

SUPPLEMENT 1-PREFERENCE QUESTIONNAIRE

Clinics Hospital of the School of Medicine of the University of Sao Paulo-HCFMUSP

Questionnaire - step I
Date: Name:
1. Do you worry about your child being born prematurely?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always
2. Would you use any treatment to avoid prematurity?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always
3. Which of the treatments being investigated to avoid prematurity did you already know?
□ Pessary □ Progesterone □ None
4. If you are pregnant with twins and could choose, which treatment would you use?
□ Pessary □ Pessary + progesterone □ Ovules
5. If you are pregnant with a single child and you could choose, which method would you use?
□ Pessary □ Progesterone □ None
6. Do you think the pessary can have other effects on the baby?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always
7. Do you think progesterone can have other effects on the baby?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always
8. Do you think the pessary can have other effects on you?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always
9. Do you think progesterone can have other effects on you?
\square Not at all \square A little \square Moderately \square A lot \square All the time/always

Correspondence to: Mario Henrique Burlacchini de Carvalho, Department of Obstetrics and Gynecology, FMUSP Medical School, University of São Paulo, São Paulo, Brazil, Tel: +55 11 2661 8183; E-mail: mario.burlacchini@hc.fm.usp.br

Received: 20-Jul-2023, Manuscript No. CMCH-23-22262; Editor assigned: 24-Jul-2023, Pre QC No. CMCH-23-22262 (PQ); Reviewed: 07-Aug-2023, QC No. CMCH-23-22262; Revised: 14-Aug-2023, Manuscript No. CMCH-23-22262 (R); Published: 21-Aug-2023, DOI: 10.35248/2090-7214.23.S17.001

Citation: Perrusi SDAFC, Brizot MDL, Garavazzo SEB, Pucci CLM, Gomez UT, Peres SV, et al. (2023) Evaluation of Patient Preferences for Treatments to Prevent Preterm Births in Singleton and Twin Pregnancies with a Short Cervix. Clinics Mother Child Health. S17:001.

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