

Supplementary File 3: Text of survey of NHS clinicians

Table 1 details the questions, logic and answers of the internet survey.

Table 1: Text of NHS survey

Question	Answers and format
What is your position?	<ul style="list-style-type: none"> ○ Neurosurgeon ○ Rehabilitation Physician ○ Pain Physician ○ Physiotherapist ○ Anaesthetist ○ Pain Nurse ○ Other (please state)
Which of the following best describes your clinical setting:	<ul style="list-style-type: none"> ○ Neurosurgery Department ○ Pain management clinic ○ Other (please state)
What is the name and location of your unit?	Free text
<p>Please consider the list of treatments below. How frequently would you estimate each of them is used in patients in your unit who have <u>chronic</u> phantom limb pain?</p> <ul style="list-style-type: none"> ○ Pharmacologics ○ TENS ○ Acupuncture ○ Mirror therapy / graded motor imagery ○ Cognitive behavioural therapy ○ Myoelectric prosthesis ○ Spinal cord stimulation ○ Dorsal Root Ganglion Stimulation ○ Deep brain stimulation ○ Motor Cortex Stimulation ○ Transcranial magnetic/current stimulation ○ Dorsal root entry zone lesioning (DREZ) 	<p>(For each treatment choose from)</p> <ul style="list-style-type: none"> ● Always ● Usually ● Sometimes ● Rarely or never ● Don't know
<p>Based on your experience of patients with chronic phantom limb pain, how do you rate the effectiveness - in terms of pain relief - of the same 12 types of treatment listed below?</p> <ul style="list-style-type: none"> ○ Pharmacologics ○ TENS ○ Acupuncture ○ Mirror therapy / graded motor imagery ○ Cognitive behavioural therapy ○ Myoelectric prosthesis ○ Spinal cord stimulation ○ Dorsal root ganglion stimulation ○ Deep brain stimulation ○ Motor cortex stimulation ○ Transcranial magnetic/current stimulation 	<p>(For each treatment choose from)</p> <ul style="list-style-type: none"> ● Mostly effective ● Sometimes effective ● Rarely effective ● Don't know ● Not applicable to me

<ul style="list-style-type: none"> ○ Dorsal root entry zone lesioning (DREZ) 	
<p>Have you ever administered any of the following treatments to patients with phantom limb pain?:</p> <ul style="list-style-type: none"> ○ Spinal cord stimulation ○ Dorsal root ganglion stimulation ○ Deep brain stimulation ○ Motor cortex stimulation ○ Transcranial magnetic/current stimulation 	<ul style="list-style-type: none"> ○ Y ○ N <p>(Y/N option for each of the four treatments)</p>
<p>If one or more Ys answered to question above, then:</p> <p>Are you aware of any summary data on the effectiveness or safety of [<i>insert above answer</i>] for phantom limb pain which we are unlikely to have identified in our searches of literature databases (e.g. unpublished data, very recent conference abstracts)?</p> <p>AND, also asked:</p> <p>Regarding a future research study, do you think a randomised trial design can be successfully used to study neuromodulation therapies for chronic phantom limb pain?</p> <p>If Y: Please select which neuromodulation therapy or therapies you would like to see studied in a randomised trial.</p> <p>If N: It would be helpful if you could say why a randomised trial design might not be viable. If you have any thoughts on alternative study designs you think might be more appropriate, and on which neuromodulation treatments you would like to see studied, please also state them here.</p>	<ul style="list-style-type: none"> ○ Y ○ N <ul style="list-style-type: none"> ○ Y ○ N ○ Don't know <ul style="list-style-type: none"> ○ Spinal cord stimulation ○ Dorsal root ganglion stimulation ○ Deep brain stimulation ○ Motor cortex stimulation ○ Transcranial magnetic/current stimulation <p>Free text</p>
<p>Would you like to receive an email notification when our final report is published?</p> <ul style="list-style-type: none"> • If Y please enter your email address here: 	<ul style="list-style-type: none"> ○ Y ○ N <p>Free text</p>
<p>Thank you very much for completing the survey.</p>	