

AUA Annual Census Questions (2014-2023)

INFORMATION ON UROLOGISTS IN THE U.S.	YEAR OF AVAILABILITY									
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Demographics and Location										
Year of birth	X	X	X	X	X	X	X	X	X	X
Gender*	X	X	X	X	X	X	X	X	X	X
Race	X	X	X	X	X	X	X	X	X	X
Hispanic status	X	X	X	X	X	X	X	X	X	X
What is your current relationship status?						X	X	X	X	
Do you have any children?						X				
Country of origin/residence	X	X	X	X	X	X	X	X		
City (primary practice)	X	X	X	X	X	X	X		X	X
State (primary practice)	X	X	X	X	X	X	X		X	X
Zip code (primary practice)	X	X	X	X	X	X	X		X	X
Sexual Identity								X	X	
Fluency in another language								X		
Languages spoken by patients								X		
Current profession	X	X	X	X	X	X	X	X	X	X
Please enter the age at which you fully retired or plan to fully retire from practice	X	X	X	X	X	X	X	X	X	X
What is your country of origin?			X	X						
Current Role or Title						X				
Total number of years you have practiced urology since completion of residency	X	X	X	X	X	X	X	X	X	X
Education, Fellowship Training, Certification and Licensing										
Degree earned	X	X	X	X	X	X	X	X	X	X
Completion of medical school (MD or DO)	X	X	X	X	X	X	X	X	X	X
Country (location) where medical school was attended							X	X	X	
Completion of residency	X	X	X	X	X	X	X	X	X	
Completion of initial certification by the American Board of Urology (ABU), American Osteopathic Board of Surgery (AOBS), or other medical/ osteopathic board	X	X	X	X	X	X				
Completion of fellowship training	X	X	X	X	X	X	X	X	X	X
Fellowship training area	X	X	X	X	X	X	X	X	X	X
Why did you pursue fellowship training?			X							
Could you find a job that allows you to practice your fellowship specialty as the majority of your practice?			X							
Have you ever received education/training including updates on medical billing and coding?							X			
Which of the following resources are available to and/or used by you to support your practice? [EMR education; Coding assistance; Assistance with Federal regulations such as CMS mandates; Life coaching for improving quality of life (QOL); Business education on effective office management]							X			
Formal fellowship training (Yes/No)								X	X	
How much is your current educational debt?						X				
How many years did you or do you plan to spend paying off your educational debt after residency?						X				
Does or did your educational debt affect your fellowship/practice choice?						X				
Does carrying educational debt contribute to burnout?						X				
If you had been able to shorten your residency training by one to two years, allowing you to only perform these lower risk procedures, would you have pursued such a residency program track?					X					
Certification status	X	X	X	X	X	X				
How important is fellowship training when selecting a candidate to fill a urologist position? [Required, Preferred, Not Considered]	X	X	X	X	X	X	X			
Have you ever received any training on disparities in healthcare?										X
Through which of the following options have you received your training/course on disparities in healthcare?										X
Team Composition										
Number of urologists	X	X	X	X	X	X	X	X	X	X
Are you currently hiring or anticipate hiring at least one additional urologists this year?							X			
If hiring an additional urologist this year, which type of urologist are your hiring or anticipate hiring? [General; Oncology; Pediatrics; Endourology/Stone disease; Female urology; Men's health; Robotic surgery]							X			
Number of physicians other than urologists	X	X	X	X						
If hiring an additional urologist this year, which type of urologist are your hiring or anticipate hiring? [General; Oncology; Pediatrics; Endourology/Stone disease; Female Urology; Men's Health; Robotic Surgery]	X	X	X	X	X	X	X	X		
Number of nurse practitioners (NP)	X	X	X	X	X	X	X	X	X	X
Number of advanced practice nurses (APN)						X	X	X	X	X
Number of physician assistants (PA)									X	X
Number of nurses	X	X	X	X	X	X	X	X	X	X
Number of certified surgical technicians	X	X	X	X						
Number of medical assistants	X	X	X	X						
Number of administrative assistants	X	X	X	X						
Number of administrator/practice managers	X	X	X	X						
Number of office locations	X	X	X	X	X	X	X	X	X	X
Procedures performed by NPs or PAs					X		X			
APP involvement, by procedure, within your practice							X			
Do you agree, collaborating with APPs helps: Reduce patient wait times, Lower provider costs, improve patient education, improve patient satisfaction, improve overall productivity of care							X			
On average, what percentage of patient cases you see could have been handled by primary care physicians?					X					
Please indicate whether you agree with the following statements: [Collaborating with APPs helps reduce patient wait times; Collaborating with APPs helps lower provider costs; Collaborating with APPs helps improve patient education; Collaborating with APPs helps improve patient satisfaction; Collaborating with APPs helps improve overall productivity of care]							X			

Please select the electronic health record (EHR) system used in your office. [None (use paper records); Allscripts; Epic Systems Corporation; Intuitive Medical Software; Meridian; Urochart; NextGen Healthcare; GE Healthcare; eClinicalWorks LLC; Greenway Medical Technologies, Inc; Community Computer Service, Inc.; Cerner Corporation; Intermountain Healthcare; McKesson; Vitera Healthcare Solutions, LLC; CPRS (VA System); Homegrown database; Other EHR Please specify:]	X									
Planned Retirement	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
What factors may delay your retirement age?	X	X	X	X	X	X	X	X	X	
What factors may lead you to retire late?					X					
What factors may lead you to retire early?					X					
Practice Characteristics	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Primary subspecialty area	X	X	X	X	X	X	X	X	X	X
All subspecialty areas	X	X	X	X	X	X	X	X	X	X
Primary practice setting	X	X	X	X	X	X	X	X	X	X
Please indicate your type of employer.	X									
You have indicated that you work at an academic medical center/medical school, do you: (1) Work primarily in an academic site/center; (2)Work at a satellite practice which is affiliated with an academic medical center; (3) I don't know		X								
Employment status	X	X	X	X	X	X	X	X	X	X
Volunteer Experience	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
How often do you clinically volunteer?						X				
Where do you clinically volunteer?						X				
Work Volume	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Number of patient visits/encounters, in a typical week	X	X	X	X	X	X	X	X	X	X
Number of minutes you spend with a patient in a typical office visit			X	X	X	X	X	X	X	X
Percent of visits/encounters with female patients	X	X	X	X	X	X				
Number of work hours spent on clinical activities (e.g., rounding, seeing patients, ordering and reviewing lab tests, taking calls)	X	X	X	X	X	X	X	X	X	X
Number of work hours spent on nonclinical activities (e.g., administration, teaching, research)	X	X	X	X	X	X	X	X	X	X
What percent of time do you currently spend on research?						X				
If adequate funding were available, would you increase your time spent on research?						X				
Total number of weeks on vacation leave, in the past year	X	X	X	X	X	X				
Total number of years spent practicing urology, since completion of residency	X	X	X	X	X	X	X	X	X	X
Do you perform major inpatient operative procedures?			X							
Reason for not performing urology surgery [retirement, personal, admin role, non-surgical profession]						X				
Total number of major inpatient operative procedures, performed in a typical month	X	X	X	X	X	X	X	X	X	X
Among the inpatient operative procedures currently performed, what percentage of them take longer than 3 hours?						X				
In a typical week, how many days do you work?				X						
Do you plan to go to part-time status within a year?				X						
Do you feel that urology lends itself to part-time practice?				X						
What is your night call volume per month?				X						
Number of nights on call in a typical week						X	X	X	X	X
How many hospitals do you usually cover on call?				X					X	
What is your daily patient quota?				X						
Are you required to take call to maintain hospital privileges?									X	
Do you have hospital call coverage at night or during the weekend?									X	
How often are you on hospital call per month?									X	
What is the average pay per day for your weekday hospital night call?									X	
What is the average pay per day for your weekend hospital call?									X	
How many hospital calls must be completed before you start getting paid a per diem rate?									X	
What was your take home pay related to your clinical activity (e.g., rounding, seeing patients, ordering and reviewing lab tests, taking calls) last year in thousands?									X	
Who primarily owns your practice?									X	
How many years have you worked at your current primary practice?									X	
What are your primary future career plans in urology?									X	
What proportion of your patients' initial visits were held virtually by video and audio only, respectively? The total must add up to 100%. [In-Person visits; Video visits; Audio-only visits]									X	
What proportion of your follow-up visits were held virtually by video and audio only, respectively? The total must add up to 100%. [In-Person visits; Video visits; Audio-only visits]									X	
Do you do research?									X	
How many hours per week do you spend in research?									X	
What is the setting of your primary practice where you conduct research?									X	
What is the primary type of research you conduct?									X	
Have you contributed patient data to clinical trials, patient registries or research projects?									X	
Which of the following methods is most often used by your practice to remove stents after URS?										X
Which of the following options best describes your current workload since we have come out of the COVID-19 pandemic?										X
Does your practice/hospital currently have difficulty filling any of the following vacancies?										X
ELECTRONIC HEALTH RECORD (EHR) SYSTEM USE, GUIDELINE COMPLIANCE AND QUALITY REPORTING	YEAR OF AVAILABILITY									
Adoption of Electronic Health Record and New International Classification of Disease Systems	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Types of electronic health record (EHR) systems used in the office	X									
Do you use electronic health record (EHR) system to record patient information?		X			X	X				
Do you employ medical scribes in your practice for EHR documentation?					X					
Reasons for using a medical scribe for EHR documentation					X					
Using the EHR increases the quality and accuracy of my work (5-point Likert scale)					X					
Using the EHR increases clinical efficiency (5-point Likert scale)						X				

Who has the responsibility in your primary practice for notifying patients of the accusations made against them?											X
PEDIATRIC UROLOGY	YEAR OF AVAILABILITY										
Pediatric Urology	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you provide urologic care for children under 18?						X					
Percentage of clinical work in your own practice pediatric urology?						X					
What percentage of your pediatric urology practice do you refer out?						X					
Did you complete a formal fellowship in pediatric urology?						X					
Do you support subspecialty certification in pediatric urology offered by the ABU?						X					
In your practice location, do you believe there is a need for more pediatric urologists?						X					
PRACTICE BUSINESS OPERATIONS	YEAR OF AVAILABILITY										
Equipment Use, Services and Increase of Profitability	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Does your practice have access to any of the following services: (1) <i>in-office ultrasound other than transrectal ultrasound</i> , (2) <i>cryotherapy for prostate cancer</i> , (3) <i>cryotherapy for renal cancer</i> , (4) <i>proton beam therapy</i> , (5) <i>IMRT</i> , (6) <i>robotic surgery</i> , (7) <i>shock wave lithotripsy</i> ?	X										
Do you have an ownership interest in a Shock wave lithotripter?	X										
Do you have an ownership interest in a CT scanner?	X										
Do you have an ownership interest in a MRI?	X										
Do you have an ownership interest in an IMRT (Intensity-Modulated Radiation Therapy)?	X										
Do you have an ownership interest in Pathology/lab services?	X										
Do you have an ownership interest in Laser technology (e.g., Holmium, Greenlight)?	X										
Have you had patients who stopped taking medication in the middle of established, successful treatments because of inability to afford medication?						X					
Have you had patients who stopped taking medication in the middle of established, successful treatments because of a denial resulting from an insurance policy change?						X					
Are you using genomic testing to help stratify patients for active surveillance vs treatment?						X					
Does your practice accept drug samples from pharmaceutical companies for distribution to patients?						X					
Do you have an ownership interest in an Ambulatory surgery center?	X										
Do you have an ownership interest in any Urodynamic equipment?	X										
Does your practice have access to in-office ultrasound other than transrectal ultrasound?	X										
Does your practice have access to Cryotherapy for prostate cancer?	X										
Does your practice have access to Cryotherapy for renal cancer?	X										
Does your practice have access to Proton beam therapy?	X										
Does your practice have access to IMRT (Intensity-Modulated Radiation Therapy)?	X										
Does your practice have access to Robotic surgery?	X										
Does your practice have access to Shock wave lithotripsy?	X										
Does your practice employ a pathologist?	X										
Does your practice employ a radiation oncologist?	X										
Does your practice provide in-office pathology services?	X										
Does your practice provide in-office laboratory services?	X										
Does your practice provide diagnostic radiology services?	X										
Does your practice provide radiation oncology services?	X										
Does your practice allow sales representatives into the office?				X							
In the last year has your practice taken steps to increase practice profitability?					X						
What steps has your practice taken to increase practice profitability?					X						
Please indicate how much you agree with the following statements. [Using the EHR increases my clinical efficiency.; The EHR helps me deliver better patient care.]						X					
What is your most preferred method to receiving new treatment information that may change your practice or prescribing habits?			X								
Which, if any, of the following additional services (in no particular order) are currently built into your practice for patient retention? [Advanced prostate cancer clinic; In-office dispensing pharmacy; In-office lab with pathology; Radiation oncologic care or services; Surgery center; None of the above]			X								
Do you currently have, or do you plan to add, one or more of the following for your practice/urology office in the next 6 to 12 months? [Incorporate an in-office dispensing pharmacy; Employ an oncology care model; Establish an advanced prostate cancer clinic; Use a consulting oncologist]			X								
Which of the following topics would you like to learn more about in the next 12-24 months? [Role for robotic prostatectomy in patients with de novo prostate cancer and 1-4 bony metastases; Sentinel node sampling in high risk patients undergoing robotic prostatectomy; Use of Gallium 68 PSMA PET/CT in the institutional setting in the care of prostate cancer patients; None of the above]			X								
What is your annual malpractice premiums per physician?							X				
Have you ever suffered a musculoskeletal injury as a result of performing laparoscopic or robotic urologic surgeries?										X	
Which of the following care, exams and/or services have you received because of a musculoskeletal inquiry?										X	
Have you had to limit or reduce your surgical practice as a result of chronic musculoskeletal injuries suffered from performing laparoscopic or robotic surgery?										X	
Do you prefer to use single-use or reusable flexible ureteroscopes (URS)?										X	
Which of the following reasons influence your preference between a single-use and reusable flexible ureteroscopes?										X	
Which of the following lasers are currently available for use at your practice?										X	
Has your institution purchased a new laser in the past 5 years?										X	
Is your practice planning to invest in a new laser in the next 5 years?										X	
What laser(s) is your practice planning to invest in the next 5 years?										X	
Measure Performance	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Does your primary practice routinely use quality measures to assess your performance?								X			
What are the top barriers to effective performance measurement and quality improvement?								X			
Online Urologic Services	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	

Do any of your patients normally utilize online urologic services for men such as Roman and Hims outside of your clinical encounters?								X			
What treatments are they receiving from urologic services for men such as Roman and Hims?								X			
If patients are utilizing urologic services for men, what treatments are they receiving?								X			
If patients are utilizing urologic services for men, what is the reason they use these services?								X			
What is the reason they use these online urologic services during ordinary business circumstances?								X			
Do you prescribe PDE5i to a new patient through asynchronous online communication?									X		
Patient-Reported Outcomes (PRO)	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you collect patient-reported outcomes from your patients?							X				
Methods used to collect patient-reported outcomes [Online survey; Paper survey administered in office or mailed to patients; Email survey; Telephone interview]							X				
For which urologic disease area(s) are patient-reported outcomes collected? [Prostate Cancer; Bladder Cancer; Urinary Stones; BPH; SUI; OAB]							X				
How is PRO information used in your clinical practice? [Assess Post-operative outcomes or Current status of a chronic condition; Diagnose reported health concern; Inform patients of treatment option; Other purpose]							X				
In which of the following ways do you use PRO information in your routine clinical practice?							X				
Patients: Access to Care	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
What is the waiting time for new patients to have their first appointment?							X				
If the waiting time for seeing new patients is longer than 4 weeks, are processes in place to get patients seen more quickly? If so, what are the processes? [Overbook patient; Offer an appointment with other available urologists; Offer appointment with advance practice provider (APP); Refer to telehealth/teledoc services]							X				
How can patients at your primary practice receive urologic care after normal office hours? [Leave message; Cross-covering partners; See residents; Visit emergency room or urgent care facility; Mobile app; Email; Telehealth/Telemedicine/Teledoc]							X				
What is the usual response time if a patient calls your office during normal business hours with a medical question?							X				
Which position in your office handles the majority of patient communication outside of the in-office visit? [Medical assistant; Nurse; APP; Physician; Non-clinical staff]							X				
Do you communicate with your patients outside of the in-office visit using an electronic portal (i.e., MyChart)?							X				
If a patient communicates with you using an electronic portal, what is your usual response time?							X				
Does communication with patients using electronic portals change your practice in the following areas? (Number of in-person appointments, Reduce telephone calls for medical questions, Makes PRO survey completion easier, Helps with online registration, Enhances care coordination, Facilitates patient education, Increases efficiency, Creates extra work)							X				
What are your commonly used sources for patient education?							X				
Please select your primary barrier to adopting shared decision making with patients in urology.						X					
Urologists may soon be required to provide and document personalized risk-benefit assessments for patients considering surgery using validated prediction tools, such as life expectancy tables, surgical risk calculators, and cancer nomograms. Please check the box that best reflects your answer (Always, Most of the time, Sometimes, Rarely, Never). [I use validated prediction tools as part of my clinical practice.; I find validated prediction tools to be helpful for assessing risks and benefits of surgery.; I trust my own assessment of surgery risks and benefits over estimates from validated prediction tools.]						X					
How do you believe clinical outcomes are affected by treatments that require prior authorization?										X	
In which of the following areas, has the need for prior authorization increased over the last five years?										X	
What is the average number of prior authorizations submitted on behalf of your patients in a typical week?										X	
When you are required to conduct a peer-to-peer consultation for prior authorization, how often is the insurers' representative in the same/similar specialty or have experience with your particular specialty and the services you perform and/or medications you prescribe?										X	
On average, how long does it take to receive prior authorization once all required documentation is submitted to the insurer?										X	
Patients: Health Insurance and Financial Hardship	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you participate with the following insurers? [Medicare; Medicaid; BlueCross Blue Shield; Aetna; Anthem/WellPoint; CIGNA; Humana; Kaiser Permanente; United Healthcare; VA; Self-pay; Other. Please specify]		X									
Does your practice accept Medicaid HMO patients?				X							
Does your practice accept Medicare Advantage patients?				X							
Has the percentage of uninsured patients you see increased, decreased or stayed the same since 2015?				X							
Has the percentage of patients covered by commercial payers you see increased, decreased or stayed the same since a year ago?				X							
What percentage of your patients have cancelled a visit due to high deductible?				X							
Are you aware of the percentage of your patients who are in financial hardship due to medical costs?				X							
What percentage of your patients do you estimate are in financial hardship due to medical costs?				X							
What is your annual medical malpractice premium per physician in your practice?	X										
What are your annual malpractice premiums per physician?							X				
Telemedicine	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you participate in a telemedicine program?			X		X		X	X			
What percentage of your encounters are considered telemedicine?					X						
What is the primary motivation of you/your organization for implementing telemedicine capabilities?					X						
Do you practice telemedicine for compensation? (e.g., video conferencing, text messages, online surveys, emails, telephone calls w/patients, telephone calls as a consultant to another physician)						X	X				

How do you compare the periurethral bulking agent you currently use to treat female patients with SUI to what you did three years ago?										X	
Palliative Care	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you discuss palliative care with your patients who are experiencing advanced urologic disease?							X				
Do you routinely perform pain assessments for your patients with advanced urologic disease?							X				
Do you routinely screen your patients with advanced urologic disease for depression or other mental health conditions?							X				
Prescription of Opioid	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you prescribe opioids for patients undergoing surgical procedures?					X						
How many opioid pills, on average, do you prescribe at discharge for patients post operatively for: (1) open abdominal surgery, (2) laparoscopic surgery, (3) scrotal surgery, (4) endoscopic surgery, and (5) pelvic floor surgery?					X						
Reasons for choosing the number of opioid pills at discharge					X						
Compared to three years ago, the number of opioid prescriptions I currently prescribe for patients undergoing surgical procedures has: (1) increased, (2) remain unchanged, (3) decreased, or (4) I don't know					X						
Smoking Cessation	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
How do you typically approach smoking cessation treatment in your clinic?								X			
For which urological disease(s) do you counsel patients to stop smoking?								X			
Select the barriers to the delivery of smoking cessation treatment in the urology clinic.								X			
What is the best way for urologists to help their patients quit smoking?								X			
Do you agree cigarette smoking is a significant contributor to urologic disease?								X			
Do you agree it is important for urologists to screen for and provide smoking cessation treatment to patients in the outpatient clinic?								X			
Specific Inpatient Procedures	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you perform cystectomy with continent urinary diversion?			X								
Do you perform redo complex hypospadias surgeries?			X								
Do you perform radical nephrectomies for renal tumors with vena cava thrombus?			X								
Do you perform urethroplasties using buccal mucosa?			X								
Do you perform laparoscopic and/or robotic urologic surgeries?										X	
Specific Patients	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you currently provide care for transgender patients?					X						
Do you see patients with nocturia?					X						
Which of the following treatments do you recommend for treating patients with erectile dysfunction or Peyronie's disease?										X	
How often do you surgically manage suspected penile fractures post collagenase clostridium histolyticum injections (Xiaflex)?										X	
Do you diagnose or treat patients experiencing female sexual dysfunction (FSD)?										X	
Torsion	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Which of the following describes your management of children and adolescents with testicular torsion? [I do not treat patients with testicular torsion; I perform orchietomy or orchidopexy in all ages; I perform orchietomy or orchidopexy only in age group of: [Please specify: [A pull-down list 0 to 18]; I prefer not to answer]									X		
Do you believe that all testicular torsion management/treatment, for persons < 18 years of age, should be done by pediatric urologists?									X		
Which is the following considerations most important for you to believe that all torsion < 18 years of age should be done by pediatric urologists? [Technical consideration; Medical-legal consideration; Access to pediatric anesthesia care; Office environment for pediatric care; Specialized training to do surgery on children/adolescents; Access to scrotal sonography; Added workload such as time spent on call or coming in for an emergency; Other, Please specify: None of the above; I don't know/I prefer not to answer]									X		
Treatment Decisions	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Which approaches do you regularly use in your conversation with patients when making disease-specific treatment decisions?						X					
UROLOGIST PROFESSION	YEAR OF AVAILABILITY										
Compensation	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Please enter the number of total RVUs (RVUs) you performed in the past year				X							
Please enter the number of total work RVUs (wRVUs) you performed in the past year				X							
What was your take home pay related to your clinical activity last year				X							
Reimbursement per day, if you get paid to be on call				X							
Do you have a contract or salary guarantee for your current job?							X				
What was the length of your initial contract for your current job?							X				
After your initial income guarantee, how did your income change the following year?							X				
What benchmark data did you usually use in your contract negotiation?							X				
How is your bonus/salary determined?							X				
If you get paid to be on call, your reimbursement per day is: [Select One]				X							
How are you paid?				X							
Please select the number of total RVUs (RVUs) you performed in the past year.				X							
Please select the number of work RVUs (wRVUs) you performed in the past year.				X							
What was your take home pay related to your clinical activity last year?				X					X		
Impact of COVID	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Do you feel the COVID-19 pandemic contributes to your burnout?								X			
Has the COVID-19 pandemic changed your retirement plan?								X			
What percentage of the normal revenue level was your primary practice able to maintain during the COVID-19 pandemic in 2020?								X			
What percentage of the normal revenue level has your primary practice been able to maintain in 2021?								X			
Were any of the following measures used by your primary practice to address lost revenue due to the COVID-19 pandemic in 2020?								X			
Do you anticipate continuing to use telemedicine after the COVID-19 pandemic abates?								X			
Family Leave and Responsibilities	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
Does your practice offer paid maternity leave?					X						
Does your practice offer paid paternity leave?					X						

Do you have a domestic partner?					X					
Who is primarily responsible for day-to-day family responsibilities (e.g., care for sick children)?					X					
Job Satisfaction	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Do you have adequate time to complete the following to keep up with changes in the field of urology: [attend live CME classes, attend online learning, attend in-person scientific meetings, attend webinars, participate in professional membership societies, participate in leadership training, read scientific papers or journals, watch videos or podcasts]								X		
Top Three Job Dissatisfiers (ranked): [use of electronic health records (HER), malpractice claims, CMS mandates/meaningful use requirements, decreasing reimbursements, ICD 10 conversion, too many patients to see, office staffing and complicated requirements for obtaining reimbursement, not enough time for my personal and/or family life, other, none of the above]								X		
Job Satisfaction for Employed and Self-Employed Urologists	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
You are currently an owner or partner of your practice? What do you dislike about being an employed urologist?				X						
Are you satisfied with your profession?				X						
Are you satisfied with your work autonomy?				X						
Were you an owner or partner of your practice in the past?				X						
Would you recommend self-employment over employment?				X						
If you were employed in the past, has your life/work balance improved after you became self-employed?				X						
Which of the following best characterizes your perception regarding self-employment in the next two years?				X						
Which do you believe provides greater opportunity for patient care?: (1) Being a practice owner or partner, (2) Being an employee, or (3) I don't know				X						
Which do you believe provides greater financial security?: (1) Being a practice owner or partner, (2) Being an employee, or (3) I don't know				X						
Which do you believe provides greater opportunity for professional development?: (1) Being a practice owner or partner, (2) Being an employee, or (3) I don't know				X						
Which do you believe provides better work/life balance?: (1) Being a practice owner or partner, (2) Being an employee, or (3) I don't know				X						
Does your practice provide enough financial support for you to attend the in-person meetings you want to attend for face-to-face interaction with other urologists?					X					
Does your practice provide enough financial support for you to obtain needed continued medical education (CME)?					X			X		
Do you have adequate time to complete the following to keep up with changes in the field of urology: [read scientific papers or journals, attend in-person scientific meetings, attend webinars, watch videos or podcasts, attend life CME classes, and attend online learning]					X					
Physician Burnout: Section A Emotional Exhaustion	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
I feel emotionally drained by my work			X					X		
Working with people all day long requires a great deal of effort			X					X		
I feel like my work is breaking me down			X					X		
I feel frustrated by my work			X					X		
I feel I work too hard at my job			X					X		
It stresses me too much to work in direct contact with people			X					X		
I feel like I'm at the end of my rope			X					X		
Have you experienced professional burnout or stress from work?										X
Which of the following options do you use by yourself to cope when you experience burnout/stress?										X
Have you sought professional help for burnout/stress?										X
For which of the following reasons did you not seek professional help when you experienced burnout?										X
Would you be more likely to seek professional help for burnout if those services were not eligible to be included in your records with the state licensure boards?										X
Physician Burnout: Section B Depersonalization	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
I feel I look after certain patients/clients impersonally, as if they are objects			X					X		
I feel tired when I get up in the morning and have to face another day at work			X					X		
I have the impression that my patients/clients make me responsible for some of their problems			X					X		
I am at the end of my patience at the end of my work day			X					X		
I really do not care about what happens to some of my patients/clients			X					X		
I have become more insensitive to people since I've been working			X					X		
I'm afraid that this job is making me uncaring			X					X		
I accomplish many worthwhile things in this job			X							
Physician Burnout: Section C Personal Achievement	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
I feel full of energy			X							
I am easily able to understand what my patients/clients feel			X							
I look after my patients'/clients' problems very effectively			X							
In my work, I handle emotional problems very calmly			X							
Through my work, I feel that I have a positive influence on people			X							
I am easily able to create a relaxed atmosphere with my patients/clients			X							
I feel refreshed when I have been close to my patients/clients at work			X							
Professional Satisfaction	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Does your work schedule leave you enough time for your personal and/or family life?				X				X		
How satisfied do you feel with your work-life balance?					X			X		
Please think of the most recent imbalance between work and personal responsibilities you have experienced and then indicate how the conflict was resolved in this instance.					X			X		
Top three job dissatisfiers				X						
If you had to do it over again, would you choose medicine as your career?				X				X		
Has physical discomfort from performing surgery led you to consider any of the following				X						
In the last 6 months, have you ever had any symptoms of work-related physical discomfort or pain associated with performing surgery?				X						
If given the opportunity again, would you choose urology as your medical specialty?				X				X		
Which of the following barriers has the greatest impact on your professional success?							X			

