

SECTION 600 – SCREENER

BASE: ALL RESPONDENTS

Q8625 Thank you for agreeing to take this survey. Our first few questions are for classification purposes. They will also help us properly analyze responses to this survey. We never disclose the identity of any individual. Your answers will always be kept strictly confidential. We report results only for groups of people, not for individuals.

Are you a practicing pulmonologist, or fellow or in training?

- | | | |
|---|------------------------------------------|-----------------|
| 1 | Pulmonologist or pulmonary critical care | [QUALIFIED] |
| 2 | Fellow/in training | [QUALIFIED] |
| 7 | None of these | [NOT QUALIFIED] |

BASE: FELLOW/IN TRAINING (Q8625/2)

Q8630 What year are you in your fellowship?

- | | |
|---|----------------------|
| 1 | 1 st year |
| 2 | 2 nd year |
| 3 | 3 rd year |
| 4 | 4 th year |

SECTION 700 – COPD PATIENT PROFILE

BASE: PULMONOLOGIST/FELLOW

Q700 How many COPD patients do you see in a typical week?

|_|_| patients [RANGE = 0 – 1000]

BASE: PULMONOLOGIST/FELLOW

Q705 Approximately what proportion of your COPD patients were referred to you by each of the following?

[RANDOMIZE CODES 1-3]

- | | | |
|---|-----------------------------------------------|-------|
| 1 | Allergist/Immunologist | _ _ % |
| 2 | Primary care physician | _ _ % |
| 3 | Emergency room | _ _ % |
| 4 | Other physician or allied health professional | _ _ % |
| 5 | Were not referred | _ _ % |

BASE: PULMONOLOGIST/FELLOW

Q720 Thinking about all of the COPD patients you see/treat, what proportion fall into each of the following categories of the mMRC Dyspnea Scale based on their current ability to perform everyday activities?

- 1 mMRC Grade 0 (not troubled by breathlessness except on strenuous exercise)
|_|_|_|%
- 2 mMRC Grade 1 (short of breath when hurrying on the level or walking up a slight hill)
|_|_|_|%
- 3 mMRC Grade 2 (walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace) |_|_|_|%
- 4 mMRC Grade 3 (stops for breath after walking about 100 yards or after a few minutes on level ground) |_|_|_|%
- 5 mMRC Grade 4 (too breathless to leave the house, or breathless when undressing)
|_|_|_|%

SECTION 800 – GENERAL EXPERIENCE WITH TREATING COPD

BASE: PULMONOLOGIST/FELLOW

Q800 How interested, if at all, are you in receiving additional education in each of the following areas?

- 1 Not at all interested
- 2 Not very interested
- 3 Somewhat interested
- 4 Very interested

[DO NOT RANDOMIZE]

- 1 Identifying COPD
- 2 Diagnosing COPD
- 3 Staging COPD
- 4 Medications to treat/manage COPD
- 5 Treatment devices (e.g., inhalers, hand-held nebulizers)
- 6 Preventing exacerbations
- 7 Teaching patients how to use their device (e.g., DPI, MDI, soft mist or hand-held nebulizer)
- 8 Teaching patients how to clean and store their device (e.g., DPI, MDI, soft mist or hand-held nebulizer)

BASE: PULMONOLOGIST/FELLOW

Q805 How knowledgeable do you feel about each of the following aspects of COPD?

- 1 Not at all knowledgeable
- 2 Not very knowledgeable
- 3 Somewhat knowledgeable
- 4 Knowledgeable
- 5 Very knowledgeable
- 6 Extremely knowledgeable

[RANDOMIZE BUT KEEP ITEMS 7 AND 8 TOGETHER]

- 1 Symptoms
- 2 Risk factors
- 3 Use of spirometry
- 4 Medications to treat/manage COPD
- 5 Treatment devices (e.g., inhalers, nebulizers)
- 6 Preventing exacerbations
- 7 Teaching patients how to use their device (e.g., DPI, MDI, soft mist or hand-held nebulizer)
- 8 Teaching patients how to clean and store their device (e.g., DPI, MDI, soft mist or hand-held nebulizer)

BASE: PULMONOLOGIST/FELLOW

Q810 Which of the following do you typically discuss with your COPD patients during their first visit with you? Please select all that apply.

[MULTIPLE RESPONSE; RANDOMIZE BUT KEEP ITEMS 1 AND 2, 7 AND 8 TOGETHER]

- 1 What COPD is
- 2 Causes of COPD
- 3 Ways to manage or reduce their risk of exacerbations
- 4 Treatment options for COPD
- 5 Risks and benefits of treatment options
- 6 Patient concerns about living with COPD
- 7 How to use their device(s) (e.g., DPI, MDI, soft mist, hand-held nebulizer)
- 8 How to clean and store their device(s) (e.g., DPI, MDI, soft mist, hand-held nebulizer)
- 9 Additional educational resources
- 10 Follow up contact and support
- 11 Smoking cessation advice
- 96 Other [ANCHOR]
- 97 None [ANCHOR; EXCLUSIVE]

BASE: PULMONOLOGIST/FELLOW

Q815 Which of the following, if any, do you typically do when treating COPD patients? Please select all that apply.

[MULTIPLE RESPONSE; RANDOMIZE]

- 1 Assess the severity of their airflow limitation
- 2 Obtain a detailed medical history
- 3 Coordinate laboratory testing
- 4 Perform a physical examination
- 5 Screen for physical impairment
- 6 Screen for cognitive impairment
- 7 Perform spirometry
- 8 Assess the severity of exacerbations

- 9 Identify/test for comorbidities
- 10 Educate the patient on signs and symptoms of COPD
- 11 Direct the patient to COPD support groups and websites
- 12 Prescribe a pharmacologic therapy
- 13 Educate the patient on risks and benefits of various treatment options
- 14 Discuss device options
- 15 Refer to another respiratory care practitioner
- 96 Other [ANCHOR]

BASE: PULMONOLOGIST/FELLOW

Q820 Which of the following interventions, if any, have you recommended or prescribed to your COPD patients with mMRC Dyspnea Scale of...? Please select as many as apply in each column.

Q821

- 1 mMRC Grade 0
- 2 mMRC Grades 1-2
- 3 mMRC Grades 3-4

[MULTIPLE RESPONSE; RANDOMIZE]

- 1 Smoking cessation
- 2 Influenza vaccination
- 3 Pneumococcal vaccination
- 4 Hand-held inhaled corticosteroid (ICS)
- 5 Nebulized ICS
- 6 Handheld (e.g., MDI, DPI, soft mist) short-acting beta-agonist (SABA)
[KEEP WITH CODE 7]
- 7 Nebulized SABA
- 8 Hand-held (e.g., MDI, DPI, soft mist) short-acting muscarinic antagonist (SAMA)
- 9 Nebulized SAMA [KEEP WITH CODE 8]
- 10 Long-acting beta-agonist (LABA) [KEEP WITH CODE 11]
- 11 Nebulized LABA
- 12 Long-acting muscarinic antagonist (LAMA)
- 13 Oral corticosteroid
- 14 Phosphodiesterase-4 inhibitors
- 15 Lifestyle modifications
- 16 Pulmonary rehab
- 17 LABA/LAMA
- 18 ICS/LABA
- 96 Other [ANCHOR]
- 97 None [ANCHOR; EXCLUSIVE]

SECTION 900 – EXPERIENCE WITH/OPINIONS OF NEBULIZERS

BASE: PULMONOLOGIST/FELLOW

Q900 When do you typically recommend a nebulized medication for COPD patients with mMRC Dyspnea Scale of...? Please select only one response in each column.

Q901

- 1 mMRC Grade 0
 - 2 mMRC Grade 1
 - 3 mMRC Grade 2
 - 4 mMRC Grade 3
 - 5 mMRC Grade 4
 - 6 Acute exacerbation
-
- 1 Early on in treatment
 - 2 Later stages of treatment
 - 3 Do not recommend nebulized medication

BASE: PULMONOLOGIST/FELLOW

Q905 How knowledgeable do you feel about each of the following aspects of hand-held (small volume) nebulizers?

- 1 Not at all knowledgeable
- 2 Not very knowledgeable
- 3 Somewhat knowledgeable
- 4 Knowledgeable
- 5 Very knowledgeable
- 6 Extremely knowledgeable

[RANDOMIZE]

- 1 What a hand-held nebulizer is intended for
- 2 Who should use a hand-held nebulizer
- 3 When a hand-held nebulizer should be used
- 4 How to use a hand-held nebulizer
- 5 How to clean and maintain a hand-held nebulizer to prevent infections
- 6 Latest developments in technology

BASE: PULMONOLOGIST/FELLOW

Q910 To what extent, if at all, do you explain each of the following aspects of hand-held nebulizers when prescribing nebulized treatments to your COPD patients?

- 1 Not at all
- 2 Some
- 3 A lot
- 4 A great deal

[RANDOMIZE]

- 1 What a hand-held nebulizer is intended for
- 2 Who should use a hand-held nebulizer
- 3 When a hand-held nebulizer should be used
- 4 How to use a hand-held nebulizer
- 5 How to clean and maintain a hand-held nebulizer to prevent infections
- 6 Latest developments in technology

BASE: PULMONOLOGIST/FELLOW

Q915 Which of the following, if any, describe your opinion of hand-held (small volume) nebulizers?
Please select all that apply.

[MULTIPLE RESPONSE; RANDOMIZE]

- 1 Complicated for patients
- 2 Burdensome
- 3 Time-consuming
- 4 Portable
- 5 Undesirable side effects
- 6 Efficient
- 7 Fast-acting
- 8 Easy to use
- 9 Convenient
- 10 Expensive
- 11 Possible contamination
- 12 Essential for some patients
- 97 None of these [ANCHOR; EXCLUSIVE]

BASE: PULMONOLOGIST/FELLOW

Q916 Compared to metered dose inhalers (MDI) or dry powdered inhalers (DPI), do you find hand-held (small volume) nebulizers more effective or less effective for each of the following COPD patient groups?

Q917

- 1 Much less effective
- 2 Somewhat less effective
- 3 Equally as effective
- 4 Much more effective
- 5 Somewhat more effective

[DO NOT RANDOMIZE]

- 1 mMRC Grade 0 (not troubled by breathlessness except on strenuous exercise)
- 2 mMRC Grade 1 (short of breath when hurrying on the level or walking up a slight hill)
- 3 mMRC Grade 2 (walks slower than most people on the level, stops after a mile or so, or stops after 15 minutes walking at own pace)

- 4 mMRC Grade 3 (stops for breath after walking about 100 yards or after a few minutes on level ground)
- 5 mMRC Grade 4 (too breathless to leave the house, or breathless when undressing)
- 6 Acute exacerbation

BASE: PULMONOLOGIST/FELLOW

Q920 How much do you agree or disagree with each of the following statements about hand-held (small volume) nebulizers for COPD patients?

- 1 Strongly disagree
- 2 Somewhat disagree
- 3 Somewhat agree
- 4 Strongly agree

[RANDOMIZE]

- 1 I would appreciate additional guidance and education about hand-held nebulizers.
- 2 I take time to explain how hand-held nebulizers work when prescribing nebulized treatments to my COPD patients.
- 3 I am not sure when it is most appropriate to use hand-held nebulizers versus metered dose inhalers (MDI) or dry powdered inhalers (DPI).
- 4 Worsening symptoms indicate that a patient should consider switching devices.
- 5 I would like to learn about different kinds of nebulizers.
- 6 COPD patients with poor MDI/DPI technique or respiratory muscle weakness should be tried on a hand-held nebulizer.
- 7 Most of my COPD patients prefer hand-held nebulizers over metered dose inhalers (MDI) or dry powdered inhalers (DPI).

BASE: PULMONOLOGIST/FELLOW

Q925 How important is each of the following to long-term patient health?

Q926

- 1 Not at all important
- 2 Not very important
- 3 Somewhat important
- 4 Very important
- 5 Absolutely essential

[ROTATE]

- 1 Proper administration of medication
- 2 Device decontamination

BASE: PULMONOLOGIST/FELLOW

Q928 How often are you familiar with the type of hand-held (small volume) nebulizer device given to your COPD patient by your (or their) chosen Durable Medical Equipment (DME) vendor?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 Always

BASE: PULMONOLOGIST/FELLOW

Q930 Who is responsible for assessing patient technique in the proper use and cleaning of hand-held (small volume) nebulizers? Please select all that apply.

[MULTIPLE RESPONSE; RANDOMIZE]

- 1 I am
- 2 A nurse in my practice
- 3 Durable Medical Equipment (DME) company
- 4 Pharmacist
- 5 Other respiratory care practitioner
- 6 Someone else on my staff (e.g., physician's assistant, junior clinical staff, allied health care professional)
- 7 N/A – No one assesses patient technique in using and cleaning hand-held (small volume) nebulizers [ANCHOR; E]
- 8 Not sure [ANCHOR; E]

BASE: SOMEONE ASSESSES PATIENT TECHNIQUE IN USING SMALL VOLUME NEBULIZERS (Q930/NE 7,8)

Q935 When are your COPD patients assessed for proper technique in using and cleaning hand-held (small volume) nebulizers?

[RANDOMIZE]

- 1 Only at first prescription
- 2 Periodically to ensure proper administration
- 8 Not sure [ANCHOR]

SECTION 300: DEMOGRAPHICS

BASE: PULMONOLOGIST/FELLOW

Q8732 The next series of questions is for classification purposes only.

BASE: PULMONOLOGIST/FELLOW

Q8735 In what state or territory is your practice located? If you practice in more than one state/territory, please select the state/territory where you consider your primary practice to be located.

[LIST OF STANDARD US STATE CODES]

BASE: PULMONOLOGIST/FELLOW

Q8738 In what zip code is your practice located? If you practice in more than one office/clinic, please use the zip code for your primary office/clinic.
 If you practice in a hospital and an office/clinic, please use the zip code for your office/clinic.

[PROGRAMMER NOTE: ALLOW ONLY 5-DIGIT, NUMERIC CODE]

|_|_|_|_|_| Please enter only the first five digits.

BASE: PULMONOLOGIST/FELLOW

Q8702 Are you...?

- 1 Male
- 2 Female

BASE: PULMONOLOGIST/FELLOW

Q8704 In what year were you born? Please enter as a four-digit number, e.g., 1963.

|_|_|_|_| [RANGE: 1900-Q109 (CURRENT YEAR) MINUS 6]

BASE: PULMONOLOGIST/FELLOW

Q8705 HIDDEN COMPUTE FOR AGE

[RANGE: 0-120]

BASE: PULMONOLOGIST/FELLOW

Q8716 Which of the following best describes your medical practice?

- 1 Academic medical center
- 2 Private practice
- 3 Veteran Affairs
- 4 Long-term care facility
- 5 Hospice
- 96 Other

[IF WORKS IN PRIVATE PRACTICE (Q8716/2), ASK Q8719. ALL OTHERS JUMP TO Q8722.]

BASE: PRIVATE PRACTICE (Q8716/2)

Q8719 How would you describe your office or clinic?

- | | |
|---|--------------------------------------------------------------|
| 1 | Solo practice |
| 2 | Single-specialty partnership or group (2 or more physicians) |
| 3 | Multi-specialty partnership or group (2 or more physicians) |

BASE: PULMONOLOGIST/FELLOW

Q8722 On average, how many patients do you see in a typical week? If you are not sure, your best estimate will do.

|_|_| patients [RANGE: 0-999]

End of survey proposed language:

Thank you for your participation in this survey! We appreciate your time and thank you for your opinions. You will be entered into a drawing to win one of three complimentary registrations to ATS 2016 in San Francisco. Winners will be notified in the coming weeks.

This survey was developed as part of a collaborate effort between the American Thoracic Society (ATS) and Sunovion Pharmaceuticals Inc.

For more information about the ATS, please visit <http://www.thoracic.org/>.