GHSG Tutorial on Hodgkin Lymphoma

Participant experience questionnaire

Please describe your current clinical practice. Your responses will help us select participants and tailor the course to their treatment experience and learning needs.

Select one circle per group and all applicable boxes. Type directly into the text fields, then save the completed PDF. Please keep written responses concise.

Applicant name

Email address

Professional background

1. In which country do you currently practise medicine?

Country

2. What is your medical specialty, current position, and level of postgraduate training?

Specialty and current position

- ○ In specialty training
- ○ Completed specialty training
- ○ Other

If other, please specify

3. What type of institution do you work in?

Select one primary institution type.

- ○ University or university-affiliated hospital
- ○ Specialist cancer centre
- ○ General or community hospital
- ○ Outpatient practice or clinic
- ○ Other

Institution name and any further details

4. For how many years have you been directly involved in treating patients with Hodgkin lymphoma?

Years (enter 0 if none; decimals may be used)

Clinical workload and responsibilities

5. Approximately how many patients with Hodgkin lymphoma have you personally managed in the past 12 months?

Number of individual patients (enter 0 if none)

6. Approximately how many newly diagnosed patients with Hodgkin lymphoma are treated at your institution each year?

Number per year

- [ ] I do not know

7. What is your personal role in the care of patients with Hodgkin lymphoma, particularly in treatment selection, prescribing, and monitoring?

Select all that apply. Select no direct role only if none of the other options applies.

- [ ] Select treatment and make clinical decisions independently
- [ ] Contribute to treatment decisions within a multidisciplinary team
- [ ] Prescribe treatment under supervision
- [ ] Monitor treatment response and adverse effects
- [ ] Provide inpatient or outpatient care during treatment
- [ ] Provide follow-up or survivorship care
- [ ] No direct role in patient care

Other responsibilities, if applicable

8. Does your clinical practice include adults, children and adolescents, or both?

Select one.

- ○ Adults only
- ○ Children and adolescents only
- ○ Both
- ○ I do not currently treat patients

9. What experience do you have in treating early-stage and advanced-stage Hodgkin lymphoma?

Select one level for each stage group.

Early-stage disease

- ○ None
- ○ Under supervision
- ○ Independent management

Advanced-stage disease

- ○ None
- ○ Under supervision
- ○ Independent management

Treatment experience

10. Which first-line treatment regimens for Hodgkin lymphoma have you personally prescribed or directly supervised during the past two years?

List the regimen names and, if possible, the approximate number of patients treated with each. Do not include regimens known only from reading or lectures.

Regimen and approximate number of patients

- [ ] I have not personally prescribed or directly supervised first-line treatment during the past two years

11. What experience do you have in managing relapsed or refractory Hodgkin lymphoma, and which treatments have you personally used?

Select all treatments you have personally prescribed or directly supervised. Select no experience only if none applies.

- [ ] Salvage chemotherapy
- [ ] Brentuximab vedotin
- [ ] PD-1 inhibitor therapy
- [ ] High-dose therapy and autologous stem cell transplantation
- [ ] Allogeneic stem cell transplantation
- [ ] Other treatment
- [ ] No direct experience with relapsed or refractory Hodgkin lymphoma

Specific regimens or agents, and your role

12. How do you use PET/CT findings when making treatment decisions for patients with Hodgkin lymphoma?

Select all that apply. Select no direct experience only if none of the clinical-use options applies.

- [ ] I use baseline PET/CT findings for staging and treatment planning
- [ ] I use interim PET/CT findings to inform treatment decisions
- [ ] I use end-of-treatment PET/CT findings to assess response and plan further care
- [ ] I discuss PET/CT findings with nuclear medicine or a multidisciplinary team
- [ ] No direct experience using PET/CT findings for treatment decisions

Please describe any relevant limitations or local practice

Local resources and learning needs

13. Which treatments and diagnostic procedures relevant to Hodgkin lymphoma are available at your institution, and which require referral to another centre or are difficult to access?

Select one circle in each row. Use the text field to describe restrictions such as cost, reimbursement, or eligibility.

Procedure or treatment	At own centre	By referral	Not available	Unknown
PET/CT	○	○	○	○
Radiotherapy	○	○	○	○
Conventional chemotherapy	○	○	○	○
Brentuximab vedotin	○	○	○	○
PD-1 inhibitors	○	○	○	○
Autologous stem cell transplantation	○	○	○	○
Allogeneic stem cell transplantation	○	○	○	○

Other resources or access restrictions

14. Which guidelines or institutional protocols do you usually follow, and are you involved in clinical trials for Hodgkin lymphoma?

Guidelines or protocols (name and version, if known)

Current involvement in Hodgkin lymphoma clinical trials - select one:

○ Yes ○ No

If yes, describe your role

15. Which specific clinical challenges or learning needs would you like this course to address?

Please list up to three priorities. Do not include patient-identifying information.

Priority 1

Priority 2

Priority 3