

The questionnaire used for the telephone interviewed performed in order to assess the presence and intensity of ipsilateral chest pain and paresthesia and to verify the need and frequency of pain medications in 920 patients undergoing VATS for primary spontaneous pneumothorax.

Question 1) Do you have any chest pain related to the surgical procedure you performed for primary spontaneous pneumothorax treatment?

Possible answers: yes; no.

Question 2) How do you rate the chest pain using a numerical scale from 0 to 10 considering that 0 means no pain, 1-2 minimal pain, 3-4 discomforting pain, 5-6 distressing pain, 7-8 horrible pain and 9-10 worst pain possible?

Possible answers: 0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10.

Question 3) If the patient refers to have chest pain, Do you need to use painkillers to control chest pain?

Possible answers: yes; no.

Question 4) If the patient answers yes to question 3, How frequently do you require painkillers?

Possible answers: never; weekly; rarely (once a month).

Question 5) Do you have any altered sensation distinguishable from pain (as pins and needles, numbness, swollen) localized to the chest wall or around the chest wounds of the surgical procedure you performed for primary spontaneous pneumothorax treatment?

Possible answers: yes; no.