[Supplementary online-only material for Taylor PN, Wilkinson Hart IA, Khan MS, Slade-Sharman DEM: Correction of footdrop due to multiple sclerosis using the STIMuSTEP implanted dropped foot stimulator. *Int J MS Care*. 2016;18(5):239–247.]

Supplementary Appendix 1. Questionnaire: Use of the STIMuSTEP

[An eq	uivalent questi	onnaire for the	external FES	device and	electrodes was als	so used.]					
Name:				D	ate:						
Age: _			Time	since diagn	osis:						
Date o	f implantation:		Affec	ted side: R	ight/Left						
Unless	otherwise indi	cated, please c	ircle the appro	priate answ	er.						
1.	On average, he	ow often do yo	ou use the STIN	AuSTEP?							
	Every day	4–6 days a we	eek 2 or 3	days a wee	ek Once a weel	k					
	Less than once	e a week									
2.	On the days th	nat you use the	STIMuSTEP,	on average	how long do you	wear it?					
	All day	9–12 hours	6–9 hours	3–6 hours	s Less than 3	hours					
3.	At times when you do not use your STIMuSTEP, what means of correcting your dropped foot do you use?										
	Nothing	AFO (splint)	Caliper	Aircast sp	olint						
4.	During which activities do you use the STIMuSTEP?										
	Every activity	Outdo	ors only	Indoors o	Indoors only						
	Longer walks	only Only v	when tired	For speci	fic activities						
5.	Please indicate for which activities you would use the STIMuSTEP.										
	Walking in the	e house	Shopping	So	ocial events						
	Work	Exercising	Physiotherap	y Ti	rips out / sight see	eing					
	Other (Please	specify)									

6. How far do you regularly walk with the STIMuSTEP? Less than 10 yards 10–100 yards 100-500 yards 500 yards to 1 mile More than 1 mile 7. What are your main reasons for using the STIMuSTEP? Please place a cross by any reasons that apply to you and circle the most important reason. I can walk further when using the STIMuSTEP. I can walk faster when using the STIMuSTEP. My walking takes less effort when using the STIMuSTEP. I am less likely to trip and fall when using the STIMuSTEP. I can walk on uneven ground when using the STIMuSTEP. I feel more confident when using the STIMuSTEP. I am more independent when using the STIMuSTEP. Exercise with the STIMuSTEP keeps me fit. I do not have to use an AFO splint or caliper when using the STIMuSTEP. I do not have to use a walking stick, tripod, or walking frame when using the STIMuSTEP. I do not need assistance to walk from a carer when using the STIMuSTEP. My walking is better without the STIMuSTEP if I use the STIMuSTEP periodically. Other please specify: 8. Do you need help to put the STIMuSTEP on each day? Yes

No

9.	How long does	it take you to	put on the equ	ipment?	min						
10.											
	Increased No cha		ange	Decreased	eased						
11.	Which walking aid(s) did you use before using the STIMuSTEP?										
	Walking stick/tr	ripod	Wheelchair	Walking fra	Crutches						
	AFO splint/Cali	per	Assistance of	one person							
	Which walking	aid/s do you	use since using	g the STIMuS	STEP?						
	Walking stick/tr	ripod	Wheelchair	Walking fra	ame	Crutches					
	AFO splint/Cali	per	Assistance of one person								
12.	Since using the STIMuSTEP has there been any change in the amount you use any of the walking aids you circled in question 11?										
	Walking aid (please specify)										
			increased	no change	decrea	ased					
			increased	no change	decre	ased					
			increased	no change	decrea	ased					
13.	Does the STIMuSTEP work at the correct time when you are walking?										
	Always N	Most of the time	me Some	times Rare	ely	Never					
14.	Does the STIMuSTEP ever work at inappropriate times (eg, while sitting)?										
	Never F	Rarely	Sometimes	Ofte	en	Always					
15.	Do you adjust the STIMuSTEP settings yourself?										
	Always	Usuall	y Some	times Occ	asionally	Never					
16.	How often do th	ne STIMuSTI	EP control setti	ngs require a	djustment	:?					

	Every 1	few minutes	Every	hour E	Every few hours						
	Occasionally			Only when I put it on							
17.	How easy is it for you to adjust the settings?										
	Very easy		Easy	Fairly easy	Fairly difficult						
	Difficu	ılt	Very difficul	t							
-	-	_		-	-						
	•		_		ircle the appropriate answer						
If you e why		Agree	Indiffer	rent Disagre	e Strongly disagree						
Very easy Easy Fairly easy Fairly difficult Difficult Very difficult If you experience difficulty in adjusting the controls, please explain why											
		Agree	Indiffer	rent Disagre	<u> </u>						
(c) I	feel mo	ore confident	when I use ST	ГІMuSTEP							
		Agree	Indiffer	rent Disagre	.						
(d) I	am more independent since I received the STIMuSTEP										
If you exwhy		Agree	Indiffer	rent Disagre	.						
	STIMuSTEP has improved my quality of life										
(e) S	STIMuS	TEP has impi	coved my qual	lity of life							

(f) STIMuSTEP has a good cosmetic appearance when worn

Strongly Agree Indifferent Disagree Strongly agree disagree

(g) The sensation from the implanted electrodes is comfortable

Strongly Agree Indifferent Disagree Strongly agree disagree

Do you have to adjust the position of the control box?													
Every few minutes					Ever	Every hour			Every few hours				
Occasionally			Only	Only when I put it on									
Does	the co	ontro	ol box	ever g	et knoc	ked?							
Very	Very frequently Freque					ently Sometimes			Occasionally Never				
When	n does	this	occu	r?									
On a	verage	e, ho	w ofte	en do y	ou need	d to ch	narge t	he ba	ttery?				
STIN	On a scale from 0 to 10 indicate the level of sensation that you experience when using the STIMuSTEP ($1 = \text{no sensation}$; $5 = \text{mild}$, comfortable sensation; and $10 = \text{severe}$, uncomfortable sensation).												
1	2	3	4	5	6	7	8	9	10				
Have	you e	expe	rience	ed any o	of these	prob	lems?						
Unre	Unreliable equipment					Skin allergy Difficulty					g equi	pment	
Othe	r prob	lems	(plea	ase spe	cify):								
Did y	Did you receive an adequate explanation of the equipment and how to use it?												
Very good explanation					Good	Good explanation Adequate explanation							
Not e	Not enough explanation				Poor	Poor explanation							
Were	Were the written instructions?												
Very	good		Good	l	Adec	quate	Iı	nadec	luate		Poor		
How promptly were problems with the equipment or its use addressed?													
Verv	prom	ntly		Prom	ptly		Α	deau	ately		Slowl	V	

Very slowly Not at all

Thank you for taking the time to complete this questionnaire. Please add any further comments you may have below.