For Pediatric Pulmonary Physicians

1. What is your gender?
   1. Male
   2. Female
2. How many years since you completed training
   1. <5years
   2. 5-10 years
   3. 10-15 years
   4. 15-20 years
   5. >20 years
3. What type of practice are you in?
   1. Academic
   2. Private
   3. Private with academic affiliation
4. Do work in a:
   1. Pediatric CF program
   2. An affiliate Program
5. In what region of the country do you practice?
   1. Southeast
   2. Northeast
   3. Midwest
   4. Southwest
   5. Northwest
   6. Mountain
   7. Canada
6. Do you care for patients with Cystic Fibrosis
   1. Yes
   2. No
7. How many patients with Cystic Fibrosis do you care for?
   1. 0
   2. <10
   3. 10-25
   4. 25-50
   5. >50
8. Is your practice:
   1. Primarily pediatric (Age <18)
   2. Primarily Adult (Age >18)
9. When do you refer cystic fibrosis patients to an Otolaryngologist?
   1. As part of a routine
   2. Only if patient requests
   3. If patient continually has sinus complaints
   4. Increase in frequency of pulmonary exacerbations despite treatment
   5. Increase in frequency of pulmonary exacerbations despite treatment and with sinus symptoms
   6. Only in setting of complications from sinus disease
   7. If my efforts at treating sinus disease are not successful
10. How would you rate the following statement: I have a cooperative, open door relationship with my otolaryngology colleagues? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Strongly Agree)
11. When do you obtain CT imaging of the sinuses?
    1. I do not, I defer to the Otolaryngologist to obtain images
    2. Prior to referral to Otolaryngology
    3. Routinely as a baseline in all CF patients
    4. In setting of worsening sinus symptoms
    5. After failure of maximal medical management
12. Which of the following should be included as part of maximal medical management of CF sinus disease? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Strongly Agree)
    1. Oral Antibiotics
    2. IV antibiotics
    3. Nasal Saline Irrigations
    4. Nasal Steroid
    5. Oral Steroid
    6. Nebulized/Topical antibiotics
13. How would you rate the follow indicators for surgical management of CF patient’s sinus disease? (1=not an indication 2= minor indicator 3=major indicator)
    1. Improvement in quality of life
    2. Increased frequency of pulmonary exacerbations despite aggressive pulmonary treatment
    3. Increased frequency of pulmonary exacerbations despite aggressive pulmonary treatment and in the setting of symptoms consistent with sinusitis.
    4. I do not believe in surgical treatment of sinus disease
14. How strongly do you believe the statement: Sinuses serve as a reservoir for bacteria and subsequent pulmonary colonization/reinfection? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Strongly Agree)
15. How strongly do you believe the statement: Aggressive management of sinus disease in patients with CF can positively impact pulmonary function? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Agree)
16. How strongly do you believe the statement: Aggressive management of sinus disease in patients with CF can positively impact quality of life? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Strongly Agree)
17. How strongly do you believe the statement: Aggressive management of sinus disease can positively impact sinus symptoms? (1= strongly disagree 2=disagree 3=neutral 4=Strongly Agree 5= Strongly Agree)