

## MEDICAL SETTING & ROLE

1. First, we would like to get to know a little about you and the medical setting where you primarily practice.

Please respond to the following questions as accurately as you can.

**Do you take care of patients under 1 year of age?**

Yes  No

2. **What year did you complete your residency training?**

Please provide only the 4-digit year

Year

3. **Did you complete a fellowship(s) after residency?**

Yes (Please specify the field of study)

No

4. **Which of the below best describes the setting where you primarily practice?**

Academic Institution  Community Health Center  Community Hospital  Multi-Specialty Group Practice  Small Private Practice

Large Private Practice

5. **How would you characterize the geographic area where you primarily practice?**

Urban  Suburban  Rural

6. **What is the ZIP CODE of the site where you primarily practice?**

Zip Code

## LEARNING RESOURCES AND MODALITIES

Now, we will explore your thoughts and experiences regarding food allergy in infants (0-12 months). Please indicate the various learning modalities that have influenced your practice with respect to the prevention of food allergy in infants.

7. **Which of the following training and/or educational resources have you utilized or received regarding infant food allergy? Please check ALL that apply.**

- Medical School Curriculum/Experience
- Residency Training
- MOC/CEU Training
- Published Practice Parameters/Guidelines
- Clinical Practice
- Medical Newsletter
- Conference
- Grand Rounds
- UpToDate
- Internet
- Preceptor/Mentor

Colleague (Non-Allergist)

Colleague (Allergist)

Other (please specify):

None

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**8. Which of the following training and/or educational resources do you most often utilize or reference to answer your questions regarding food allergy? Please select **ONE**.**

Medical School Curriculum/Experience

Residency Training

MOC/CEU Training

Published Practice Parameters/Guidelines

Clinical Practice

Medical Newsletter

Conference

Grand Rounds

UpToDate

Internet

Preceptor/Mentor

Colleague (Non-Allergist)

Colleague (Allergist)

Other (please specify):

None

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### 2017 NIAID ADDENDUM GUIDELINES

In these next few questions, we would like to hear about your thoughts and experiences regarding the 2017 National Institute of Allergy and Infectious Diseases (NIAID) Addendum Guidelines for the Prevention of Peanut Allergy in the United States. Please answer the following questions as accurately as possible.

**9. Are you aware of the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy in the United States?**

I am not aware

I am aware, but not comfortable with implementation.

I am aware and comfortable with implementation.

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**10. According to the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy, what constitutes an infant at 'high risk' for peanut allergy? Please select **ALL** of the correct criteria.**

Any family history of atopic disease/allergy

First-degree relative with atopic disease/allergy

Parental peanut allergy

Sibling of a peanut-allergic child

Mild to moderate eczema

Severe eczema

Cow milk allergy

Egg allergy

History of asthma

History of rhinitis

Other (please specify):

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**11. According to the NIAID Addendum Guidelines for the Prevention of Peanut Allergy, when should peanut introduction occur in patients with mild to moderate eczema?**

4-6 months

Around 6 months

Age appropriate and in accordance with family preferences and cultural practices

1 year or older

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**12. According to the NIAID Addendum Guidelines for the Prevention of Peanut Allergy,**

prior to peanut introduction, what group(s) should be screened for peanut sensitization (peanut specific IgE or peanut skin test)? Choose ALL of the correct answers.

- All infants
- Infants with mild/moderate eczema
- Infants with severe eczema
- Infant with parent or sibling with peanut allergy
- Infants with egg allergy
- Infants with milk allergy
- No screening is suggested

13. According to the NIAID Addendum Guidelines for the Prevention of Peanut Allergy, which of the below fulfills the definition of 'severe eczema'? Choose ALL of the correct answers.

- Frequent topical corticosteroid use despite appropriate emollient use
- Eczema affecting greater than 25% of the skin surface
- Frequent use of calcineurin inhibitors despite appropriate emollient use
- Patient that has been referred to dermatology
- Patient that has comorbid food allergy and/or frequent albuterol use

## PROFESSIONAL RECOMMENDATIONS

In these two questions, we would like to hear about your clinical practice. Please answer the following questions as accurately as possible.

14. Do you recommend hand washing before applying lotions, topical medications, or diaper changes?

- Always
- Most of the time
- Sometimes
- Never

15. Do you provide ongoing care to infants beyond the immediate newborn period?

- Yes  No

In these next few questions, we would like to hear about the earliest age at which you would recommend the introduction of specific foods in a healthy child WITHOUT eczema or food allergy.

16. What is the earliest age that you recommend the introduction of **Pureed Fruits/Vegetables** in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

17. What is the earliest age that you recommend the introduction of **Infant Cereal** in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

18. What is the earliest age that you recommend the introduction of **Peanut** in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

19. What is the earliest age that you recommend the introduction of **Egg** in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

20. What is the earliest age that you recommend the introduction of **Cow's milk products** (e.g. yogurt, cheese) in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

21. What is the earliest age that you recommend the introduction of **Tree Nuts** in a healthy child WITHOUT eczema or food allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

In these next few questions, we would like to hear about the earliest age at which you would recommend the introduction of specific foods in a

healthy child WITH a family history (1st degree relative) of food allergies, including peanut.

22. What is the earliest age that you recommend introduction of **pureed fruits/vegetables** in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

23. What is the earliest age that you recommend introduction of **infant cereal** in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

24. What is the earliest age that you recommend introduction of **peanut** in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

25. What is the earliest age that you recommend introduction of **egg** in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

26. What is the earliest age that you recommend introduction of **Cow's milk products** (e.g. yogurt, cheese) in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

27. What is the earliest age that you recommend introduction of **Tree Nuts** in a healthy child WITH a family history of food allergies (1st degree relative), including **peanut**?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

In these next few questions, we would like to hear about the earliest age at which you would recommend the introduction of specific foods in a healthy child WITH severe eczema and/or egg allergy.

28. What is the earliest age that you recommend the introduction of **pureed fruits/vegetables** in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

29. What is the earliest age that you recommend the introduction of **infant cereal** in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

30. What is the earliest age that you recommend the introduction of **peanut** in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

31. What is the earliest age that you recommend the introduction of **egg** in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

32. What is the earliest age that you recommend the introduction of **Cow's milk products** (e.g. yogurt, cheese) in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

33. What is the earliest age that you recommend the introduction of **tree nuts** in a child WITH severe eczema and/or egg allergy?

- 3 months  4 months  5 months  6 months  7-9 months  10-11 months  12-23 months  24-35 months  36+ months
- Recommend allergy referral or blood specific IgE before introduction

## CONTINUITY OF CARE BRANCH

In this section, we would like to ask you a few questions regarding the type of guidance that you provide throughout the pediatric care continuum.

**34. When do you first discuss early introduction of potential allergens other than peanut?**

- Newborn visit
- 2 month well-child visit
- 4 month well-child visit
- 6 month well-child visit
- 9 month well-child visit
- 1 year well-child visit
- I do not discuss this

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**35. In your opinion, what are the barriers of discussing early introduction of allergenic foods at well-child visits? Check ALL that apply.**

- Fear of giving peanut or other allergenic foods early due to concern for choking
- Fear of giving peanuts or other allergenic foods early due to the concern for potential allergy development
- Fear of giving peanut or other allergic foods early due to the concern that the patients lack the motor development
- Family willingness
- Lack of time to effectively communicate
- Unsure of how to communicate the guidelines
- Lack of guidelines for allergenic foods, except for peanut
- Lack of awareness of the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy
- Lack of comfort with the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy
- Disagreement with the 2017 NIAID Addendum Guidelines for the Prevention of Peanut Allergy
- Belief that the patient should exclusively breastfeed in the first 6 months of life
- Primary language of the patient is different than the provider's primary language
- Do not think it is important
- Lack of resources or educational materials
- Concern for liability if the patient reactions at home after early introduction
- Other (please specify):

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**36. What do you perceive as a barrier, if any, to feeding potentially allergenic foods in the home after you have had the discussion about introduction? Check ALL that apply.**

- Fear of giving peanut or other allergenic foods early due to concern for choking
- Fear of giving peanuts or other allergenic foods early due to the concern for potential allergy development
- Fear of giving peanut or other allergic foods early due to the concern that the patients lack the motor development
- Parental acceptance of the guidelines
- Access to allergists
- Lack of guidelines for allergenic foods, except for peanut
- Confusion by conflicting advice
- Desire to exclusively breast feed
- Family history of food allergies
- Cultural considerations
- Family preference
- Lack of trust in the pediatrician
- Social media influence
- Belief in the advice of family and/or friends that conflicts with the advice from the primary care physician
- Lack of resources or educational materials
- Other (please specify):

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**37. If you seek an allergist referral, what is the approximate wait time for an infant to see an allergist?**

*\*Please provide a whole number estimation in weeks*

Weeks

Submit

Reset

