

**Survey questionnaire:**

**1. Your GI practice is at**

- Your GI practice is at University hospital       Community hospital
- Both settings       Veterans Administration hospital

**2. Your age group (years)**

- Your age group (years) 30 – 40       51 – 60       71 and above
- 41 – 50       61 – 70

**3. Duration of GI practice (in years)**

- Duration of GI practice (in years) < 5       11 – 15
- 5 – 10       >15

**4. Which endoscopic procedures do you routinely perform?**

**IF YOU DO NOT PERFORM ANY GI ENDOSCOPIC PROCEDURES YOUR SURVEY ENDS HERE**

- Which endoscopic procedures do you routinely perform?       ERCP
- Colonoscopy       EUS
- PEG placement       None

**IF YOU DO NOT PERFORM ANY GI ENDOSCOPIC PROCEDURES YOUR SURVEY ENDS HERE  
EGD**

**5. Average number of PERSONALLY PERFORMED GI endoscopic procedures (all) per week**

- 10 – 20                                       31- 40
- 21- 30                                       >40

FOLLOWING QUESTIONS PERTAIN TO USE OF ANTI-PLATELET AGENTS AND GI ENDOSCOPIC PROCEDURES IN PATIENTS WITHOUT BLEEDING DISORDER (normal platelet count and no coagulopathy)

**6. My decision to continue or hold anti-platelet agents prior to elective GI procedures is affected by:**

- My decision to continue or hold anti-platelet agents prior to elective GI procedures is affected by: Setting (hospital vs. ambulatory)
- Patient factors eg. previous ischemic event, GI bleed
- My own experience
- I follow ASGE guidelines for certain high risk procedures only
- I strictly follow ASGE guidelines and keep myself updated by attending postgraduate course or reading published guidelines

Other (please specify)

**7. I hold all ANTI-PLATELET AGENTS prior to any scheduled GI endoscopic procedure**

- I hold all ANTI-PLATELET AGENTS prior to any scheduled GI endoscopic procedure Yes
- No

**8. If YES, I hold following anti-platelet agents for following days prior to all endoscopic procedures**

	<b>Hold for 3-5 days</b>	<b>Hold for 5-7 days</b>	<b>Hold for &gt; 7 days</b>
Aspirin			
Other NSAIDs			
Dipyridamole			
Clopidogrel			

**9. I restart anti-platelet agents post endoscopic procedures within so many days**

	<b>Do not hold prior to procedure</b>	<b>Same day</b>	<b>1-3 days</b>	<b>3 – 5 days</b>	<b>5-7 days</b>
Endoscopic biopsy					
Endoscopic polypectomy					
Esophageal dilatation					
ERCP with sphincterotomy					
EUS with FNA					

**10. I have witnessed ACUTE ISCHEMIC COMPLICATION(S) during or following endoscopic procedure (up to 4 weeks) when following anti-platelet agents WERE HELD prior to endoscopic procedure**

**Yes**

**No**

**Aspirin**

**Dipyridamole**

**Clopidogrel**

**11. I have witnessed SIGNIFICANT GI BLEEDING during or following endoscopic procedure (up to 4 weeks) when following anti-platelet agents were NOT HELD PRIOR TO endoscopic procedure**

**YES**

**NO**

**Aspirin**

**NSAIDs**

**Dipyridamole**

**Clopidogrel**

**IF YOU HOLD ALL ANTI-PLATELET AGENTS PRIOR TO ALL THE ENDOSCOPIC PROCEDURES YOUR SURVEY ENDS HERE, OTHERWISE ANSWER THESE QUESTIONS**

12. I perform following endoscopic procedures while the patient is on any anti-platelet agent(s)

YES

NO

EGD

Esophageal dilatation

Colonoscopy diagnostic only

Colonoscopy with polypectomy

PEG

ERCP

ERCP with sphincterotomy

EUS

EUS with FNA

13. I routinely perform following GI endoscopic procedures while patients are on following anti-platelet agents:

	On aspirin/NSAIDS	On aspirin + dipyridamole	On either aspirin or clopidogrel	On clopidogrel and aspirin/NSAIDS
EGD + biopsy				
EGD + polypectomy				
Colonoscopy + biopsy				
Colonoscopy with polypectomy				
Esophageal dilatation				
PEG tube placement				
ERCP with sphincterotomy				
EUS with FNA				

14. In patients on anti-platelets, I routinely perform prophylactic clipping following polypectomy

YES

NO