

**\* This is a research project being conducted by the NIH/NHLBI-supported Pediatric Heart Network to study the dissemination of results of an NIH-sponsored clinical trial. You are invited to participate because you have been identified as a pediatric cardiovascular medicine specialist.**

**This brief survey should take no more than 5 minutes to complete. The results of this study will be used for scholarly purposes only with the goal of improving care of children with complex congenital heart disease.**

**Your responses will be confidential and the survey does not collect personally identifying information. SurveyMonkey will block your email address so responses cannot be linked with your name. SSL encryption will be used to protect data transmission. All study data are stored on database servers, with access controlled by extensive security features.**

**Participation in the study is voluntary and you can stop it with no penalty at any time by clicking an 'Exit this survey' button present on each page of the survey (or by simply closing the browser). The responses you've provided before exiting from the survey will be saved.**

**Should you have any questions about this study, please contact the principal investigator, Dr. Victor Zak at the New England Research Institutes at (800) 775-6374, extension 233. If you have any questions regarding your rights as a research subject, please contact Ms. Nancy Gee, MPH, Institutional Review Board Administrator at the New England Research Institutes at (800) 775-6374, extension 249**

**ELECTRONIC CONSENT: Please select your choice below.**

- I have read the above information, and voluntarily agree to participate in this survey
- I do not wish to participate in this survey

**\*1. How would you describe yourself professionally (please select one answer)?**

- Pediatric cardiologist
- Pediatric intensivist
- Pediatric cardiac surgeon
- Advanced practice nurse or nurse practitioner (with prescribing privileges)
- Medical professional not involved in patient care
- Prefer not to respond
- Other (please specify)

**\*2. How many single ventricle infants do you care for in a year (on average, over last 5 years)?**

- 0
- 1-5
- 6-10
- 11-15
- >15
- Prefer not to respond

Comments

**\*3. Over the last 3 years, did you change your prescription practice for angiotensin converting enzyme (ACE) inhibition therapy for single ventricle (SV) infants < 14 months of age?**

- Yes, overall I currently prescribe ACE inhibition therapy for SV infants < 14 months of age more frequently
- Yes, overall I currently prescribe ACE inhibition therapy for SV infants < 14 months of age less frequently
- No, I don't normally prescribe cardiac meds
- No, overall there is no change in my prescription practice of ACE inhibition therapy for SV infants < 14 months of age
- Not sure
- Prefer not to respond

Other (please specify)

**\*4. At the present time, how frequently do you prescribe ACE inhibition therapy to single ventricle infants < 14 months of age?**

- Almost always (except for the cases with contraindications)
- Selectively
- Almost never
- Never
- Prefer not to respond

Comments

**\*5. At the present time, for which indications do you prescribe ACE inhibition therapy to single ventricle infants < 14 months of age? ( Please select all that apply)**

	TO PREVENT	TO TREAT
Systemic ventricular dysfunction	<input type="checkbox"/>	<input type="checkbox"/>
Atrioventricular valve regurgitation	<input type="checkbox"/>	<input type="checkbox"/>
Poor growth	<input type="checkbox"/>	<input type="checkbox"/>
Semilunar valve regurgitation	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Prefer not to respond	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

**\*6. Have results of the Pediatric Heart Network (PHN) sponsored trial of ACE inhibition in infants with single ventricle (ISV trial) been helpful to you in making treatment decisions?**

- Yes, I've changed my treatment decisions as a result of the trial findings
- Yes, I am more confident now in my treatment decisions as a result of the trial findings, though they didn't change
- No, I am not familiar with the results of this trial
- No, I am familiar with the trial's results, but they didn't affect my treatment decisions
- Prefer not to respond

Comments

**\*7. In the past, before learning about the ISV trial findings, how frequently did you prescribe ACE inhibition therapy to single ventricle infants < 14 months of age?**

- Almost always (except for the cases with contraindications)
- Selectively
- Almost never
- In the past I didn't prescribe cardiac meds
- Never
- Prefer not to respond

Comments



**\*8. In the past, before learning about the ISV trial findings, what was your rationale for prescribing ACE inhibition therapy to single ventricle infants < 14 months of age? ( Please select all that apply)**

	TO PREVENT	TO TREAT
Systemic ventricular dysfunction	<input type="checkbox"/>	<input type="checkbox"/>
Atrioventricular valve regurgitation	<input type="checkbox"/>	<input type="checkbox"/>
Poor growth	<input type="checkbox"/>	<input type="checkbox"/>
Semilunar valve regurgitation	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Prefer not to respond	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

**\*9. How did you learn about results of the ISV trial? (Please select all that apply)**

- I heard or read about the presentation at the American Heart Association Meeting
- I read the publication
- I read a brief description elsewhere
- Colleagues told me about the results
- I was actively involved in the conduct of the trial
- I was somewhat involved in the execution of the trial
- Prefer not to respond
- Other (please specify)

**\*10. Please check any/all of the following statements about the ISV trial:**

	agree	disagree	not sure
Trial was well designed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Patients in the study are similar to the patients I care for in my practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Primary endpoint was relevant	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Findings of the trial were properly interpreted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dose of ACE inhibition was too low	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Follow-up was too short	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consent rate was too low	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drop out rate was too high	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sample size was too small	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prefer not to respond	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

**\*11. Have you ever practiced at a Pediatric Heart Network (PHN) clinical site (main or auxiliary)?**

- Yes
- No
- Don't know
- Prefer not to respond

**\*12. How many years have you been practicing your specialty?**

- Currently in training
- < 5 years after training
- 5 to 9 years after training
- 10 to 20 years after training
- > 20 years after training
- Prefer not to respond

Comments

**\*13. Where is your primary practice located?**

- Northeastern USA
- Southeastern USA
- Mid-West USA
- Northwestern USA
- Southwestern USA
- Canada
- Prefer not to respond
- Other (please specify)

**\*14. How would you describe your clinical practice?**

- Academic/University based
- Non-university private practice or salaried employee of a hospital
- Non-university based practice with a close affiliation with an academic institution (i.e. adjunct academic appointment)
- Prefer not to respond
- Other (please specify)

**\*15. How do you commonly learn about results of clinical research in your field? (Please select all that apply)**

- Presentation at a national meeting
- Publication in a peer-reviewed journal
- Website of professional organizations
- Newsletters from professional organizations
- Colleagues
- Prefer not to respond
- Other (please specify)

**\*What is your gender?**

- Female
- Male

Thanks for your time.