

3. Is TPMT phenotyping (enzyme assay) currently a part of your routine clinical care?
 - a. Yes
 - b. No
 - c. Does not apply

4. Is thiopurine metabolite monitoring currently a part of your routine clinical care?
 - a. Yes
 - b. No
 - c. Does not apply

5. How often do you use TPMT genotype results to determine the initial dose for the thiopurines?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

6. How often do you use TPMT phenotype results to determine the initial dose for the thiopurines?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

7. Have there been instances when thiopurine treatment has been postponed because TPMT genotype results were not *available*?
 - a. Yes
 - b. No
 - c. Does not apply

8. Have there been instances when thiopurine treatment has been postponed because TPMT genotype results were not *easily accessible*?
 - a. Yes
 - b. No
 - c. Does not apply

9. Are you able to find TPMT genotype results *easily* within the electronic medical record?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

10. Are you able to find TPMT genotype results *consistently* within the electronic medical record?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

11. Are the TPMT genotype results presented in a user-friendly manner within the electronic medical record?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

12. Do you currently receive the TPMT genotype results in a timely manner?
 - a. Always
 - b. Nearly always
 - c. Sometimes
 - d. Rarely
 - e. Never
 - f. N/A

13. What is your estimate of the average turnaround time (in business days) for the TPMT genotype results?
 - a. 1-3 days
 - b. 4-6 days
 - c. 7-9 days
 - d. >9 days
 - e. I do not know

14. I am satisfied with the current process for ordering TPMT genotype testing.
 - a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A

15. Our current process for returning TPMT genetic test results to patients are appropriate to meet patients' needs.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. We do not currently return genetic test results to patients
16. I can accurately apply the results of the TPMT genotype test to: (circle all that apply)
- a. Drug therapy dosing
 - b. Drug therapy monitoring
 - c. I cannot accurately apply the results of the TPMT genotype test
 - d. Other (specify): _____
17. I am confident in my ability to use the results of TPMT genotype testing in defining the dose of thiopurines clinically.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A

Updated TPMT Genotyping Procedures

18. I understand the rationale behind new procedures for TPMT genotyping within UF Health.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A

19. I feel that the new procedures for TPMT genotype test *ordering* will be beneficial to patient care.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A
20. I feel that the new procedures for TPMT genotype test result *documentation* in the medical record will be beneficial to patient care.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A
21. Clinical decision support in the electronic medical record (i.e., Epic alert) is an effective strategy to support thiopurine dose adjustment based on TPMT genotype test results.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A
22. I know who to contact if I have questions about the new TPMT genotype test ordering procedures.
- a. Strongly agree
 - b. Agree
 - c. Neutral
 - d. Disagree
 - e. Strongly disagree
 - f. N/A

General Pharmacogenomics

23. The UF Health Personalized Medicine Program will improve my ability to care for patients.
- Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly disagree
 - N/A
24. I believe that using genetics to guide therapeutic choices improves my ability to reduce adverse drug events.
- Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly disagree
 - N/A
25. I believe that using genetics to guide therapeutic choices improves my ability to choose an effective treatment strategy for patients.
- Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly disagree
 - N/A
26. I believe that pharmacogenetics is relevant to my current clinical practice.
- Strongly agree
 - Agree
 - Neutral
 - Disagree
 - Strongly disagree
 - N/A

27. I can *find* reliable sources of the information I need to apply pharmacogenetics *while caring for patients*.

- a. Strongly agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly disagree
- f. N/A

28. I can *find* reliable sources of pharmacogenetic information *for patient education*.

- a. Strongly agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly disagree
- f. N/A