AN ACADEMIC INSTITUTE FOR TEACHING MEDICAL SCIENCES	YES <input style="width: 40px;" type="text"/> NO <input style="width: 40px;" type="text"/>			
11	PRACTICE AREA (City/Town/Village)	(I) With population 5,00,000 or more <input style="width: 40px;" type="text"/> (III) With population 50,000 to 99,999 <input style="width: 40px;" type="text"/> (V) With population 10,000 to 19,999 <input style="width: 40px;" type="text"/> (VII) With population less than 5,000 <input style="width: 40px;" type="text"/>	(II) With population 1,00,000 to 4,99,999 <input style="width: 40px;" type="text"/> (IV) With population 20,000 to 49,999 <input style="width: 40px;" type="text"/> (VI) With population 5,000 to 9,999 <input style="width: 40px;" type="text"/>		
12	LENGTH OF PRACTICE	(i) Less than 5 years <input style="width: 40px;" type="text"/> (iii) 16 to 25 years <input style="width: 40px;" type="text"/>	(ii) 5 to 15 years <input style="width: 40px;" type="text"/> (iv) More than 25 years <input style="width: 40px;" type="text"/>		

Questionnaire

- Please tick mark your choice in the relevant box*
- (1) What do you think about the cost of medicines in our country?
- (1) Very Costly (3) Reasonably Priced
- (2) Moderately Costly (4) Low Priced
- (2) Do you believe that the money spent by the pharmaceutical companies after promoting their drugs is a major factor contributing to the cost of medicines ?
- Yes No
- (3) How many patients on average, do you see in a day ?
- (1) Less than 10 (3) 26 to 50
- (2) 11 to 25 (4) Above 50
- (4) How many prescriptions do you write, on average in a day ?
- (1) Less than 10 (3) 26 to 50
- (2) 11 to 25 (4) Above 50
- (5) Rank the following sources of information which help you choose a medicine for prescription in order of importance i.e. The most important source at the top and the least important at the bottom.
- | | |
|---|--|
| <ul style="list-style-type: none"> * Medical Representatives <input type="text"/> * Medical Journal articles <input type="text"/> * Medical Journal advertising <input type="text"/> | <ul style="list-style-type: none"> * Seminars/Conferences/CME programme <input type="text"/> * Doctor friends/Colleagues/Teachers <input type="text"/> |
|---|--|
- (6) Rank the following attributes of a medicine in terms of their importance to you, i.e. The most important attribute at the top and the least important at the bottom.
- | | |
|--|--|
| <ul style="list-style-type: none"> * Efficacy <input type="text"/> * Safety <input type="text"/> | <ul style="list-style-type: none"> * Cost <input type="text"/> * Dosage Convenience <input type="text"/> |
|--|--|
- (7) Please read the following statements and tick mark your preference on the scales against each of them
- (i) While you see a patient if you think that the patient has expressed a request for prescription, you generally oblige
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Strongly | Generally | Moderately | Moderately | Generally | Strongly |
| agree | agree | agree | disagree | disagree | disagree |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
- (ii) Your relationship with a particular patient will decide whether you agree with the request of a patient for prescribing a medicine
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
- (iii) If a patient will insist for a generic version of a drug instead of branded drug, you will accept the request
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
- (iv) If a patient requests for a prescription of a drug and you believe it to be non-efficacious, you still prescribe it for the sake of your relationship with the patient
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
- (v) If a patient requests for a prescription of a drug and you believe it to be unsafe, you will still prescribe it for the sake of your relationship with the patient
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
- (vi) If a patient does not like a particular medicine you will still prescribe it if you think it is necessary
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
- (vii) If a patient is already on a medicine prescribed by other doctor and is comfortable with it, you will still consider replacing it with the medicine you generally prescribe
- | | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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Please tick mark your choice in the relevant box

- (8) On an average how many Medical Representatives (MRs) do you see in a day ?
- | | |
|-----------------|-----------------|
| (1) Less than 3 | (3) 6 to 8 |
| (2) 3 to 5 | (4) More than 8 |

(9) Please read the following statements and mark your preference in the scale against each of them.

	Strongly agree	Generally agree	Moderately agree	Moderately disagree	Generally disagree	Strongly disagree
(i) MRs are an important source of information which helps me practice better medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) If I trust a MR, I am more inclined to prescribe his/her products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(iii) I do not necessarily prescribe the products of a MR even if he/she meets me regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(iv) I discourage MRs from making frequent visits to my clinic (more than once a month)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(v) I am inclined to prescribe the products of a MR if he/she makes an appeal for sympathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(vi) I believe that when I accept gifts/obligations from a MR, I am obliged to prescribe his/her products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(vii) I like to prescribe the products of a MR who possesses adequate product knowledge & communicates effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(viii) I do not generally get influenced by the name of company a MR represents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ix) I like a MR, when he/she is honest about his/her sales talk & does not use misleading statements about products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(x) I do not encourage the MRs to develop relationship with me as it generally leads to pressure for more prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xi) I love to talk to a MR who is true to his/her commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xii) I do not appreciate when a MR pressurizes me to prescribe his/her products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xiii) When I find a MR to have pleasing overall personality I am inclined to prescribe his/her products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xiv) I am inclined to be more sympathetic to a Lady Medical Representative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xv) I do not like a MR who tries to take more of my time to detail his/her products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xvi) A demanding MR generally gets my favourable attention and prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(xvii) I believe that MRs are an asset to my practice, and I generally enjoy meeting them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(viii) I feel MRs are always trying to manipulate me to prescribe their products

Strongly agree	Generally agree	Moderately agree	Moderately disagree	Generally disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(ix) I am more inclined to prescribe the products of a MR when I find him/her to possess a better educational background

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(10) Please rank the following factors, which motivate you to prescribe a brand, in order of importance i.e. The most important at the top and the least important at the bottom.

- Authenticated technical information
- Recommendation/approval of friend/teacher
- Gifts and other help from the companies
- Sponsoring seminars/CME programmes by the companies
- The corporate image of a company or the brand

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(11) Please read the following statements and tick mark your preference on the scale against each of them

(i) I generally choose a drug molecule for prescription when I am briefed about its authentic technical information

Strongly agree	Generally agree	Moderately agree	Moderately disagree	Generally disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(ii) I decide on a brand of a medicine for prescription which is at the top of my mind

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(iii) I am inclined to prescribe a product if my doctor friends or senior colleagues recommend it.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(iv) I am generally price conscious when I prescribe medicines to my patients

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(v) I do not mind prescribing a costly medicine to a patient if I believe that the patient can afford it

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(vi) Active promotion, advertisement and sales pressure from drug companies may convince me to prescribe a product.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(vii) I do not prescribe a product of a company if the MR of that company does not meet me regularly

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(viii) Without the Pharmaceutical Industry's support, there would be a lack of funding for important educational programmes for medical doctors

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(ix) I am inclined to prescribe more of a product when I receive sufficient samples for trial of that product.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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(x) I prescribe more of a product when I receive positive feedback about it from my patients

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Please tick mark your choice in the relevant box

(12) When I receive the promotional materials

- (1) I go through it immediately
(2) I read it at my convenience

<input type="checkbox"/>
<input type="checkbox"/>

- (3) I will preserve it for future reference
(4) I will dump it

<input type="checkbox"/>
<input type="checkbox"/>

Please tick mark your choice in the relevant box

(13) When I suddenly come to know of lack of efficacy of a drug or its undesirable side effects I would immediately

(i) Stop prescribing the drug

(ii) Stop prescribing the drug forthwith and call MR of the company and ask for clarification

(iii) Reduce the number of prescriptions of that drug

(14) *Please read the following statements and tick mark your preference on the scale against each of them*

(i) I would like to get information about prescription medicines from sources other than described above if they are authentic and save my time and energy

(ii) I like to gather information, which is available on the internet about medicines

(iii) I like to read on-line journal articles/ new product information etc on the internet

(iv) I would appreciate if a company sends me promotional material by courier/postal service rather than a MR calling on me and consuming my time and energy

(v) Direct to Consumers (DTC) promotion of prescription drugs, which is recently allowed in USA can also be useful in our country

(vi) I do not mind if my patients discuss with me about some medicines about which they have got the information from journals, internet etc, and would like me to prescribe for them

(vii) I believe that internet is a powerful medium for keeping me update in my profession

(viii) If I am faced with a difficult disease/condition I would prefer to approach interactive sites on internet or consultation with experts who can help me to help my patient

Please tick mark your choice in the relevant box

(15) I have an access to internet in my clinic/residence.

Yes

No

(16) If Yes,

How much time you generally devote daily to internet for updating your professional knowledge

(1) Less than 1 hour

(2) 1 - 2 hours

(3) More than 2 hours

Thank you for your valued co-operation in responding to this questionnaire.