

What information is important when considering early anterior cruciate ligament (ACL) reconstruction in children?

For recruitment via social media

Consent section

1. Please make sure you have read the Parent Participant information statement before starting the survey.
2. PARENT PARTICIPANT CONSENT FORM

PARTICIPANT CONSENT FORM

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In giving my consent, I confirm that that:

Tick/initial boxes

- The details of any involvement have been explained to me, and I have been provided with a written Participant Information Statement to keep.
 - I understand the purpose of the study is to investigate what information is important for children under 18 years old before deciding to have early ACL reconstruction surgery or rehabilitation with the option for delayed ACL reconstruction.
 - I acknowledge that the risks and benefits of participating in this study have been explained to me to my satisfaction.
 - I understand that in this study I and my child will both be required to answer a pre-interview questionnaire (5-minutes) and attend an interview to provide feedback on an educational pamphlet on treatment options following ACL rupture (online, via telephone or in person pending on the COVID-19 situation) that will last 30-minutes.
 - I understand that my participation will involve my interview to be recorded.
 - I understand that information may be used in future research and the data collected for this study may use it in future projects. By providing consent I allow my information to be shared locally and internationally with other research collaborators as needed. I understand that it is unknown at this stage what these other projects will involve, and ethical approval will be gained before my information is used in these future projects.
 - I understand that being in this study is completely voluntary.
 - I am assured that my decision to let my child participate will not have an impact on any relationship with the research team or the University of Sydney or the Local Health District.
 - I understand that we (myself and/or my child) are free to withdraw from this study at any time and can choose to withdraw any information already provided (unless the data has already been de-identified or published).
 - I have been informed that the confidentiality of the information provided by myself and/or my child will be protected and will only be used for purposes that has been agreed to. I understand that information will only be told to others with my permission, except as required by law.
 - I understand that the results of this study may be published, and that publications will not contain any identifiable information about myself or my child.
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- Yes, I would be happy to participate in this study
 - No, I would prefer not to participate in this study

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3. I would like to be emailed a copy of the study results:

Yes

No

If YES, my email address is _____

4. I consent to the future use of any data I provide for research purposes. I understand that before the investigators or their collaborators use any data that I provide, they must seek additional ethics approval.

Yes

No

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Pre-interview Questionnaire

Study ID: _____

Thank you for your participation in this study, which is investigating what information is important when considering early anterior cruciate ligament (ACL) reconstruction in children under 18 years old.

We would like you to answer a few questions before the interview. This should not take more than 5-minutes.

First some quick questions about you...

1. Please indicate your gender:

- Female
- Male
- Non-binary

2. Please indicate your age: [free text response]

3. In which country were you born? [free text response]

4. What option best describes your highest level of education?

- Primary school or less
- High school (not completed)
- High school (completed)
- TAFE/Trade
- University- undergraduate degree/s (completed)
- University- postgraduate degree/s e.g. Masters, PhD (completed)
- Other (please specify) _____

5. What is your employment status?

- Employed part-time
- Employed full-time
- Casual work
- Retired
- Unemployed
- Student
- Sick/disability leave
- Other (please specify) _____

6. Do you have private health insurance?

- Yes
- No

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7. How long ago did your child rupture their ACL? _____
8. When your child ruptured their ACL, did they also damage any other structures in the knee (e.g., Meniscus or other ligament damage)?
- Yes
 - No (skip to question 9)
 - Unsure

Please specify the structures your child damaged. Please select all that apply:

- Medial collateral ligament (MCL)
 - Lateral collateral ligament (LCL)
 - Posterior cruciate ligament (PCL)
 - Medial meniscus
 - Lateral meniscus
 - Cartilage damage
 - I am unsure of the structure
9. Has your child have an ACL reconstruction surgery?
- Yes
 - No > go to question 11
- > If 'Yes' did your child re-rupture their ACL after surgery?
- Yes
 - No
- > If 'Yes', did your child have another ACL reconstruction?
- Yes
 - No
10. How long ago did your child have their most recent ACL reconstruction surgery?
- <1 month ago
 - 1-3 months ago
 - 4-6 months ago
 - 6-12 months ago
 - 12-24 months ago
 - >24 months ago

11. Please indicate in the spaces below the HIGHEST level of activity that your child participated in BEFORE THEIR INJURY and the highest level they can participate in CURRENTLY.

BEFORE INJURY: Level _____ CURRENT: Level _____

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Please choose one of the following which best describes your current activity level.

<input type="radio"/>	Level 10	Competitive Sports(Soccer, Football, Rugby (national elite)
<input type="radio"/>	Level 9	Competitive Sports(Soccer, Football, Rugby (lower divisions), hockey, wrestling, gymnastics)
<input type="radio"/>	Level 8	Competitive Sports(Racquetball, Squash, Track and Field, Alpine Skiing)
<input type="radio"/>	Level 7	Competitive Sports(Tennis, Athletics(Running), Handball, Basketball, Motorcross, Cross country track) Recreational Sports (Soccer, Football, Hockey, Squash, Athletics(jumping), Cross country track)
<input type="radio"/>	Level 6	Recreational Sports (Tennis, Handball, Basketball, Alpine skiing, Jogging 5X/week)
<input type="radio"/>	Level 5	Work (Heavy Labor) Competitive Sports (Cycling, X-country Skiing) Recreational (Jogging on uneven ground 2x/week)
<input type="radio"/>	Level 4	Work (Moderately Heavy Labor (truck driving, etc) Recreational Sports (Cycling, Cross Country Skiing, Jogging on even ground 2X/week)
<input type="radio"/>	Level 3	Work (Light Labor) Comp & Rec Sports (Swimming), Hiking, Backpacking
<input type="radio"/>	Level 2	Work (Light Labor) Walking on uneven ground possible but impossible to backpack or hike
<input type="radio"/>	Level 1	Work (Light Labor) Walking on even ground possible
<input type="radio"/>	Level 0	Sick leave or disability pension because of knee problems

12. Which one factor most influenced the decision for your child to have (or not have) an ACL reconstruction?

- Pain
- Return to sport
- Prevent further damage
- Age
- Recommendation from a health professional (e.g., an Orthopaedic surgeon or Physiotherapist)
- Online information
- Someone you know (e.g., a Friend)
- I don't know

13. How happy was your child with their treatment choice (either ACL reconstruction or non-surgical management)?

- Extremely unhappy
- Somewhat unhappy
- Neither happy or unhappy
- Somewhat happy
- Extremely happy

Finally, when are the best times to schedule you for an online interview...

Please provide below your best contact details for a researcher from the University of Sydney to contact you and arrange the follow-up interview:

Name: _____

Email: _____

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Best contact telephone number: _____

Best time/s to call: _____

We would like to interview you and your child together. Is this okay?

- Yes
 No

Please mark the times that are suitable to arrange an interview in the boxes below:

	Monday	Tuesday	Wednesday	Thursday	Friday
8 – 10am					
10 – 12pm					
12 – 2pm					
2 – 4pm					
4 – 6pm					

Thank you for completing the questionnaire.