

Demographic Questionnaire

Experiences of physiotherapists working with adults living with Long COVID in Canada: a qualitative study

[to be administered via a Word document with shared screen on Zoom – interviewer will enter responses into the Word document directly on screen after the interview]

Thank you for taking part in the Long COVID and Rehabilitation study with the goal of examining the experiences of physical therapists working with adults living with Long COVID in Canada.

Thank you for completing the interview. This part of the study involves completing a 2-minute demographic questionnaire. Questionnaire responses will be grouped together to help us describe, in general, the characteristics of the participants who took part in the study and will not be linked to you as an individual.

PERSONAL DEMOGRAPHIC QUESTIONS (the interviewer will highlight the responses directly in the Word document and will save the document with the P number.

Participant Number: [enter P number here]

Interview Date: [enter date here]

PART 1 - BEFORE THE INTERVIEW – Demographic Questions

- 1) How many **years** have you been working as a physical therapist? _____ years
- 2) How many **months** have you been working with adults living with Long COVID?
_____ months
- 3) What **practice setting** do you currently work in? (highlight one response)
 - a) Acute care hospital
 - b) Rehabilitation hospital (private, work-related injuries)
 - c) Private practice
 - d) Home care
 - e) Long term care
 - f) Other (specify): _____
- 4) What is the **city or town** that you currently practice in? _____
- 5) What **province or territory** do you practice in? _____

Supplemental File 2 – Demographic Questionnaire

Experiences of physiotherapists working with adults living with Long COVID in Canada: a qualitative study

6) Approximately **how many patients** have you treated in the past year that are/were living with Long COVID? An estimate is fine. _____ patients.

7) Have you personally **had COVID-19** in the past? (highlight one answer)

- a) Yes
- b) No
- c) Unsure

8) Do you have personal **lived experiences** of living with Long COVID? (highlight one answer)

- a) Yes
- b) No
- c) Unsure

PART 2 - AFTER THE INTERVIEW – Demographic Questions (highlight the response in yellow)

Question	Response options
9) What is your age (in years)?	_____ years
10) What sex were you assigned at birth/ is on your birth certificate?	<ul style="list-style-type: none"> ● Male ● Female ● Intersex ● Not listed (please specify): _____ ● Prefer not to answer
11) What gender do you identify with?	<ul style="list-style-type: none"> ● Man ● Woman ● Non-binary ● Prefer to self-describe (please specify): _____ ● Prefer not to answer
12) Which ethnicity do you identify the most with?	<ul style="list-style-type: none"> ● First Nations ● Inuit ● Métis

Supplemental File 2 – Demographic Questionnaire

Experiences of physiotherapists working with adults living with Long COVID in Canada: a qualitative study

Question	Response options
	<ul style="list-style-type: none"> ● Other Indigenous Peoples (please specify): _____ ● Asian ● Black or African ● Caribbean ● Native Hawaiian or Pacific Islander ● Hispanic ● White ● Not listed (please specify): _____ ● Prefer not to answer

PROFESSIONAL DEMOGRAPHIC QUESTIONS

Question	Response options
13) Which of the following best describes your employment ?	<ul style="list-style-type: none"> ● Employed - Full time PT ● Employed - Part time PT
14) Have you worked with children or youth (<18 years old) in the past year who are living with Long COVID?	<ul style="list-style-type: none"> ● Yes ● No
15) Which area of practice do you most identify as currently working with? (check one that best applies)	<ul style="list-style-type: none"> ● Musculoskeletal/orthopaedics ● Neurological ● Cardiorespiratory ● Paediatric ● Geriatric ● Leadership/Administrative/Management ● Research ● Other or Mixed (please specify): _____

Supplemental File 2 – Demographic Questionnaire

Experiences of physiotherapists working with adults living with Long COVID in Canada: a qualitative study

Question	Response options
16) What percentage of your caseload is delivered virtually/remotely? (please provide a rough best estimate)	<ul style="list-style-type: none">● 0% virtual● 25% virtual; 75% in-person● 50% virtual; 50% in-person● 75% virtual; 25% in-person● 100% virtual● Other (please specify): _____
17) Have patients accessed your physical therapy services specifically for Long COVID rehabilitation?	<ul style="list-style-type: none">● Yes● No● Don't know
18) Have you received physician referrals for any of your patients specifically for Long COVID physical therapy?	<ul style="list-style-type: none">● Yes● No● Don't know

Thank you and closing remarks

Thank you for taking the time to complete the questionnaire for our study examining the experiences of physical therapists working with adults living with Long COVID in Canada.