

Short Term Outcomes of Robotic Assisted versus Open Transthoracic Diaphragmatic Plication Supplement- Patient Questionnaire

1. Think of how your breathing felt after surgery. How did your breathing at that time compare to how it felt before surgery?
 - Much improved
 - Improved
 - Slightly improved
 - Unchanged
 - Slightly worse
 - Worse
 - Much worse

2. Think back to your activity level after surgery. How did your activity level at that time compare to your activity level before surgery?
 - Much improved
 - Improved
 - Slightly improved
 - Unchanged
 - Slightly worse
 - Worse
 - Much worse

3. Within the past four weeks, how has your breathing changed since surgery?
 - My breathing has improved
 - My breathing has not changed since after the surgery
 - My breathing has worsened
 - My breathing now feels the same as it did before surgery

4. Within the past four weeks, how has your activity level changed since surgery?
 - My activity level has improved
 - My activity level has not changed since after the surgery
 - My activity level has worsened
 - My activity level is now the same as it was before surgery

5. How would you describe your current level of breathlessness?³
 - I do not experience any breathlessness except with intense exercise
 - I experience breathlessness when walking quickly or up a hill
 - I experience breathlessness after walking for fifteen minutes
 - I experience breathlessness after walking for a few minutes
 - I am too breathless to leave the house for a walk

6. Within the past four weeks, has shortness of breath limited any of the following activities for you?⁴

Intense activities such as running or lifting heavy objects

 - Yes, limited a lot
 - Yes, limited a little
 - No, not limited at all

³ Based on Medical Research Council Dyspnea Scale. Used with permission of the Medical Research Council.

⁴ Based on 36-Item Health Survey developed at RAND as part of the Medical Outcomes Study

Moderate activities such as moving a table or pushing a vacuum cleaner

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

Climbing several flights of stairs

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

Climbing one flight of stairs

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

Walking several blocks

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

Walking one block

- Yes, limited a lot
- Yes, limited a little
- No, not limited at all

7. How would you rate your pain level now compared to immediately after surgery?

- Much better now
- Somewhat better now
- About the same
- Somewhat worse now
- Much worse now

8. How strongly do you agree or disagree with the following statement? "I would recommend this surgery to a friend or relative who is experiencing the same symptoms I had before surgery."

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree