You are being asked to participate in a research study to understand the attitudes and practices of HIV/ID providers and OB/GYN providers regarding issues of conception/ reproduction among HIV serodiscordant (one partner HIV-infected, one partner HIV-uninfected) couples. This study is being conducted by the Columbia University Medical Center Division of Infectious Diseases and Division of Reproductive Endocrinology. You do not have to participate in this study if you do not wish to. All responses will be anonymous and your responses will not be linked to you. Your candid responses are greatly appreciated. For any questions regarding this study or survey, please contact Dr. Matthew Scherer at 212-305-5096 or Dr. Nataki Douglas at 212-305-6337. Both are study co-investigators. If you have any questions about your rights as a subject, you may contact the Institutional Review Board (IRB) of the Columbia University Medical Center at (212)-305-5883. By completing this survey, you agree to participate in this research study.

Some definitions for subsequent questions:

- **Timed intercourse** = HIV-infected man has complete HIV viral suppression on antiretroviral therapy and unprotected intercourse is timed with partner ovulation.
- **Timed intercourse with pre-exposure prophylaxis (PrEP)** = Timed unprotected intercourse with antiretroviral prophylaxis for the HIV-uninfected partner.
- Sperm washing and intrauterine insemination (IUI) = Sperm is separated from the seminal fluid, and then washed sperm is placed directly into the uterus using a catheter.
- *In vitro* fertilization/intracytoplasmic sperm injection (IVF/ICSI) = Egg is retrieved surgically, then sperm injected directly into egg *in vitro*

Please select the best answer for each of the following questions.

DEMOGRAPHICS

Q1. How old are you now? _____

Q2. What is your gender?

- (a) Male
- (b) Female

Q3. How do you identify in terms of your race/ethnicity? (Please choose the group you *mostly* identify with)

(a) White/Caucasian

(b) Black/African-American

- (c) Hispanic/Latino(a)
- (d) Asian
- (e) Other: _____



Q4.	What is your specialty? (Please choose (a), (b), or (c) and the appropriate subspecialty)
	(a) Obstetrics and Gynecology

- (a) Obstetrics and Gynecolog ____Family planning
 - ____Generalist
 - MFM
 - ____Minimally invasive surgery
 - ___Oncology
 - ____REI
 - ____Urogynecology
 - ___Other (Please specify:_____)
- (b) Internal Medicine
 - ___Infectious Disease
 - ____HIV Medicine
 - ____General Medicine
 - Other (Please specify:_____)

(c) Other (Please specify:_____)

Q5. What is your professional degree?

- (a) MD/DO
- (b) RN
- (c) NP
- (d) PA
- (e) Other_____

Q6. How many years are you post residency/fellowship/training?

- (a) Current Resident
- (b) Current Fellow
- (c) <5 years
- (d) 5-10 years
- (e) 11-15 years
- (f) 16-20 years
- (g) 20-30 years
- (h) >30 years
- (i) Other _____

Q7. In what state do you practice?

Q8. What is your practice setting?

- (a) University-affiliated practice
- (b) Community practice
- (c) Solo practice
- (d) Hospitalist
- (e) Skilled nursing facility
- (f) Other _____



Q9. What is the average number of patients you see in a given day?

- (a) <10 (b) 11-20 (c) 21-30
- (d) > 30

Q10. Approximately what percentage of your patient panel is HIV-infected?

(a) <5%
(b) 5-25%
(c) 26-50%
(d) 51-75%
(e) 76-100%

GENERAL ATTITUDES

Q11. To what extent do you agree or disagree with the following statement?

"HIV-infected individuals should have the same access to reproductive assistance technologies as HIVuninfected individuals."

- (a) Strongly agree
- (b) Agree
- (c) Neutral
- (d) Disagree
- (e) Strongly disagree

Q12. To what extent do you agree or disagree with the following statement?

"It is irresponsible for HIV-infected individuals in serodiscordant relationships to try to conceive without assisted reproductive technology (sperm washing with IUI or IVF)."

- (a) Strongly agree
- (b) Agree
- (c) Neutral
- (d) Disagree
- (e) Strongly disagree

Q13. To what extent do you agree or disagree with the following statement?

"If cost and access were not barriers, I would refer all of my HIV-infected patients in serodiscordant relationships who wish to conceive for IVF."

(a) Strongly agree

- (b) Agree
- (c) Neutral
- (d) Disagree
- (e) Strongly disagree

Q14. To what extent do you agree or disagree with the following statement?

"I am comfortable counseling my HIV-infected patients on safe options for conception/pregnancy."

- (a) Strongly agree
- (b) Agree
- (c) Unsure
- (d) Disagree
- (e) Strongly disagree



PRACTICE PATTERNS

Q15. How often do you discuss issues related to conception, pregnancy, or family planning with your **female HIV-infected** patients of child-bearing age?

- (a) Always (as a matter of routine health maintenance)
- (b) Nearly always
- (c) Sometimes
- (d) Rarely
- (e) Never

Q16. How often do you discuss issues related to conception, pregnancy, or family planning with your **male HIV-infected** patients?

- (a) Always (as a matter of routine health maintenance)
- (b) Nearly always
- (c) Sometimes
- (d) Rarely
- (e) Never
- (f) N/A: I do not treat male patients

Q17. In your practice, have you ever referred an HIV serodiscordant couple for sperm washing and IUI?

- (a) Yes
- (b) No
- (c) N/A: I am a provider who performs these procedures

Q18. Have you ever referred an HIV serodiscordant couple for IVF?

- (a) Yes
- (b) No
- (c) N/A: I am a provider who performs these procedures

Q19. Have you ever **recommended** antiretroviral pre-exposure prophylaxis (PrEP) for an HIV-uninfected woman in a serodiscordant relationship who is trying to conceive?

- (a) Yes
- (b) No

Q20. Have you ever **prescribed** antiretroviral pre-exposure prophylaxis (PrEP) for an HIV-uninfected woman in a serodiscordant relationship who is trying to conceive?

- (a) Yes
- (b) No

Q21. If yes to Q19 or 20, how have you recommended that the antiretrovirals be administered?

- (a) Around the time of LH surge to correspond with timed unprotected intercourse
- (b) Daily (regardless of timing in menstrual cycle when couple is trying to conceive)



Q22. How often have you instructed patients in HIV serodiscordant relationships in timed unprotected intercourse **without** the use of PrEP?

- (a) Frequently
- (b) Occasionally
- (c) Rarely
- (d) Never

Q23. How familiar are you with the data on HIV transmission in serodiscordant couples (**HPTN 052** Cohen MS, *et al.* "Prevention of HIV-1 infection with early antiretroviral therapy". *N. Engl. J. Med.* 365 2011; (6): 493–505.)?

- (a) Very familiar
- (b) Somewhat familiar
- (c) Slightly familiar
- (d) Not at all familiar

Q24. How familiar are you with the European data on the safety and efficacy of sperm washing with IUI for HIV serodiscordant couples?

- (a) Very familiar
- (b) Somewhat familiar
- (c) Slightly familiar
- (d) Not at all familiar

Q25. Which of the following are recommended reproductive options for HIV serodiscordant couples according to the most recent DHHS guidelines? Please select **all** that apply.

- (a) Timed unprotected intercourse
- (b) Timed unprotected intercourse plus antiretroviral PrEP
- (c) Referral for sperm washing and IUI
- (d) Referral for IVF/ICSI
- (e) Do not know this particular guideline

Q26. You are counseling an HIV-infected male patient on risk of transmission of HIV to his uninfected female partner. He has been on a stable antiretroviral regimen for many years with an undetectable viral load and no current or recent sexually-transmitted infections. He is monogamous with his partner. Although they usually use barrier protection for vaginal sex, they occasionally do not. What would you estimate is the female partner's annual risk of acquiring HIV (assuming that her partner remains adherent with antiretrovirals and maintains an undetectable viral load)?

- (a) <0.1%
- (b) 0.1-1%
- (c) 1-5%
- (d) 5-10%
- (e) >10%



Thank you for your participation in this survey. Please add any suggestions or thoughts regarding any of the topics addressed above:

