

2-week postpartum survey

Please complete the survey below.

Thank you!

MRN _____

Date of Survey _____

Postoperative day of survey _____

When you had pain after discharge, which of the following was your FIRST choice for pain medication?

- Tylenol (acetaminophen)
 Motrin (ibuprofen)
 Opioid (oxycodone, percoset, etc)
 I didn't take anything for pain
 Other

Other _____

When you had pain after discharge, which of the following was your SECOND choice for pain medication?

- Tylenol (acetaminophen)
 Motrin (ibuprofen)
 Opioid (oxycodone, percoset, etc)
 I didn't take anything for pain
 Other

Other _____

Were you given a prescription for opioids (i.e. oxycodone, percoset, norco) when you were discharged from the hospital?

- Yes
 No

Do you know why you were not given a prescription for opioids after discharge?

- I don't know why I wasn't given a prescription
 I was offered a prescriptions but I declined
 My provider didn't think I needed a prescription
 My provider didn't want me to have a prescription
 Other reason

Briefly, can you explain why you think you didn't receive an opioid prescription after discharge.

Did you fill the prescription?

- Yes
 No
 Not applicable

Have you taken any opioid pills after discharge from the hospital?

- Yes
 No
 Not applicable

Why didn't you fill the prescription you were given or take any opioid pills

- I didn't have pain
 I was worried about how the opioids would make me feel
 I was worried about how the opioids would affect breastfeeding or my baby
 I was worried about getting addicted to opioids
 I have had a bad experience with opioids in the past
 I didn't receive a prescription
 Other reason

Can you explain in more detail why you didn't fill the prescription you were given or why you didn't take any pills?

Did you use all the opioid pills you were prescribed after discharge from the hospital?

- Yes
 No
 Not applicable

As of today are you taking any opioids for pain?

- Yes
 No
 Not applicable

How many opioid pills have you taken since discharge from the hospital?

(Enter "0" if you did not receive a prescription)

How many opioid pills do you have remaining in the bottle?

(Enter "0" if you did not receive a prescription)

Please estimate what date you stopped taking opioid pills?

POD that opioid pills were stopped

What have you done with leftover opioid pills?

- They are in my house in an unlocked location
 They are in my house in a locked location
 I threw them in the garbage
 I flushed them down the toilet
 I brought them back to a doctor's office or pharmacy
 I gave them to someone else
 I didn't receive or didn't fill a prescription
 I have none left over (used all pills)
 Other

If other, explain

List other things you used for pain after hospital discharge

- Acetaminophen (Tylenol)
 NSAIDS (Motrin, ibuprofen, Aleve)
 Aspirin
 Injection into my c-section wound
 Heating pad
 Meditation
 Acupuncture
 Other
 None
 (Check all that apply)

Other: (please list)

Did you receive a prescription for other pain medication (motrin, tylenol) when you were discharged from the hospital?

- Yes
 No

Have you taken any opioid pain medication other than what you were discharged with (buprenorphine, subutex)?

- Yes
 No

How many of these opioid pills have you taken since discharge from the hospital?

(Enter "0" if you did not receive a prescription)

How many of these opioid pills do you have remaining in the bottle?

(Enter "0" if you did not receive a prescription)

- I was discharged from the hospital with...
- too few opioid pills
 the appropriate amount of opioid pills
 too many opioid pills
- Since discharge, have you called or seen someone (your provider, an emergency room) because of pain?
- Yes
 No
- Since discharge, have you received a new prescription for opioids because of pain?
- Yes
 No

Can you explain in more detail?

- Overall, my pain from delivery has been...
- worse than I expected
 what I expected
 better than I expected

- Since discharge, have you had any complications related to your c-section or delivery?
- Yes
 No

- What were those complications?
- Wound infection or separation
 Infection of the uterus (endometritis)
 Breast infection (mastitis)
 Blood clot
 Hematoma
 Other

If other, explain

Delivery

- Were you hoping to have a vaginal delivery?
- Yes
 No
- Were you planning on having an unmedicated (natural) delivery?
- Yes
 No

Pain History

- Was there ever a point in your life when you took pain medications for more than 2 weeks?
- Yes
 No

Please explain why you took medications for more than two weeks?

- Which medication(s) did you take regularly for more than two weeks?
- Acetaminophen (Tylenol)
 NSAIDs (Ibuprofen, Motrin, Aleve, Aspirin)
 Narcotics or opioids (oxycodone, percoset, etc)
 Other
 (check all that apply)

If other, which medication?

Why did you stop taking this pain medication?

- I am still taking this medication
 I no longer had pain
 I had side effects from the medication that I couldn't tolerate
 I was worried about being dependent on the medication
 Other

Are you aware of potential problems taking opioid pain medications?

- Yes
 No

Osmundson SS, Schornack LA, Grasc JL, Zuckerwise LC, Young JL, Richardson MG. Postdischarge opioid use after cesarean delivery. *Obstet Gynecol* 2017;130.

The authors provided this information as a supplement to their article.

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Do you know anyone who has been dependent on a substance?

- Yes
 No

What was that substance?

- Nicotine (tobacco, cigarettes)
 Alcohol
 Marijuana
 Opioid or prescription drugs
 Methamphetamines
 Heroin
 Cocaine
 Other

If other, explain.

What was your relationship to the person you knew who was dependent or addicted to something?

- Brother or sister
 Parent
 Other relative (cousin, aunt)
 Friend
 Co-worker
 Multiple people
 Other

Other

At some point while taking opioids after delivery were you worried about becoming dependent on opioid pain medication?

- Yes
 No

Can you explain more?

Demographic Information

Have you lived in Tennessee for the majority of your pregnancy?

- Yes
 No

In which state did you live during the majority of your pregnancy?

In which Tennessee county did you live in during the majority of your pregnancy

- Davidson
- Williamson
- Rutherford
- Maury
- Robertson
- Hickman
- Cheatham
- Sumner
- Wilson
- Anderson
- Bedford
- Benton
- Bledsoe
- Blount
- Bradley
- Campbell
- Cannon
- Carroll
- Carter
- Chester
- Claiborne
- Clay
- Cocke
- Coffee
- Crockett
- Cumberland
- Decatur
- DeKalb
- Dickson
- Dyer
- Fayette
- Fentress
- Franklin
- Gibson
- Giles
- Grainger
- Greene
- Grundy
- Hamblen
- Hamilton
- Hancock
- Hardeman
- Hardin
- Hawkins
- Haywood
- Henderson
- Henry
- Houston
- Humphreys
- Jackson
- Jefferson
- Johnson
- Knox
- Lake
- Lauderdale
- Lawrence
- Lewis
- Lincoln
- Loudon
- Macon
- Madison
- Marion
- Marshall
- McMinn
- McNairy
- Meigs
- Monroe
- Montgomery
- Moore
- Morgan

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- Obion
- Overton
- Perry
- Pickett
- Polk
- Putnam
- Rhea
- Roane
- Scott
- Sequatchie
- Sevier
- Shelby
- Smith
- Stewart
- Sullivan
- Tipton
- Trousdale
- Unicoi
- Union
- Van Buren
- Warren
- Washington
- Wayne
- Weakley
- White

What is your highest level of education completed?

- Less than grade school
- Grade school
- High school
- Some college
- College
- Postgraduate
- Unknown