Survey: How do you use eviQ?
If you are currently working in oncology as a medical doctor, we invite you to complete a short survey (5-10 minutes) that aims to better understand the way in which doctors use eviQ™ in their daily practice.

THIS SURVEY IS INDEPENDENT FROM THE CANCER INSTITUTE OF NEW SOUTH WALES.
Upon completion, you will have the option to enter a draw to win an iPad by sending an email to the research team; however this personal information will NOT be linked to your survey responses. Your completion of this survey will indicate your consent to participate in the research. This research has been approved by the Population and Health Services Research Ethics Committee. Please contact Dr Julia Langton, Faculty of Pharmacy, The University of Sydney, by phone (02) 9036 9369 or email julia.langton@sydney.edu.au if you would like any further information about this research.

1) What is your primary role:
   a) Medical
   b) Nursing
   c) Radiation Therapy
   d) Pharmacy
   e) Other: __________

2) What is your area of work:
   a) Clinical
   b) Industry
   c) Management
   d) Research
   e) Other: __________

3) What is your professional level:
   a) Advanced Trainee
   b) Fellow
   c) General Practitioner
   d) Intern/Resident
   e) Registrar
   f) Staff Specialist
   g) Other

4) What is your main area of work:
   a) Adolescent/Paediatrics
   b) General Medicine
   c) General Practice
   d) Genetics
   e) Haematology
   f) Medical Oncology
   g) Palliative Care
   h) Radiation Oncology
   i) Other

5) How many years of professional experience have you had in oncology:
   a) Less than 2 years
b) Between 2 to 5 years
c) Between 5 to 10 years
d) More than 10 years
e) Other: __________

6) Which Australian state are you working in: (Please select other if you are working outside of Australia)
a) Australian Capital Territory
b) New South Wales
c) Northern Territory
d) Queensland
e) South Australia
f) Tasmania
g) Victoria
h) Western Australia
i) Other: __________

7) Are you working in primary health care: (Please select “no” if you are working in a hospital setting)
a) Yes
b) No

8) Do you work in the public or private sector:
a) Public
b) Private
c) Both
d) Other: __________

9) In the past month, how often did you use eviQ:
a) Daily
b) Weekly
c) Fortnightly
d) Never

10) In the past month, how often did you use the following eviQ tools:

|                       | Daily | Weekly | Fortnightly | Not at all |
|-----------------------|-------|--------|-------------|------------|
| Assessment tools      |       |        |             |            |
| Cancer genetics       |       |        |             |            |
| Chemotherapy protocols|       |        |             |            |
| Clinical procedures   |       |        |             |            |
| Patient information   |       |        |             |            |
11) In the past month, how often did you use eviQ to guide the following:

| Activity                        | Daily | Weekly | Fortnightly | Not at all |
|---------------------------------|-------|--------|-------------|------------|
| Initiating therapy              |       |        |             |            |
| Monitoring therapy              |       |        |             |            |
| Altering therapy                |       |        |             |            |
| Ceasing therapy                 |       |        |             |            |

12) In the past month, how often did you use eviQ to:

| Activity                        | Daily | Weekly | Fortnightly | Not at all |
|---------------------------------|-------|--------|-------------|------------|
| Compare treatment options       |       |        |             |            |
| Prescribe medication            |       |        |             |            |
| Calculate drug doses            |       |        |             |            |
| Guide chemotherapy administration|   |        |             |            |
| Guide radiotherapy administration|   |        |             |            |
| Source treatment cost information|   |        |             |            |
| Search for side effects/toxicity|       |        |             |            |
| Provide patient                 |       |        |             |            |
| Information                                    | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
|-----------------------------------------------|-------------------|----------|----------------------------|-------|----------------|
| Teaching Resource                             |                   |          |                            |       |                |
| Access evidence-base (e.g., journal articles) |                   |          |                            |       |                |

13) To what extent do you agree with the following statements:

| Statement                                                                 | Strongly Disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
|--------------------------------------------------------------------------|-------------------|----------|----------------------------|-------|----------------|
| eviQ                                                      | 1                 | 2        | 3                          | 4     | 5              |
| is integral to my clinical practice                                    |                   |          |                            |       |                |
| allows me to function independently as a clinician                     |                   |          |                            |       |                |
| is an up-to-date source of cancer treatment information                 |                   |          |                            |       |                |
| is my primary source of oncology treatment information                 |                   |          |                            |       |                |

14) Please list any other computer-based systems or websites you use to support your clinical practice: