Online Supplement

Global Attitudes of Health Care Providers About Aerosolized Airway Clearance Therapy in Bronchiectasis Patients During the Coronavirus Disease 2019 Pandemic

Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandemic

The purpose of this survey is to collect the opinions (at the time of survey completion – June 2020) of physicians treating bronchiec tasis and/or NTM lung disease patients during the COVID-19 pandemic. We recognize that these opinions may change over time as new research is conducted, new data is made available, testing guidelines are updated, testing availability increases, and test result turnaround times accelerate.

1. Ple	ase spec ify the location in which you practice medicine:
\circ	Australia
\bigcirc	Austria
\circ	Belguim
0	CzechRepublic
0	Denmark
0	France
0	Germany
0	Greece
0	reland
0	ndia
0	srael
0000	taly
0	Japan
	Lithuania
Ō	Macedonia
0	Malta
0 0 0	Netherlands
	Portugal
	Romania
	Russia
	Russia Serbia Slovakia Spain Sweden
	Slovakia
	Spain
	Sweden
	Switzerland
	Turkey
	UnitedKingdom
	UnitedStates
	Other (pleasespecify):

2. Please spec ify your credentials (select all that apply).			
Medical Doctor(/ID)			
Doctor of OsteopathidMedicine(DO)			
Nurse Practitioner (NP)			
PhysicianAssistant (PA)			
Respiratory Therapist (RT)			
RegisteredNurse (RN)			
Doctor of Philosophy (PhD)			
Other (pleasespecify):			
3. Please spec ify which patients you have tr eated that have tested positive for COVID-19 (select all that appl y).			
Patient(s) diagnosedwith bronchiectasis only			
Patient(s) diagnosedwith NTM lung diseaseonly			
Patient(s) diagnosed with bronchiectasis and NTM lung disease			
I have not yet treated any patient(s) with bronchiectasis and dnTM lung disease who have tested positive for COVID-19			
Pleaseprovideany relevant comments:			

Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandenic

Aerosol Generating Procedures in an Inpatien Setting

suspected CO VID-19 pe rforming ae rosol generating procedu res such as airway clearance techniques or diagnostic testing in an inpatient setting (e.g. hosp ital)? Yes, concerns about airway clearance techniques Yes, concerns about diagnostic tests
Yes, concerns about airway clearan te chniques <u>and</u> diagnostic tests
O No concerns
Pleaseprovideany relevant conments:
Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandemic
iway ClearanceTechniquesin an InpatienSetting
inway ClearanceTechniquesin an InpatienSetting 5. In the previous questi on you indicated that you have concerns about boronch iectasis and/or NTM lung disease patients with known or suspected COVID-19 performing a irway clearance techniques (ACTs) in an inpatient setting. Please indicate which ACTs are of concern (select all that apply).
5. In the previous questi on you indicated that you have conce rns about b ronch iectasis and/o r NTM lung disease patients with known or suspected COVID-19 pe rforming a irway clearance techni ques (ACTs) in an
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5. In the previous questi on you indicated that you have concerns about bronch iectasis and/or NTM lung disease patients with known or suspected COVID-19 performing a inway clearance techniques (ACTs) in an inpatient setting. Please indicate which ACTs are of concern (select all that apply). Chest percussion/postural drainage Directedcough/activæycleof breathing
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In a previous question you indicated that you have concerns about bronchiectasis and/or NTM lung disease attents with known or suspected COVID-19 per forming a irway clearance techniques (ACTs) in an inpatient etting. Has your institution implemented any policies or procedures that enable these patients to perform ACT an inpatient setting without putting other sat risk of COVID-19 infection? If so, please specify these policies or procedures in the comment box. Yes (pleasespecify incomment box below)	
leasespecify thepolicies or procedure implemented at your institution:	
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gnosticTests in an InpatienSetting In a previous questi on you indicated that you have concerns about bronch iectasis and/or NTM lung disease atients with known or suspected COVID-19 performing ae rosol generating diagnost ic tests in an inpatient etting. Please indicate which ae rosol generating diagnost ic tests are of concern (select all that apply). Sputuminduction	
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In a previous questi on you indicated that you have concerns about bironch iectasis and/or NTM lung disease attents with known or suspected COVID-19 performing ae rosol gene rating diagnost ic tests in an inpatient etting. Please indicate which ae rosol gene rating diagnost ic tests are of concern (select all that apply). Sputuminduction Bronchoscopy Insertionof a gastric tube(e.g. NG, OG) which could generate a strong cough Nebulizer treatment which could generate a strong cough High flow oxygendelivered via OptiFlow, Vapo Them	
In a previous questi on you indicated that you have concerns about bronch iectasis and/or NTM lung disease atients with known or suspected COVID-19 performing ae rosol generating diagnost ic tests in an inpatient etting. Please indicate which ae rosol generating diagnost ic tests are of concern (select all that apply). Sputuminduction Bronchoscopy Insertionof a gastric tube(e.g. NG, OG) which could generate a strong cough Nebulizer treatment which could generate a strong cough High flow oxygendelivered via OptiFlow, VapoTherm Positiveairway pressuretherapy (e.g. BPAP, CPAP) when a viral filter is implace	
In a previous questi on you indicated that you have concerns about bironch iectasis and/or NTM lung disease atients with known or suspected COVID-19 performing ae rosol gene rating diagnost ic tests in an inpatient etting. Please indicate which ae rosol gene rating diagnost ic tests are of concern (select all that apply). Sputuminduction Bronchoscopy Insertion of a gastric tube(e.g. NG, OG) which could generate a strong cough Nebulizer treatment which could generate a strong cough High flow oxygendelivered via Opti Flow, Vapo Therm Positive airway pressure the rapy (e.g. BPAP, CPAP) when a viral filter is implace Dysphagiævaluation	

8. In a previous question you indicated that you have concerns about bronchiectasis and/or NTM lung disease patients with known or suspected COVID-19 per forming ae rosol generating diagnostic tests in an inpatient setting. Has your institution implemented any policies or procedures that enable these patients to perform aerosol generating diagnostic tests in an inpatient setting without putting others at risk of COVID-19 infection? If so, please specify these policies or procedures in the comment box. Yes No
Pleasespecify thepolicies or procedure implemented at your institution:
Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandemic Aerosol GeneratingProceduresin an OutpatienSetting
9. Do you have any conce rns about b ronch iectasis and/o r NTM lung d isease patients with known or suspected COVID-19 pe rforming ae rosol gene rating p rocedu res such as a irway clearance techniques o r diagnost ic testing in an outpatient setting (e.g. outpatient clinic, nursing ho me, assisted living facility, etc.)? Yes, concerns about airway clearantechniques Yes, concerns about airway clearantechniquesand diagnostic tests No concerns
Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandemic Airway ClearanceTechniquesin an OutpatienSetting

10. In the previous questi on you indicated that you have conce rns about bronch iectasis and/or NTM lung disease patients with known or suspected COVID-19 performing a irway clearance techniques (ACTs) in an outpatient setting. Please indicate which ACTs are of conce rn (select all that apply).
Chest percussion/postural drainage
Directedcough/activæycleof breathing
Positivexpiratory pressure(PEP)
Flutter
Acapella
High frequency chest wall oscillationests
Other (pleasespecify):
11. In a previous question you indicated that you have conce rns about bronchiectasis and/or NTM lung
disease patients with known or suspected COVID-19 performing a irway clearance techniques (ACTs) in an
outpatient setting. What recommendations would suggest for such patients? Please select all that apply and provide comments as necessary.
Recommend patients continue CTs as usual
Recommend patients stopperforming ACTs until they recover fron COVID-19
Recommend patients stopperforming ACTs until they recover holocovidate and area/room)
Other recommendation(s) (pleas especify):

Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandenic

DiagnosticTests in an OutpatienSetting

12. In a previous question you indicated that you have conce rns about bronchiectasis and/or NTM lung			
disease patients with known or suspected COVID-19 performing ae rosol generating diagnost ic tests in an			
outpatient setting. Please indicate which ae roso I gene rating d iagnost ic tests are of concern (select all that			
appl y).			
Sputuminduction			
Bronchoscopy			
Insertionof a gastric tube(e.g. NG, OG) whichcouldgenerate a strong cough			
Nebulizer treathent whichcould generate a strong cough			
High flow oxygendeliveredvia OptiFlow, VapoTherm			
Positiveairway pressuretherapy (e.g.BPAP, CPAP) whena viral filter is implace			
Dysphagiævaluation			
Esophageal procedures (e.g. Upper Gl endoscoppTEE) inan intubated patient			
Other (pleasespecify):			
13. In a previous question you indicated that you have concerns about bronchiectasis and/or NTM lung disease patients with known or suspected COVID-19 per forming ae rosol gene rating diagnost ic tests in an outpatient setting. Has you rinstitution implemented any policies or procedures that enable these patients to perform ae rosol gene rating diagnost ic tests in an outpatient setting without putting others at risk of COVID-19 infection? If so, please specify these policies or procedures in the comment box. Yes No Pleasespecify the policies or procedure implemented at your institution:			
Aerosol GeneratingProceduresAmongBronchiectasisand NTM PatientsDuringCOVID-19 Pandemic			
way ClearanceTechniquesin the Home Setting			
14. Do you have any conce rns about b ronch iectasis and/o r NTM lung d isease patients with known or suspected COVID-19 pe rforming a irway clearance techni ques in the home setting? Yes No			

Aerosol Generating Procedures Among Bronchiectasis and NTM Patients During COVID-19 Pandemic

Airway ClearanceTechniquesin the Home Settingpt. 2

15. In the previous questi on you indicated that you have conce rns about b ronch iectasis and/o r NTM lung
disease patients with known or suspected COVID-19 pe rforming a irway clearance techni ques (ACTs) in the
nome setting. Please indicate which ACTs are of concern (select all that apply).
Chest percussion/postural drainage
Directedcough/activecycleof breathing
Positivexpiratory pressure(PEP)
Flutter
Acapella
Highfrequency chest wall oscillationsts
Other (pleasespecify)
16. In a previous question you indicated that you have conce rns about bronchiectasis and/or NTM lung disease patients with known or suspected COVID-19 performing a irway clearance techniques (ACTs) in the nome setting. What recommendations would suggest for such patients? Please select all that apply and
provide comments as necessary.
Recommend patients continue CTs as usual
Recommend patients stopperforming ACTs until they recover from OVID-19
Recommend patientsmodify their environment for performing ACTs (e.g. designatean area/room or perform outsidewith no one around)
Other (pleasespecify)

Aerosol GeneratingProceduresAmongBronchiectasisandNTMPatientsDuringCOVID-19 Pandemic

Percentageof PatientsUsing Airway ClearanceTechniques

	7. Please estimate the percentage of your bronch iectasis and/or NTM lung d isease patients (regardless of OVID-19 presence) actively using airway clearance techniques.
(○ ≥ 80%
(50-79%
(30-49%
(1-30%
(0% - none of my patients usæirway clearanceechniques
Ple	easeprovideany relevant comments:
	erosol GeneratingProceduresAmongBronchiectasisand NTM PatientsDuringCOVID-19 andemic
Турє	es of Airway ClearanceTechniquesUsed by Patients
	B. Please spec ify the airway clearance techni ques used by you r bronch iectasis and/o r NTM lung d isease
[tients (select all that apply).
[
	tients (select all that apply).
L	tients (select all that apply). Chest percussion/postural drainage
[chest percussion/postural drainage Directedcough/activecycleof breathing
[chients (select all that apply). Chest percussion/postural drainage Directedcough/activæycleof breathing Positivæxpiratory pressure(PEP)
[tients (select all that apply). Chest percussion/postural drainage Directedcough/activecycleof breathing Positiveexpiratory pressure(PEP) Flutter
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[tients (select all that apply). Chest percussion/postural drainage Directedcough/activecycleof breathing Positivecxpiratory pressure(PEP) Flutter Acapella High frequency chest wall oscillationsts
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 $A erosol\,Generating \hbox{\it Procedures} Among \hbox{\it Bronchiectasis} and \hbox{\it NTMPatients} \hbox{\it During COVID-19}$

Telehealthmplementation

Pandemic

19. Has you r instituti on begun us ing telehealth (phone o r video) as a form of conducting patient visits in			
response to the need for COVID-19 preparedness/ca re for patients with bronch iectasis and/or active NTM			
lung d isease?			
Yes			
○ No			
Pleaseprovideany relevant comments:			
Aerosol GeneratingProceduresAmongBronchiectasisandNTM	/PatientsDuringCOVID-19		
Pandemic Pandemic	in attentabuting 00 vib-19		
randenic			
Experienceswith TelehealthDuring Pandemic			
20. Have you pe rsonally conducted a patient visit via telehealth during this	COVID-19 pande mic?		
Yes	·		
○ No			
NO			
Pleaseprovideany relevant comments:			
Aerosol GeneratingProceduresAmongBronchiectasisand NTM	/IPatientsDuringCOVID-19		
Pandemic			
ExperienceswithTelehealthDuringPandemicpt. 2			
21. Do you find telehea Ith valuable in treating b ronch lectasis and/o r active	NTM lung d isease patients during		
this COVID-19 pande mic? Please p rovide backg round to your answer in the			
Yes			
○ No			
Pleaseprovideany relevant comments:			