

**Cisplatin-associated ototoxicity amongst patients receiving cancer chemotherapy and the feasibility of an audiological monitoring program**

**INTERVIEW QUESTIONNAIRE FOR ONCOLOGY CLINIC PERSONNEL AND PHARMACISTS POST OTOTOXICITY PROGRAM**

Dear Participant

We are delighted that you have agreed to participate and would like to thank you sincerely, for the information from this study can be used to help us understand the complexities associated with chemotherapy. The information that you provide will be treated with the strictest of confidence and please do not hesitate to ask us any questions that you may have during the course of the study. Contact details are reflected on the information and consent document.

**INSTRUCTIONS**

1. Please mark the appropriate answer to each question with an X, and give further detail if necessary.
2. Please answer all questions.

1. How many patients with cervical cancer did you treat/dispense cisplatin medication to, during the study period?

2. Did you notice any changes in the patient's hearing?

3. Do you provide patients with information regarding the ototoxic effects of medication?

4. Do you provide patients with any information regarding their hearing?

5. Do you enquire about patient's history of hearing difficulties?

6. How many referrals have you made to the audiologist over the last year?

7. How many hours in a day are spent on the ototoxicity monitoring program?

8. Do you feel that the ototoxicity monitoring program is beneficial?

8.1. Why?

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8.2. Was the team approach to managing the patient with cancer successful?

 Yes No Sometimes

8.2.1. Discuss

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8.2.2. Describe the collaboration with the audiologist and other team members.

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-----THANK YOU FOR YOUR TIME AND COOPERATION-----