

### Questionnaire on Peritoneal Dialysis Training for Nephrology Residents/Postgraduates- Dm

1. Name of the Professor/Head of the department (optional):
2. Name of the Institute (optional):
3. Number of faculty in Department (All cadres):
4. Number of faculty who receive special training in peritoneal dialysis:
5. Number of faculty who received special training in hemodialysis:
6. Number of patients on hemodialysis (MHD):
7. Number of patients on peritoneal dialysis:
8. Number of hours of didactic teaching lectures by faculty/seminars by residents/postgraduates dedicated to hemodialysis to a resident in 3 years:
9. Number of hours of didactic teaching lectures by faculty/seminars by residents/postgraduates dedicated to peritoneal dialysis to a resident in 3 years:
10. Number of days of rotation for Nephrology residents/postgraduates in hemodialysis wards/hemodialysis op:
11. Number of days of rotation for Nephrology residents/postgraduates in peritoneal dialysis wards/peritoneal dialysis op:
12. Is training of Nephrology residents/postgraduates in hemodialysis adequate?
13. a) If YES please specify the reasons:  
b) If the answer to question (12) is NO, could any of these choices are possible
  - I. Insufficient number of hemodialysis patients
  - II. Lack of training in hemodialysis for faculty
  - III. Faculty are trained but not comfortable
14. Is training of Nephrology residents/postgraduates in peritoneal dialysis adequate?
15. a) If YES please specify the reasons  
b) If the answer to question (14) is NO, could any of these choices are possible
  - I. Insufficient number of hemodialysis patients
  - II. Lack of training in hemodialysis for faculty
  - III. Faculty are trained but not comfortable
16. How many months of training in peritoneal dialysis per residents/postgraduates would be sufficient?
  - a. 2 months
  - b. 4 months
  - c. 6 months
  - d. Suggest:
17. How many new peritoneal dialysis patients per residents/postgraduates would be sufficient for adequate peritoneal dialysis training in 3-year period?
  - a. 5
  - b. 5–10
  - c. 10–12
  - d. >20
18. Which of the following factor(s) can potentially limit utilization of peritoneal dialysis?
  - a. Limited physicians training in peritoneal dialysis
  - b. Poor personal experience with peritoneal dialysis

- c. Problems with hospital support for peritoneal dialysis
  - d. Hospital support for hemodialysis
  - e. Lack of nursing expertise to support peritoneal dialysis
  - f. Lower physician reimbursement for peritoneal dialysis
  - g. Lack of peritoneal dialysis infrastructure, dedicated resources, and support
  - h. Lack of patient education on peritoneal dialysis
  - i. Other patient-related barriers
  - j. Concern about peritoneal dialysis clinical outcomes, relative to hemodialysis outcomes
  - k. Concern about mortality rates with peritoneal dialysis
  - l. No barrier
  - m. Proliferation of hemodialysis centers
19. Which of the following textbooks on peritoneal dialysis are available to the residents
- a. Nolph and Gokal's Textbook of Peritoneal Dialysis
  - b. Peritoneal Dialysis–Primer
  - c. Others
20. Which of the following journals dedicated to peritoneal dialysis are available to residents/postgraduates?
- a. Peritoneal Dialysis International
  - b. Indian Journal of Peritoneal Dialysis
  - c. Advances in Peritoneal Dialysis
21. In your peritoneal dialysis program, are the following regularly performed to peritoneal dialysis patients?
- a. Peritoneal Equilibration Test
  - b. Kt/V for peritoneal dialysis patients
  - c. Calculation of peritonitis rates
  - d. Training in hand hygiene to the residents/faculty
  - e. Percutaneous placement of peritoneal dialysis catheter
  - f. Exit site care
22. How many residents/postgraduates attend conferences/CMEs on peritoneal dialysis per year?
23. How many residents/postgraduates have published an article on peritoneal dialysis in the last 1 year?
24. What are the topics covered as a part of residents/postgraduates curriculum in classroom setting
- HD (yes/No) PD (yes/No)
- a. Physiology
  - b. Modality selection
  - c. Prescription management
  - d. Infection management
  - e. Access management
  - f. Other complications
  - g. Nutrition management
  - h. Administrative issues
  - i. Others

Thank you