**Supplementary Material**

**Questionnaire Script**

**Online questionnaire script:**

We are seeking 20 parent and 20 physician volunteers to participate in a web-based online questionnaire on cow’s milk fat.  It should take approximately 3 minutes to complete.

PARTICIPATION
Your participation in this questionnaire is voluntary. You may refuse to take part in the research or exit the questionnaire at any time without penalty. You are free to decline to answer any particular question you do not wish to answer for any reason. Due to the anonymous nature of the questionnaire, you are not able to withdraw responses once they are submitted.

[For parents] If you choose not to participate, you and your family will continue to have access to customary care at St. Michael’s Hospital.  If you choose to take part in this study, you can change your mind without giving a reason, and you may withdraw from the study at any time without any effect on the care you or your family will receive at St. Michael’s Hospital.

[For physicians] The decision to participate or not, and the responses given, will have no impact on your position or evaluation at SMH.

BENEFITS
You will receive no direct benefits from participating in this research study. Your responses will help us learn more about your attitudes towards cow’s milk fat and help us to develop a new clinical trial tailored to your needs.

RISKS

There are no foreseeable risks involved in participating in this study other than those encountered in day-to-day life and potential inconvenience of 3 minutes of your time.
CONFIDENTIALITY
Your questionnaire answers will be sent to a link at SurveyMonkey.com where data will be stored in a password protected electronic format. Survey Monkey does not collect identifying information such as your name or email address. Therefore, your responses will remain anonymous. No one will be able to identify you or your answers, and no one will know whether or not you participated in the study. Once analyzed for research purposes, data will be stored for 7 years, and then destroyed.

By completing this questionnaire, you are agreeing to the following: Since Survey Monkey’s servers are located in the United States, they are subject to the conditions of the Patriot Act which allows authorities to access the records of internet service providers. If you choose to participate in this questionnaire, you understand that your responses to the questionnaire questions and IP address may be accessed outside of Canada.

ELECTRONIC CONSENT

Please select your choice below. You may print a copy of this consent form for your records. Clicking on the “Agree” button indicates that

* You have read the above information
* You voluntarily agree to participate

🞎 Agree

🞎 Disagree

**Physicians:**

1. What cow’s milk fat recommendation do you typically make during the 2-year well-child visit?
	1. Skim (0.1%)
	2. 1%
	3. 2%
	4. Whole/homo (3.25%)
	5. None
2. What dietary recommendations do you usually provide to parents of ~2 year old children whom you, or the parent, suspects is at risk of overweight/obesity?
	* 1. Reducing sugar sweetened beverage intake
		2. Reducing bottle use
		3. Reducing fat intake
		4. Reducing fat content of cow’s milk to skim, 1% or 2% fat
		5. Increasing fat content of cow’s milk to 3.25% fat
		6. Reducing caloric intake
		7. Increasing fruit/vegetable intake
		8. Structuring meals/snacks
		9. Other (please specify)
3. What dietary recommendations do you usually provide to parents of ~2 year old children whom you, or the parent, suspects is underweight?
	* 1. Increasing energy intake
		2. Increasing fat content of cow’s milk to 3.25% fat
		3. Reducing fat content of cow’s milk to skim, 1% or 2% fat
		4. Increasing meal/snack frequency
		5. Food fortification (i.e. protein powders)
		6. Other (please specify)
4. What do you think is the ideal cow’s milk fat content children over 2 years of age to consume?
	* 1. Skim (0.1%)
		2. 1%
		3. 2%
		4. Whole/homo (3.25%)
5. What do you think are the benefits of providing children older than 2 years of age with whole (3.25% fat) milk (select all that apply)?
	* 1. Better body composition
		2. Healthier growth rate
		3. Better brain development
		4. Obesity prevention
		5. Better nutrition (fat soluble vitamins etc.)
		6. Other (please specify)
		7. None
6. What do you think are the harms of providing children older than 2 years of age with whole (3.25%) fat milk (select all that apply)?
	* 1. May cause higher adiposity
		2. Higher saturated fat intake
		3. Creation of higher fat dietary pattern
		4. Other (please specify)
		5. None
7. What do you think are the benefits of providing children older than 2 years of age with reduced (1% or 2%) fat milk (select all that apply)?
	* 1. Better body composition
		2. Healthier growth rate
		3. Better brain development
		4. Obesity prevention
		5. Better nutrition (fat soluble vitamins etc.)
		6. Other (please specify)
		7. None
8. What do you think are the harms of providing children older than 2 years of age with reduced (1% or 2%) fat milk (select all that apply)?
	* 1. May cause higher adiposity
		2. Higher saturated fat intake
		3. Creation of higher fat dietary pattern
		4. Other (please specify)
		5. None

**Parents:**

1. What cow’s milk fat recommendation did your child’s physician make during their 2-year well-child visit, if any?
	1. Skim (0.1%)
	2. 1%
	3. 2%
	4. Whole/homo (3.25%)
	5. None
2. What fat content of cow’s milk do you usually provide to your child?
	1. Skim (0.1%)
	2. 1%
	3. 2%
	4. Whole/homo (3.25%)
3. Why do you choose this fat content of cow’s milk for your child?
	1. Recommended by my child’s physician
	2. Recommended by Canada’s Food Guide, Health Canada or Canadian Pediatric Society (web or print)
	3. Recommended by friend/family
	4. Other (please specify)
4. What do you think are the benefits of providing children older than 2 years of age with whole (3.25% fat) milk (select all that apply)?
	* 1. Better body composition
		2. Healthier growth rate
		3. Better brain development
		4. Obesity prevention
		5. Better nutrition (fat soluble vitamins etc.)
		6. Other (please specify)
		7. None
5. What do you think are the harms of providing children older than 2 years of age with whole (3.25%) fat milk (select all that apply)?
	* 1. May cause higher adiposity
		2. Higher saturated fat intake
		3. Creation of higher fat dietary pattern
		4. Other (please specify)
		5. None
6. What do you think are the benefits of providing children older than 2 years of age with reduced (1% or 2%) fat milk (select all that apply)?
	* 1. Better body composition
		2. Healthier growth rate
		3. Better brain development
		4. Obesity prevention
		5. Better nutrition (fat soluble vitamins etc.)
		6. Other (please specify)
		7. None
7. What do you think are the harms of providing children older than 2 years of age with reduced (1% or 2%) fat milk (select all that apply)?
	* 1. May cause higher adiposity
		2. Higher saturated fat intake
		3. Creation of higher fat dietary pattern
		4. Other (please specify)
		5. None

**Interview Script**

Your participation in this questionnaire is voluntary. You may refuse to take part in the research or stop the interview at any time without penalty. You are free to decline to answer any particular question you do not wish to answer for any reason. The decision to participate or not, and the responses given, will have no impact on your [physicians: position or evaluation; parents: access to customary care at] at St. Michael’s Hospital. You will receive no direct benefits from participating in this research study. Your responses will help us learn more about your attitudes towards cow’s milk fat and help us to develop a new clinical trial tailored to your needs. There are no foreseeable risks involved in participating in this study other than those encountered in day-to-day life and potential inconvenience of 15 minutes of your time. Your answers will be kept confidential and will not be traceable to you. The results of this study may be presented at a scientific conference or published in a scientific journal. We expect that the results of the study will be available in 1 year. Direct quotes may be used in publications. All audiotape recordings will be transcribed word for word (except for any identifying information, which will not be transcribed). Recordings will be destroyed once the transcribed information has been assessed for accuracy. The audio tape recordings and the transcripts will be assigned identification numbers, and will not be labeled with your name or other identifiers. The transcripts will be stored with and destroyed at the same time as the other study data.

**Physicians:**

* 1. Have you ever wondered what is the best fat content of cow’s milk for children?
	2. What are the current clinical guidelines for milk fat consumption among children over age 2?
	3. How do you feel about these guidelines?
		1. Do you think these guidelines are beneficial? Why?
		2. Do you think these guidelines are detrimental? Why?
	4. Can you tell me about the last time you provided a milk fat recommendation for a child’s diet?
		1. How did the child’s parent(s) react?
		2. Was this a typical reaction?
		3. How often do you make cow’s milk fat recommendations?
		4. Can you remember any specific moment about recommending milk fat to parents?
			1. If not- Do they always agree?
	5. Would you ever recommend the average child over age 2 to consume whole (3.25% fat) cow’s milk? (yes/no) Why or why not?
	6. If you were to recommend whole milk to a child over age 2 years, do you anticipate any barriers to doing so? What would facilitate this?

**Parents:**

* 1. How many children do you have?
	2. What is your age range?
		1. Under 29
		2. 30-39
		3. Over 40
	3. Can you tell me about the last time you needed nutrition advice/information for your child? (If necessary: What were you looking for? Where did you find it?)
	4. What do you think about fat in your child’s diet?
	5. What do you think about cow’s milk in your child’s diet?
	6. Have you ever wondered what fat content of cow’s milk is best for your child? Tell me more about that. When?
	7. What fat content of cow’s milk (i.e. skim, 1%, 2%, whole (3.25%)) do you (or in the past, have you) provide your child? Why?
	8. For parents of children who drink reduced fat milk: If your child’s physician recommended a higher fat content for your child to consume, would you follow this recommendation? (yes/no) Why or why not?
	9. For parents of children who drink whole fat milk: If your child’s physician recommended your child to continue drinking whole milk beyond age 2, would you follow this recommendation? (yes/no) Why or why not?
	10. What are your thoughts when you hear “skim milk” or “whole milk?”
	11. Is there a situation when you would never provide whole (3.25%) cow’s milk to your child?
	12. Is there a situation when you would never provide reduced fat (skim, 1% or 2%) cow’s milk to your child?
	13. What would make it easier for you to provide whole cow’s milk to your child when they are older than 2 years of age if you were asked to do so?