

## Integrative Oncology and Survivorship Survey

1. How familiar are you with complementary therapies (also known as Integrative Oncology, Holistic Medicine, or Complementary and Alternative Medicine)?

Extremely familiar

 										-
0	1	2	3	4	5	6	7	8	9	10

- 2. A summary of complementary therapies is listed below. If offered as part of your care, what services would you be interested in? (Please check all that apply).
  - □ Acupuncture
  - □ Acupressure
  - □ Massage Therapy
  - 🗆 Yoga

Not at all familiar

- 🗆 Tai Chi
- Nutrition
- □ Spiritual Health Meditation/Mindfulness
- □ Aromatherapy
- □ Art Therapy
- □ Music Therapy
- □ Pet Therapy
- □ Wellness and Exercise
- □ Smoking Cessation
- □ Educational Seminars
- □ Child-life (children of survivors)
- $\hfill\square$  Counseling and Social Work
- □ Oncology Support groups
- □ None of the Above
- 3. What would be your preference?
  - a. Individual therapy sessions
  - b. Group therapy sessions
- 4. How often would be able to participate in complementary therapy?
  - a. Once per week
  - b. Twice per week
  - c. Three times per week
  - d. More than three times per week



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- 5. How much time would you be able to dedicate to a single therapy session?
  - e. Less than 30 minutes
  - f. 30 minutes
  - g. 45 minutes
  - h. 60 minutes
  - i. More than 60 minutes
- 6. Where would you most likely attend complementary therapy?
  - a. Winship Cancer Institute
  - b. Closer to home
  - c. Online
- **7.** If interested in complementary therapy, when would be the best time for you to attend sessions?
  - $\square$  On the day of your treatment / appointment at Winship Cancer Institute
  - □ Weekdays during working hours (before 5pm)
  - □ Weekdays in the evenings (after 5pm)
  - $\square$  Weekends
  - $\square$  No preference
- **8.** Would you be interested in participating in complementary therapy using technology such as Virtual Reality or TeleHealth?
  - a. Yes
  - b. No
  - c. Unsure
- 9. Comments

Thank you for taking the time to complete the survey

## **Provider Questions**

Friday, April 10, 2020 11:06 AM

## Questions for Providers:

- 1. Introduction
- 2. We feel that provider input is critical in the implementation of this program and are calling to get your thoughts on integrative oncology?
- What are the most important services that your patients can use?
  a. i.e. acupuncture, massage therapy, etc.
- 4. How do you think we can incorporate complementary medicine into your clinic?
- 5. What do you think are the most important aspects on integrative oncology?
- 6. What do you think are the education needs for our staff?
- 7. In terms of cost, some of these services may not be covered by insurance. How do you think we can assist our patients that lack the funds to get these services?
- 8. Are there are any gaps that you feel need to be addressed to implement this program?
- 9. Any other thoughts or recommendations?