

Survey to Assess Preparedness for Pediatric Cancer Survivorship Care

<p>Informed Consent: The nature and purpose of the study and its potential risks / benefits and expected duration of the study, and other relevant details of the study have been explained to me in detail. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal right being affected. I understand that the information collected about me from my participation in this research and sections of any of my medical notes may be looked at by individuals responsible for the project or from regulatory authorities where it is relevant to my taking part in research. I give permission for these individuals to have access to my responses.</p> <p>I agree to take part in the above study. (Your response – yes/ no with your signature)</p>		Yes/ No
Any valuable suggestions/ feedback		
Would you like to be informed about the results of the study?		
Name		
Age (in years)		
Sex – Male, Female, Other		
Do you have anyone in your immediate family (Parents, Grandparents, Siblings, 1st degree cousins or uncle/aunt) who is a doctor/nurse? (Yes/ No)		
Do you know of any childhood cancer survivors in your family/friends? (Yes/ No)		
College/ Hospital (AIIMS, New Delhi/ MAMC/ JIPMER)		
Your designation/ occupation (MBBS/ B.Sc. Nursing Student/ Post Graduate – MD/ MS)		
Your semester/ year of study		

Directions: Answer the following questions as true/ false	
Childhood cancer survivors remain immuno-suppressed for life after completion of their cancer treatment.	
Childhood cancer survivors should be given booster doses of vaccination post completion of treatment.	
Childhood cancer survivors have similar incidence of metabolic disorders like obesity, diabetes and related complications with respect to the normal population.	
Childhood cancer survivors are at an increased risk for developing thyroid disorders in comparison to the general population.	
Childhood cancer survivors have poor bone health compared to peers of the same age group and are at increased risk of fracture.	
Treatment of childhood cancer affects fertility among long term cancer survivors.	

Childhood cancer survivors may face intimacy issues in relation to normal sexual functioning.	
Children and siblings of childhood cancer survivors need genetic counselling and additional screening as a majority of childhood cancers are heritable.	
Childhood cancer survivors have a similar expected life span in comparison to their healthy siblings.	
The risk for developing a second cancer in childhood cancer survivors is the same as the general population.	
Childhood cancer survivors require additional screening for cancers like breast cancer compared to the normal population.	
Childhood cancer survivors have an increased risk of developing psychiatric issues like depression, stress and anxiety, for which they require additional screening.	
Childhood cancer survivors have a similar incidence of illicit drug use compared to peers of the same age.	
Radiotherapy to the brain may cause long term neurocognitive deficits in survivors.	

Directions: The following questions are meant to assess your attitude towards issues of pediatric cancer survivorship care, please indicate your choice on a 5-point Likert scale as shown below.

1 = Strongly Disagree; 2 = Disagree; 3 = Neither agree/ disagree; 4 = Agree; 5 = Strongly Agree

A childhood cancer survivor should follow up with an oncologist for their long-term healthcare rather than a primary care physician.	
I believe that the history of cancer in childhood should be revealed to prospective partners before marriage.	
I feel that childhood history of cancer should be disclosed to employers at the time of employment	
A childhood cancer survivor is unlikely to succeed in a job requiring intensive physical work (like being an athlete).	
Someone who had a history of cancer in childhood should not pursue an intellectually demanding career (like medicine)	
I feel that insurance companies are justified in denying/charging a higher premium from people who had a history of cancer in childhood.	
Joining peer support groups may be beneficial for psychological well-being of childhood cancer survivors.	
Younger children should be told about the history of their cancer when they grow up.	
I feel my knowledge regarding issues about long term childhood cancer survivorship is adequate.	
I feel that the exposure regarding childhood cancer survivorship care in my curriculum is sufficient enough to understand issues of a cancer survivor as a primary healthcare provider.	