

Please think about your experience with monogenic diabetes and answer the following questions.

1. How often do you take a family history of your patients diagnosed with diabetes?
Never Almost never Sometimes Very often All the time
2. When you take a family history, do you ask about the patient's: (Please check all that apply)
 First-degree family members (e.g. parents, children, siblings)
 Second-degree family members (e.g. grandparent, grandchild, uncle, aunt, nephew, niece, half-sibling)
 Third-degree family members (e.g. first cousin, great-grandparent or great-grandchild)
3. What questions do you usually ask about the family member(s) diagnosed with diabetes? (Please check all that apply)
 Type of diabetes
 Age of diagnosis
 Type of treatment
 Current age
 Whether overweight or obese
 Other, please specify: _____
4. What percent of Diabetes Mellitus do you think is monogenic in nature?
 0-1%
 1-2%
 5-10%
 20-25%
 50-55%
5. Have you considered the diagnosis of monogenic diabetes for one of your patients with diabetes or pre-diabetes? Yes No
If Yes, have you:
4a. referred patients for genetic counseling? Yes No
4b. referred patients to endocrinology? Yes No
6. Have you ordered a monogenic diabetes genetic test for any of your patients? Yes No
If Yes:
5a. have you returned genetic results to any of your patients? Yes No
5b. did the genetic testing change your patient management in any way? Yes No
If No:
5c. what was the reason for not ordering this genetic test? (Please check all that apply)
 A genetic test was not available
 It did not seem useful
 I did not know a genetic test existed
 I did not know which test was appropriate
 Testing process was too confusing (for example, insurance, paperwork, etc.)
 I've never encountered a patient who I suspect to have monogenic diabetes
 Other, please specify:

7. Which of the following is, or would be helpful for you to have available in EPIC to care for patients, related to genetic testing for monogenic diabetes? (Please check all that apply)
- An easy way to order genetic tests
 - Information for me on how to talk with my patients about genetics and genetic testing
 - Information for me about patient management if a test is positive
 - Information for me about patient management if a test is negative
 - Handouts to give my patients about genetics and genetic testing in general
 - Handouts to give my patients with specific information if a test is positive
 - Handouts to give my patients with specific information if a test is negative
 - Other, please specify:
8. Have you had any of the following types of genetics education? (Please check all that apply)
- CME/CEU course in genetics
 - Genetics course in medical school
 - Genetics course in graduate school
 - Genetics course in residency
 - Self-directed genetics education (through journal articles, etc.)
 - Grand Rounds on genetics
 - Seminar/Workshop in genetics
 - I have had no genetics education
9. In which capacities have you been trained on Monogenic Diabetes? (Please check all that apply)
- Medical School
 - Residency
 - Fellowship
 - Graduate school
 - Literature review/self-directed education
 - Word of mouth among peers
 - Seminar/workshop
 - I have received no education on monogenic diabetes

Please indicate how strongly you agree or disagree with each of the following statements about monogenic diabetes genetic testing in your institution. Please do not skip any items.

	1. Strongly Disagree	2. Disagree	3. Neither agree or disagree	4. Agree	5. Strongly Agree
1. Using monogenic diabetes genetic testing fits within the processes that I already use to care for my patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Clear goals have been established for integrating monogenic diabetes genetic testing into clinical practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Staff have enough time to facilitate the integration of monogenic diabetes genetic testing into clinical practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can find/use reliable sources of the information I need to apply monogenic diabetes genetic testing while caring for patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Leaders have openly endorsed and supported monogenic diabetes genetic testing in visible ways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The information generated by monogenic diabetes genetic testing is important for patient care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I believe that monogenic diabetes genetic testing is relevant to my current clinical practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. My training has prepared me to treat patients whose family history/genetics place them at high risk for monogenic diabetes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I am confident in my ability to use the results of monogenic diabetes genetic testing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Monogenic diabetes genetic testing will be an improvement over how I currently diagnose diabetes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Monogenic diabetes genetic testing will improve my ability to care for patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. A clearly designated person or team is/will lead the effort to incorporate monogenic diabetes genetic testing into my clinical practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. The implementation leaders/team have the necessary qualities and skills to successfully incorporate monogenic diabetes genetic testing into my clinical practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. A variety of strategies are being used to enable staff to use monogenic diabetes genetic testing to assess patient risk.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

