- 1. Which best describes your professional Training? (multiple options possible)
 - Nuclear Medicine Physician
 - Nuclear Medicine Technologist
 - o Nuclear Medicine Scientist or Researcher
 - Nuclear Medicine Chemist/Pharmacist
 - Nuclear Medicine Physicist
 - Radiologist
 - o Nuclear Medicine Resident or Fellow
 - \circ Other
- 2. Which of the following best describes your practice?
 - o Private Practice, mainly outpatient
 - o University Hospital
 - Non University Hospital
 - Private Multispecialty Office
 - Industry
 - \circ Other

3. Do you treat patients with lymphoma with Bexxar or Zevalin Radioimmunotherapy?

- \circ No
- \circ Yes, 1 3 in the last 24 months
- \circ Yes, 4 7 in the last 24 months
- \circ Yes, 8 15 in the last 24 months
- \circ Yes, > 15 in the last 24 months

4. Which Radioimmunotherapy Agent for Non Hodgkins Lymphoma do you use?

- Bexxar
- \circ Zevalin
- \circ Both
- \circ Neither
- 5. Who refers patients with Non-Hodgkins Lymphoma to you for Bexxar or Zevalin? (multiple options possible)
 - Physicians from University Hospitals
 - Physicians from non University Hospitals
 - o Physicians from multispecialty offices
 - Physicians from private offices
 - \circ Patients do refer themselves
 - No one in the past 24 months
- 6. Lymphoma treatment with Bexxar or Zevalin: When should it be used? (multiple options possible)
 - o 1st line treatment for Non Hodgkins Lymphoma
 - o 2nd line treatment for Non Hodgkins Lymphoma
 - \circ 3rd line treatment for Non Hodgkins Lymphoma
 - Later than 3rd line treatment for Non Hodgkins Lymphoma
 - o Consolidation after chemoimmunotherapy in Non Hodgkins Lymphoma
 - Only investigational for Non Hodgkins Lymphoma
 - o Never
 - o In Follicular or Secondary Transformed Non Hodgkins Lymphoma
 - o In all CD20 positive Non Hodgkins Lymphoma
 - \circ Other

7. If you treat with Bexxar or Zevalin: Do you treat in an inpatient or outpatient setting?

- Inpatient
- Outpatient
- Both
- 8. Do you treat thyroid diseases with radioactive iodine?
 - \circ Yes
 - $\circ \mathrm{No}$
- 9. Do Radiation Oncologists treat with unsealed sources at your institution?
 - \circ Yes
 - o No
 - Don't know
- 10. Does your Institution accept Medicare patients for treatment with Bexxar or Zevalin?
 - \circ Yes
 - o No
 - \circ Don't know
- 11. Non Hodgkins Lymphoma treatment with Bexxar or Zevalin: What are your concerns?

	1 (no concern)	1	2	3	4 (major concern)
Zevalin or Bexxar therapy provides poor payment for the time and effort in the administration process Zevalin or Bexxar therapy provides poor payment for the time and effort in the radiolabelling process Bexxar or Zevalin take too much time from my practice in general	0	0	0	0	0
	0	0	0	0	0
	0	0	0	0	0
We have concerns about the Radiation Safety	0	0	0	0	0
We have concerns about the Dosimetry Procedure	0	0	0	0	0
Bexxar administration is too complicated in general	0	0	0	0	0
Zevalin administration is too complicated in general	0	0	0	0	0
Most Nuclear Physicians are not trained to administer potential myeloablative therapies like Zevalin or Bexxar	0	0	0	0	0
Oncologists/Hematologists prefer to treat by themselves with non-radioactive compounds Bexxar or Zevalin Treatment is too expensive	0	0	0	0	0
	0	0	0	0	0
Bexxar or Zevalin Treatment does not have enough reported randomized studies	0	0	0	0	0
There might be unexpected late side effects of Bexxar or Zevalin (MDS)	0	0	0	0	0
Concerns exist that subsequent treatments will not be possible after Bexxar or Zevalin	0	0	0	0	0

- 12. Do you believe Radioimmunotherapy for the Treatment of Non-Hodgkins Lymphoma will grow in importance? • It will grow in importance
 - It will probably grow in importance
 - uncertain
 - It will probably NOT grow in importance
 - It will NOT grow in importance

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13. Do you have any further concerns or comments pertaining to Non Hodgkins Lymphoma Treatment with Bexxar or Zevalin?