Electronic Supplementary Material 1

Clinical Practice Variation Needs to be Considered in Cost-Effectiveness Analyses: A Case Study of Patients with a Recent Transient Ischemic Attack or Minor Ischemic Stroke

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QUESTIONNAIRE: PRACTICE VARIATION IN THE USE OF DIAGNOSTIC TESTS AND TREATMENT CRITERIA IN PATIENTS WITH A RECENT TIA / MINOR ISCHEMIC STROKE

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Q1: In which hospital are you currently working?……...

Q2: Which initial test is used to assess the degree of carotid stenosis at the emergency unit/inpatient clinic of your hospital in patients with a TIA or minor ischemic stroke in the past 3 months? (more than 1 answer is possible)

- ○ Duplex ultrasonography (DUS)
- ○ Magnetic resonance angiography - Time of flight (MRA-TOF)
- ○ Other test, namely …….
- ○ Computed tomography angiography (CTA)
- ○ Contrast-enhanced magnetic resonance angiography (CE-MRA)

Q3: Which initial test is used to assess the degree of carotid stenosis at the outpatient clinic of your hospital in patients with a TIA or minor ischemic stroke in the past 3 months? (more than 1 answer is possible)

- ○ Duplex ultrasonography (DUS)
- ○ Magnetic resonance angiography - Time of flight (MRA-TOF)
- ○ Other test, namely …….
- ○ Computed tomography angiography (CTA)
- ○ Contrast-enhanced magnetic resonance angiography (CE-MRA)

If a different initial test is used at the emergency unit/inpatient clinic than the one at the outpatient clinic, as answered in question 2 and 3.
----> Go to question 4

If the same initial test is used at the emergency unit/inpatient clinic and outpatient clinic, as answered in question 2 and 3.
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Q4: What is the reason why different initial tests are used at the emergency unit/inpatient clinic and outpatient clinic?

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Q5: Is a second (confirmatory) test used to assess the degree of carotid stenosis based on the test result of the initial test at the emergency unit/inpatient clinic of your hospital? If yes, which test(s)? (more than 1 test possible)

- ○ No;
- ○ Yes, namely: ○ DUS ○ CTA ○ TOF-MRA ○ CE-MRA ○ DSA

Q6: Is a second (confirmatory) test used to assess the degree of carotid stenosis based on the test result of the initial test at the outpatient clinic of your hospital? If yes, which test(s)? (more than 1 test possible)

- ○ No;
- ○ Yes, namely: ○ DUS ○ CTA ○ TOF-MRA ○ CE-MRA ○ DSA

Q7: Which criteria are used in your hospital to determine if a second (confirmatory) test is needed? (e.g., gender, degree of carotid stenosis found with the initial test, plaque characteristics, etc.)

Please specify the criteria in the table below. If more space is needed, please use the space below the table.

Criteria for confirmatory test					
DUS					
CTA					
TOF-MRA					
CE-MRA					
DSA					

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Q8: The Dutch stroke guidelines recommend a DUS as initial test and a MRA or CTA as confirmatory test for women with a ≥ 70% carotid stenosis and men with a 50-69% carotid stenosis. Does your hospital deviate from the Dutch stroke guidelines?

- ○ Yes ----> Go to question 9
- ○ No ----> Go to question 10

Q9: What is the main reason why your hospital deviates from the Dutch stroke guidelines in the use of diagnostic tests in patients with a recent TIA or minor ischemic stroke? (e.g., lack of expertise in certain test, capacity problems, lack of evidence, etc.)

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Q10: Which criteria are used in your hospital to decide which patients should undergo a carotid endarterectomy (CEA)? (e.g., patient characteristics (age and gender), degree of stenosis, time interval between TIA/minor ischemic stroke and CEA, etc.)

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Q11: Besides degree of carotid stenosis, are plaque characteristics used in decisions about which patients should undergo a carotid endarterectomy (CEA)? If yes, which plaque characteristics and which diagnostic test are used for this purpose? (e.g., plaque morphology (ulcerations), plaque compositions (calcifications, CT density, echo density).

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