For this survey, refer to the enclosed table for corticosteroid types. As noted in the cover letter, these questions refer to conditions that include injecting painful degenerative and overuse conditions, strains (e.g., acromioclavicular joint), or peri-scapular trigger points.

1. Do you use corticosteroid injections for treating painful shoulder conditions? Yes  No
   If yes, please fill out the remainder of the survey. If no, please state why and return the survey.

2. Which types (and how much volume) corticosteroid do you typically use for the:

<table>
<thead>
<tr>
<th>Type of Corticosteroid(s) and strength (mg/ml)</th>
<th>Volume of Cortisone (cc)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(see attached table for types)</td>
<td>(please circle one)</td>
</tr>
</tbody>
</table>

   - **Acromioclavicular joint**:  .25 .50 .75 1.0 1.25 1.50 1.75 2.0 Other:___
   - **Subacromial bursa**:  .25 .50 .75 1.0 1.25 1.50 1.75 2.0 Other:___
   - **Glenohumeral joint**:  .25 .50 .75 1.0 1.25 1.50 1.75 2.0 Other:___
   - **Biceps tendon sheath**:  .25 .50 .75 1.0 1.25 1.50 1.75 2.0 Other:___
   - **Trigger points**:  .25 .50 .75 1.0 1.25 1.50 1.75 2.0 Other:___

3. If you use different types of corticosteroid for the different shoulder locations, please explain your rationale in choosing a specific corticosteroid for a particular area of the shoulder.

4. Which type (and how much volume) of local anesthetic do you typically use for the:

<table>
<thead>
<tr>
<th>Type of local anesthetic (please circle one or both if combo)</th>
<th>Volume of anesthetic (cc) (please circle one)</th>
</tr>
</thead>
</table>

   - **Acromioclavicular joint**:  Lidocaine  Bupivicaine  1 2 3 4 5 6 7 8 9 10 Other:___
   - **Subacromial bursa**:  Lidocaine  Bupivicaine  1 2 3 4 5 6 7 8 9 10 Other:___
   - **Glenohumeral joint**:  Lidocaine  Bupivicaine  1 2 3 4 5 6 7 8 9 10 Other:___
   - **Biceps tendon sheath**:  Lidocaine  Bupivicaine  1 2 3 4 5 6 7 8 9 10 Other:___
   - **Trigger points**:  Lidocaine  Bupivicaine  1 2 3 4 5 6 7 8 9 10 Other:___

5. What do you think are the advantages of the corticosteroid(s) that you use?

<table>
<thead>
<tr>
<th>Corticosteroid Type</th>
<th>Advantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Choice</td>
<td></td>
</tr>
<tr>
<td>2nd Choice</td>
<td></td>
</tr>
</tbody>
</table>
6. Were you aware that there are acetate and phosphate types of corticosteroids?

☐ Yes ☐ No

If yes, which type is more soluble?

☐ Acetate ☐ Phosphate ☐ Don’t Know

7. Were you aware that acetate vs. phosphate corticosteroids may have different degrees of local and systemic absorption, and differences in duration of their anti-inflammatory affect?

☐ Yes ☐ No

8. Do you ever use acetate-type corticosteroids (instead of phosphate types) for treating specific shoulder conditions? *

☐ Yes ☐ No

If yes, what are these conditions or situations? ________________________________________

What is your rational for using acetate-type corticosteroids for each of these conditions or situations?

__________________________________________________________________________________

__________________________________________________________________________________

9. Do you ever use phosphate-type corticosteroids (instead of acetate types) for treating specific shoulder conditions? *

☐ Yes ☐ No

If yes, what are these conditions or situations? ________________________________________

What is your rational for using phosphate-type corticosteroids for each of these conditions or situations?

__________________________________________________________________________________

__________________________________________________________________________________

10. Compared to the typical corticosteroid that you use for injecting the subacromial bursa, do you use a different type of corticosteroid for injecting the shoulder region of diabetic patients?

☐ Yes ☐ No

If yes, which type of corticosteroid do you use and why?_____________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

* For the purpose of this survey, “shoulder region” or “shoulder condition” refers to the acromioclavicular joint, subacromial bursa, glenohumeral joint and/or biceps tendon sheath. Additional “conditions” may include: frozen shoulder syndrome, scapulo-thoracic bursitis, and trigger points.
11. Compared to the typical corticosteroid that you use for injecting the subacromial bursa, do you use a different type of corticosteroid for injecting the shoulder region of patients with other specific (non-diabetic) medical conditions?

☐ Yes    ☐ No

If yes, what are these conditions or situations? ________________________________

12. Do you use a different type of corticosteroid for young athletes (<30 years) vs. middle-aged laborers?

☐ Yes    ☐ No

If yes, which type of corticosteroid?

Young Athlete: _______________    Middle-age: _______________

13. How many years have you been in the practice of medicine or surgery?

☐ 0-5    ☐ 6-10    ☐ 11-15    ☐ 16-20    ☐ >20

14. Your gender and age are:

☐ Male    ☐ Female

Age: __________

<table>
<thead>
<tr>
<th>Table</th>
<th>Common Injectable Corticosteroids</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Generic Name</strong></td>
<td><strong>Trade Name</strong></td>
</tr>
<tr>
<td>Betamethasone Sodium Phosphate</td>
<td>Celestone</td>
</tr>
<tr>
<td>Betamethasone sodium phosphate-betamethasone acetate</td>
<td>Celestone-Soluspan</td>
</tr>
<tr>
<td>Dexamethasone acetate</td>
<td>Decadron-LA</td>
</tr>
<tr>
<td>Dexamethasone sodium phosphate</td>
<td>Decadron</td>
</tr>
<tr>
<td>Hydrocortisone acetate</td>
<td>Hydrocorticone</td>
</tr>
<tr>
<td>Methylprednisolone acetate</td>
<td>Depo-Medrol</td>
</tr>
<tr>
<td>Prednisolone sodium phosphate</td>
<td>Hydeltrasol</td>
</tr>
<tr>
<td>Prednisolone tebutate</td>
<td>Hydeltrasol-TBA</td>
</tr>
<tr>
<td>Triamcinolone acetonide</td>
<td>Kenalog</td>
</tr>
<tr>
<td>Triamcinolone diacetonide</td>
<td>Aristospan forte</td>
</tr>
<tr>
<td>Triamcinolone hexacetonide</td>
<td>Aristospan</td>
</tr>
</tbody>
</table>