

Design	Survey Design	The target populations of this survey were gynecologists and urologists who have SUI treatment as focus in daily practice. The survey was emailed to all gynecologists and urologists in the Netherlands who are member of the Dutch Urological Association or the Dutch Society of Obstetrics and Gynecology to reach as many as possible of the target specialists. The number of target specialists was estimated at 190 gynecologists and 70 urologists based on information of the professional organizations.
IRB (Institutional Review Board) approval and informed consent process	IRB Approval	IRB approval was not needed.
	Informed Consent	The participants were informed on the fact that their responses would be used only for the purpose of this study.
	Data Protection	The following commercial web survey provider was used: emailenquete.nl. All data was hosted by emailenquete.nl. An e-link to the survey was created, the web survey provider did not dispose of email addresses. Names and IP addresses were checked for duplicates. After removal of the duplicates, the responses were analysed anonymously.
Development and pretesting	Development and testing	The questions were composed by an expert panel of 3 subspecialist. The web survey was tested before the start of the study.
Recruitment process and the description of the sample having access to	Open survey versus closed survey	It was a closed survey. The survey tool automatically created a link that allowed access to the online survey. This link was emailed to the respondents and not published online.
	Contact Mode	The target population received an email explaining the goals and purposes of the survey and asked for their participation. This email included the link to the online survey. Three weeks after the first email, one reminder email was sent.
	Advertising the survey	No advertising was used.
Survey Administration	Web / email	The link to the survey was provided in an email. Respondents could only get access to the web based survey by clicking on the link. The data was collected automatically after their submission.
	Context	Not applicable.
	Mandatory/voluntary	Responding to the survey was voluntary.
	Incentives	A bottle of wine was raffled to the respondents once the survey was closed.
	Time/date	The survey was conducted in January 2010.
	Randomization of items or questionnaires	No items or questionnaires were randomized.
	Adaptive questioning	Adaptive questioning was mostly used. Only two questions were conditional. Based on the answer, respondents were directed to an additional question or to the next question.
	Number of Items	At the end of each division of the survey, the progression was displayed in a percentage of completeness. In total 26 questions were pointed.
	Number of screens (pages)	Only one question was displayed on a screen. After answering the question, a new question was displayed on a new screen.
	Completeness check	Each submitted response was checked for completeness. This functionality was available in the survey instrument by making all of the questions mandatory. All questions contained the answer possibility 'I don't know'.
	Review step	Respondents were able to go back to previous pages and update existing answers until the survey was finished or until they closed the survey. After the survey was finished, the respondents were not able to re-enter their survey.
Response rates	Unique site visitor	Unique visitor was determined by name and affiliated hospital and, in case missing, by IP address.
	View rate	There were 253 completed responses of 248 unique site visitors. The response rate of the target populations was 63% (163/260).
	Participation rate	All unique visitors completed the full survey.
	Completion rate	All unique visitors completed the full survey.
Preventing multiple entries from the same individual	Cookies used	Not used
	IP check	In case the name and affiliated hospital were not completed, the IP address of the client computer was used to identify potential duplicate entries from the same user. In case the survey was completed anonymously, in combination with a duplicate IP address, the last response was kept for analysis. Two entries were removed before analysis based on a duplicate IP address.
	Log file analysis	No log file analysis was performed.
	Registration	Voluntary completion of name and affiliated hospital.
Analysis	Handling of incomplete questionnaires	Only completed surveys could be submitted. Therefore no incomplete surveys were included in the analysis.
	Questionnaires submitted with an atypical timestamp	Not applicable
	Statistical correction	Not applicable