

Appendix A.

Personal Experience With Diabetes

1. Have you ever been diagnosed with type 1 diabetes (T1D)?
 - a. Yes
 - i. Conditional -- If yes:
 1. Have you ever used a continuous glucose monitor, such as the Dexcom, Freestyle Libre, Senseonics Eversense, or Medtronic Guardian?
 - a. Yes
 - b. No
 - c. Unsure
 2. Have you ever used an insulin pump?
 - a. Yes
 - b. No
 - c. Unsure
 - a. Yes
 - i. Conditional -- If yes:
 1. Have you ever used a continuous glucose monitor, such as the Dexcom, Freestyle Libre, Senseonics Eversense, or Medtronic Guardian?
 - a. Yes
 - b. No
 - c. Unsure
 2. Have you ever used an insulin pump?
 - a. Yes
 - b. No
 - c. Unsure
3. Have you ever been diagnosed with gestational diabetes (GD)?
 - a. Yes
 - i. Conditional -- If yes:
 1. Have you ever used a continuous glucose monitor, such as the Dexcom, Freestyle Libre, Senseonics Eversense, or Medtronic Guardian?
 - a. Yes
 - b. No
 - c. Unsure
 2. Have you ever used an insulin pump?
 - a. Yes
 - b. No
 - c. Unsure
4. Have any of your family or close friends used a continuous glucose monitor, such as the Dexcom, Freestyle Libre, Senseonics Eversense, or Medtronic Guardian?
 - a. Yes
 - b. No
 - c. Unsure
5. Have any of your family or close friends used an insulin pump?
 - a. Yes
 - b. No
 - c. Unsure

Advanced Artificial Pancreas Technology

6. Are you familiar with emerging closed-loop insulin pump (“artificial pancreas”) technology?
 - a. Yes
 - b. No
 - c. Unsure

Please consider a hypothetical new diabetes management system:

After entering only the patient’s weight, it automatically adjusts insulin delivery to keep blood sugars at a pre-defined target level. It reduces both hypoglycemia and hyperglycemia, achieving a hemoglobin A1c of approximately 6.8%.

7. I feel that there are advantages to patients being able to get such a system through their primary care provider.
 - a. Strongly disagree
 - b. Disagree
 - c. Agree
 - d. Strongly agree
8. I would consider ordering/prescribing such a system for my patients with T1D.
 - a. If “Yes” – move to next question
 - b. If “No”
 - i. If the manufacturer provided patient/parent training on device use, would you consider prescribing this to patients yourself?
 1. Yes
 2. No
9. I would consider ordering/prescribing such a system for my patients with T2D.
 - a. If “Yes” – move to next question
 - b. If “No”
 - ii. If the manufacturer provided patient/parent training on device use, would you consider prescribing this to patients yourself?
 1. Yes
 2. No
10. I would consider ordering/prescribing such a system for my patients with GD.
 - a. If “Yes” – move to next question
 - b. If “No”
 - iii. If the manufacturer provided patient/parent training on device use, would you consider prescribing this to patients yourself?
 1. Yes
 2. No
11. I feel that ordering/prescribing such a system would require consultation with an endocrinologist.
 - a. Yes
 - iv. Conditional: If yes – please elaborate
 - b. No
12. Do you see any potential challenges with emerging closed-loop insulin pump (“artificial pancreas”) technology being prescribed by primary care providers?
 - a. Yes
 - v. Conditional: If yes – please elaborate
 - b. No
13. Do you see any benefits to being able to prescribe emerging closed-loop insulin pump (“artificial pancreas”) technology over a specialist?
 - a. Yes
 - vi. Conditional: If yes – please elaborate
 - b. No
 - a. Conditional: If no – please elaborate

Patient Population

14. Please estimate how many patients in your continuity panel have T1D
 - a. 0
 - b. 1-5
 - c. 6-10
 - d. 11-15
 - e. 16-20
 - f. 21-25
 - g. Greater than 25
15. Please estimate how many patients with T1D you provide primary DIABETES care for.
 - a. 0
 - b. 1-5
 - c. 6-10
 - d. 11-15
 - e. 16-20
 - f. 21-25
 - g. Greater than 25
16. Please estimate how many patients in your continuity panel have T2D.
 - a. 0
 - b. 1-10
 - c. 11-25
 - d. 25-50
 - e. >50
17. Please estimate how many patients with T2D you provide primary DIABETES care for.
 - a. 0
 - b. 1-10
 - c. 11-25
 - d. 25-50
 - e. >50
18. What percentage of your patients with T2D take insulin?
 - a. 0%
 - b. 1-10%
 - c. 11-20%
 - d. 21-30%
 - e. 31-40%
 - f. 41-50%
 - g. >50%
19. Please estimate how many patients in your continuity panel have GD.
 - a. 0
 - b. 1-5
 - c. 6-10
 - d. 11-15
 - e. 16-20
 - f. 21-25
 - g. >25
20. Please estimate how many patients with GD you provide primary DIABETES care for.
 - a. 0
 - b. 1-5
 - c. 6-10
 - d. 11-15
 - e. 16-20
 - f. 21-25
 - g. >25
21. What percentage of your patients with GD take insulin?
 - a. 0%
 - b. 1-10%
 - c. 11-20%
 - d. 21-30%
 - e. 31-40%
 - f. 41-50%
 - g. >50%
 - h. N/A (I do not have patients with GD)
22. Does a Certified Diabetes Educator (CDE) see patients at your practice site?
 - a. Yes
 - b. No
 - c. Unsure
23. Does a Registered Dietician (RD) see patients at your practice site?
 - a. Yes
 - b. No
 - c. Unsure
24. How familiar are you with continuous glucose monitoring (CGM) systems, such as the Dexcom G6, Freestyle Libre, and Senseonics Eversense?
 - a. Very familiar
 - b. Somewhat familiar
 - c. Somewhat unfamiliar
 - d. Very unfamiliar
25. Do you have any patients with diabetes using continuous glucose monitoring (CGM) systems?
 - a. Yes
 - b. No
 - c. Unsure
26. Does your practice perform CGM training on site?
 - a. Yes
 - b. No
 - c. Unsure
27. Which of the following insulin delivery methods are used among your patients with diabetes? (Please select all that apply)
 - a. Syringes/insulin vials
 - b. Insulin pens
 - c. Insulin pumps
 - d. Inhaled insulin
 - e. N/A (I do not have any patients that take insulin)
28. How comfortable are you initiating insulin for T2D via **injections** (insulin pens or insulin syringes)?
 - a. Very comfortable
 - b. Somewhat comfortable
 - c. Somewhat uncomfortable
 - d. Very uncomfortable
29. How comfortable are you adjusting insulin for T2D via **injections** (insulin pens or insulin syringes)?
 - a. Very comfortable
 - b. Somewhat comfortable
 - c. Somewhat uncomfortable
 - d. Very uncomfortable
30. How comfortable are you initiating insulin for T2D via **insulin pumps**?
 - a. Very comfortable
 - b. Somewhat comfortable
 - c. Somewhat uncomfortable
 - d. Very uncomfortable
31. How comfortable are you adjusting insulin for T2D via **insulin pumps**?
 - a. Very comfortable
 - b. Somewhat comfortable
 - c. Somewhat uncomfortable
 - d. Very uncomfortable

END OF STUDY INSTRUMENT

SUPPLEMENTAL SURVEY SECTION

Provider Demographics

32. What is your age? _____ (years)
33. What is your gender?
 - a. Male
 - b. Female
 - c. Other: _____
 - d. Prefer not to answer
34. What is your position?
 - a. Attending Physician
 - b. Resident Physician
 - c. Nurse Practitioner
 - d. Physician Assistant
 - e. Other: _____
35. How long have you been practicing (after completion of training)?
 - a. I am still in training
 - b. 0-5 years
 - c. 5-10 years
 - d. 10-15 years
 - e. 15-20 years
 - f. >20 years
36. Please enter the location of your practice:
 - a. City:
 - b. State:
37. What is the setting of your practice?
 - a. Urban
 - b. City suburb
 - c. Town
 - d. Rural
38. Is your practice (Please select all that apply):
 - a. Solo
 - b. Partner
 - c. Single specialty
 - d. Multispecialty
 - e. Hospital-based
 - f. Community-based
 - g. Academic
 - h. Other: _____
39. What type of facility do you primarily practice in?
 - a. Inpatient
 - b. Outpatient
 - c. Both